

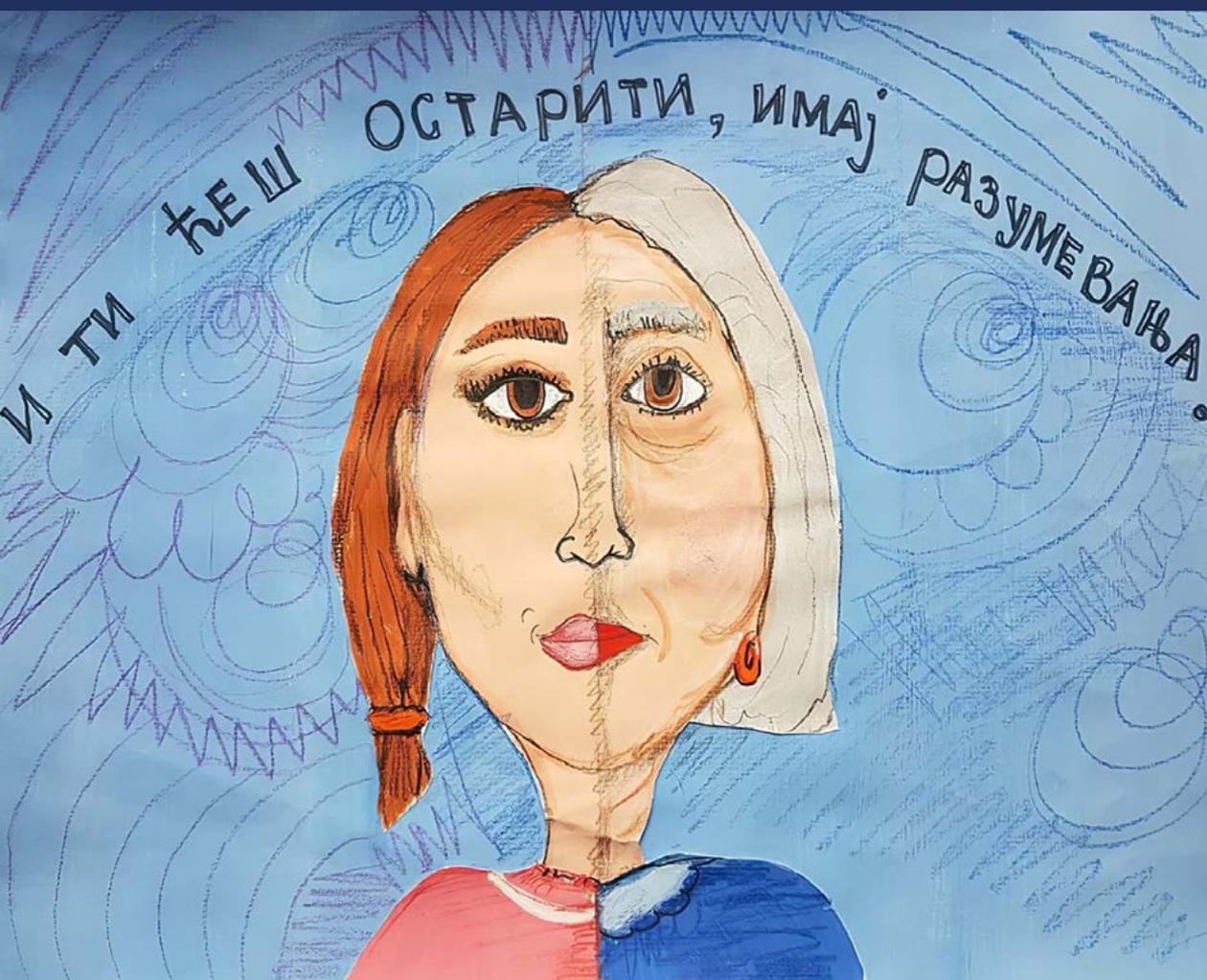


REPUBLIC OF
SERBIA



COMMISSIONER
FOR PROTECTION
OF EQUALITY

SPECIAL REPORT ON DISCRIMINATION AGAINST OLDER PERSONS



Belgrade, April 2021

SPECIAL REPORT
ON DISCRIMINATION
AGAINST OLDER PERSONS

Belgrade, April 2021

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*Old age is the only certain future for all of us,
and intergenerational solidarity is the fundamental contract
between all members of the society.*

*It was raining, it was cold,
I was walking to the school.
On my side of the street
Everyone was carrying umbrellas.*

*Everyone was rushing,
paying no attention to others,
when I saw before me a slowly moving
frail and white-haired older man.*

*One step at a time, with head bent down,
he stops often, as if falling asleep.
His tired face, wet from rain
seems to be saying: "I give up!"*

*I approach him and take his hand
to help his tired soul,
and he gives me a gentle glance
and I see that he is glad.
He finally arrived at his doorstep,
raised his tired eyes to the sky.
His heavy, trembling hand
took out a candy from his pocket.*

*He gives it to me and says: "Thank you!"
for being so helpful.
My heart was filled with joy
and I know I have grown.*

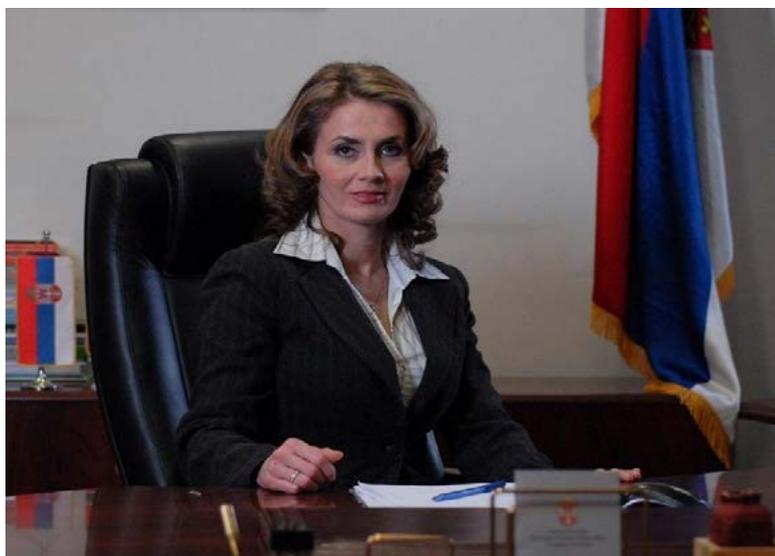
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All terms used in the male grammatical gender (in Serbian language) refer both to the male and female gender of the person in question..

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Foreword

Distinguished Members of Parliament,
Dear readers,

The Commissioner for the Protection of Equality is not and must not be a mere observer of the situation at the time in which s/he acts. The role of human rights institutions are twofold – acting in individual cases requires protection of citizens against discrimination, but also preventively, proactively, pointing out and warning of problems, challenges, cracks in the system, worries that bother citizens and are not necessarily violations of rights. The defense and promotion of basic human rights, including the right to equality, as a condition for the exercise of all other rights, implies continuous work with the use of all legally available mechanisms. Using one of its powers from the Law on Prohibition of Discrimination, which is, to be able to submit a Special Report to the National Assembly on its own initiative if there are particularly important reasons, has resulted in your having before you a Special Report on Discrimination against Older Persons.

There are several important reasons for preparing this report. Every fifth citizen of Serbia (20.2%), i.e. more than 1,400,000 of its inhabitants, are older than 65, and in a context where we need to bear in mind the trend of a declining natural increase rate from year to year, and the significantly extended length of average life expectancy – one of the greatest achievements of civilization. At the

same time, the position of older persons in Serbia, on the European continent and in many societies, is complex globally, and in many segments unfavorable, especially having in mind modern social values that favor speed, appearance, a kind of 'youth terror', constant changes and instant solutions in many aspects of life. In reality, many older people live in poverty or at risk of becoming poor, and some are exposed to abuse and neglect, self-neglect, disrespect, marginalization, and even reduction to being considered an object, a 'thing'. They are not fast enough because they took shape at another time, and their smartphone is not a matter of routine with 'two clicks to success', for whatever it means. Different forms of discrimination against them are present in our environment. If racism and anti-Semitism were the dominant forms of discrimination in the last century, ageism could become the most present form of discrimination in the 21st century. It could become so, I say, but whether it will depends on us and on our approach and attitude towards ageing and older persons. This report was made with the intention of contributing with this institution to preventing such an outcome in the future. To clarify and to remind ourselves: ageism is the combination of stereotypes, prejudices, and discrimination due to age, and the term was coined by a doctor, gerontologist Robert Butler, and came into wider use on our continent in the last decade, as a warning of the emerging negative trend towards older people across Europe. All of us who are fighting today for the rule of law, justice, equality, and preservation of individual freedoms, which are the foundation of our democracy, have an obligation to do everything to strengthen those foundations and continue to build our Serbia as an open, democratic and tolerant society, which guarantees equality before the law -but also goes a step further, creating conditions for truly equal opportunities for all citizens of all generations, regardless of gender, age, life, religion, nationality and ethnicity, property status or any other personal characteristics.

The most common presentation of older people and topics related to ageing in public is reduced to statistical data, with the often used terms 'alarming', 'frightening', 'dying'. These presentations also address how we, the younger generations are all becoming fewer, and older persons are more and more of a burden on the system of pension-disability and health insurance, with individual examples of the problems of the oldest people such as poverty, loneliness, violence, fraud, theft, etc. In short – there are many more older people compared to the rest of us, and they are 'expensive'. It is our obligation and priority to change this way of presenting the situation, and the Commissioner's report is a contribution to a large-scale social endeavor. It is also our obligation to the younger generations, who certainly do not want to look at their future as meaningless older age. As a society, with our cultural identity, good tradition and customs from the past which include respect for older persons, we will obtain a great advantage and potential if we preserve and improve such a relationship in the years to come. By creating an intergenerational understanding, cooperation and solidarity, and by creating institutional and informal ways to transfer and use

knowledge and experience between generations, it will be possible to create immeasurable benefits for all. Intergenerational solidarity is a fundamental social contract – after all, our pension and disability insurance system is based on it. Our older people made contributions ‘until yesterday’ – today it is our turn, and tomorrow that of today’s children and young people.

The practice of the Commissioner and the results of various researches show that older persons face numerous problems but address the authorities less often, because they believe that being in such a position inevitably belongs to their age. Therefore, it is especially important to point out the need to enable older persons to fully enjoy all their rights on an equal footing with other generations, especially in an age of constant threat from a new form of ‘digital discrimination and exclusion’. It is through this report that we wish to remind, point out, warn, review and inform all social actors about certain significant challenges and relevant facts and data for policy-making.

Our intention is to illustrate the observed problems and possible ways to overcome them. The report provides an overview of the situation regarding discrimination and protection of equality for older persons, the demographic picture of Serbia, the normative framework, an overview of various reports and research on the position of older persons in modern society, with an overview of the current health crisis and its consequences for their lives. The report contains an overview of the Commissioner’s practice, chronologically, by year, an overview of our most important activities in terms of improving the position of older persons, as well as research we have conducted over the years related to the position of older persons. In the report, we have pointed out the immense potential of older people in the preservation of many economic activities, which with the use of new information technologies and knowledge of the middle and younger generation can gain a new quality and perspective.

Finally, I am convinced that the esteemed MPs will approach this report with care, and that it will be useful for them in performing their important function as the highest representative body in the country. Also, I believe that other social actors dealing with the issues of ageing and older persons will find useful information and ideas, in order to create a society tailored for each age.

Old age is the only sure and certain future for all of us.



Brankica Jankovic
Commissioner for the Protection of Equality

SUMMARY

Discrimination is a complex and socially dangerous phenomenon, an illegal behavior, unjustified discrimination or unequal treatment, omission, exclusion, restriction or prioritizing persons, or groups of persons, or persons close to them, based on some of their personal characteristics, actual or presumed. Discrimination can be directed towards different categories of persons or groups of persons, based on their personal characteristics, and can occur in all areas of social life. If discrimination is not adequately and timely suppressed, it can seriously affect the development of society as a whole. The right to equality, as a basic human right, enjoys special protection precisely because of the importance of the right to being protected and the magnitude of social danger its violations entails.

In understanding the importance of respecting human rights and the principles of equality, the Republic of Serbia has built an adequate anti-discrimination framework in recent years and ratified the most important universal and regional agreements in the field of human rights and non-discrimination.

The Law on Prohibition of Discrimination stipulates that it is forbidden to discriminate against persons on the basis of age. Older persons have the right to dignified living conditions without discrimination, and in particular, the right to equal access and protection from neglect and harassment in health and other public services.

By analyzing the practice of the Commissioner through complaints and other actions, and by considering the situation in terms of achieving equality of older persons through numerous reports and research of domestic and international bodies and organizations, it can be concluded that discrimination against older persons is present in today's society. It is caused by many factors which need to be clarified in order to find effective ways to improve the situation and older persons' position in society. These are the main reasons for compiling this report, along with the research entitled *The Position of Older Persons in Serbia – Social Context, Data Review and Research Results*, and conducted by the Commissioner for Equality with the support of the United Nations Population Fund.

In order to provide a comprehensive insight into the situation at issue, this report presents the position of older persons, primarily through the practice and actions of the Commissioner, having in mind all activities undertaken in relation to the promotion and protection of equality of older persons. The Commissioners' practice considered in this report are their dealing with submitted complaints and their consideration of the degree of prevalence of discrimination, its characteristics and forms, the most common victims and perpetrators of

discrimination, and the realization and protection of equality. The report also provides examples of recommendations for measures to achieve equality, initiatives, announcements. It also lists other activities that have addressed the position of older persons and its improvement, such as, for example, the competition for the best literary and artistic work and photography for older primary school students, ***The Bridge of Understanding – Intergenerational Solidarity***. The photographs, drawings and short literary works presented in this report are the works of the participants in this competition.

The description of the situation in the report is given first through an overview of the demographic picture and projections of population movements, showing that Serbia belongs to countries where the process of demographic ageing is pronounced, with an increasingly ageing population. The report further addresses the international and domestic normative frameworks referring to the exercise of various rights having a special impact on the position of older persons. Then follows an overview of individual reports, analyses and research of international and domestic bodies, organs and organizations, that refer to the position of older persons, with the aim of pointing out certain problems and ways of overcoming them in modern conditions and in the light of demographic changes. Special attention has been given to the period of the crisis caused by COVID-19, both from the perspective of international and domestic bodies and organizations. After reviewing the report and research, a more detailed yearly overview of the Commissioner's practice, since the beginning of their institutional work, has been given. The research conducted by the Commissioner, with the most significant findings, conclusions and recommendations, are discussed in a separate section of this report. This research is very important, because it provides insight into the overall position of older persons and the degree of frequency of discrimination on this basis. The research into ***The position of older persons in Serbia – social context, data review and research results*** is given in an integral form (since it was conducted at the end of 2020 and contains the most recent data). Based on this situation, key problems and recommendations for improving the situation are presented, which are offered instead of a conclusion at the end of the report.

As shown by the relevant data based forecasts, the fact is that the Republic of Serbia belongs to countries where the process of demographic ageing is (heavily) pronounced, with the prospect of further increase in the population of older persons. The process of the demographic ageing of the population is manifested by a low and constantly decreasing participation of young people, and a high and continuously growing share of older people in the total population. The share of persons aged 65 and over in 2019 was 20.7%, and of those under 15, 14.3%. Some of the demographic characteristics of Serbia are falling birth rates, high mortality, negative natural increase rate, negative migration balance, low fertility, depopulation and intensive ageing of the population. Projections

of population movement, regardless of the variants, indicate further effects of the demographic ageing process, i.e. a further increase in the number of older persons and a decrease in youth participation, with depopulation of villages and an increase in population older than 80 years. It has been noticed that the number of women in this age category has almost doubled. This situation inevitably leads to a multiplication of challenges for the economy and the systems, primarily health and social protection, as well as pension and disability insurance. In order for the systems to be able to provide an adequate response to the needs of the ageing population, the above demographic data should be taken into account.

Numerous sources at the United Nations level also emphasize that demographic changes around the world result in a sharp increase in the number of older people, who may be directly affected by age discrimination and ageism, increasing the pressure on societies to respond to them. Numerous universal conventions and declarations of the United Nations on human rights, as well as documents such as the *Political Declaration on Ageing, the Madrid Action Plan on Ageing* and the *United Nations Principles for Older Persons*, are of particular importance for the position of older persons. At the United Nations level for a long time, and especially in recent years, within the specially formed Open Working Group for Older Persons, there has been a controversy about the need to adopt a new instrument to protect the rights of older persons and combat discrimination based on age. Also important are the *2030 Sustainable Development Goals*, which relate to future social and economic development in accordance with the principles of sustainability, which are equally important for members of all generations. Through the Sustainable Development Goals, older people are recognized as a particularly important group when it comes to ending poverty, ensuring healthy living and promoting well-being for all generations, enabling lifelong learning, gender equality, and creating inclusive, safe, resilient and sustainable cities and other settlements. The ageing population affects all spheres of society, and in order to seize opportunities and mitigate challenges such as fiscal pressure on social protection systems, the changing dynamics of the labor market, and family and intergenerational relations, there is a need to adapt to the social and economic implications of the process. The possible opportunities and challenges are also the reasons for the importance and emphasis on introducing ageing into public policies.

At the European level and in addition to universal documents such as the *Charter of Fundamental Rights* and the *Revised European Social Charter of the Council of Europe*, the European Union directives on equal treatment and non-discrimination stand out. The European Commission pays great attention to demographic change and the challenges it brings. In the EU Green Paper on demographic change, the ageing population combined with the declining working age population is described as a challenge to be addressed, as it will

affect the economic and social future of society as a whole. The European Commission's *Report on the Impact of Demographic Change*, among other things, announced the launch of a consultative process for the development of two documents – *Green Paper on Ageing and Rural Development – a long-term vision for rural areas Roadmap*, which should, based on available data, determine the necessary strategic framework and activities in order to use the opportunities and capacities of older persons, especially in relation to the silver economy. In January this year, the *Green Paper on Ageing* was adopted, which emphasizes two concepts that can enable the success of policies in societies where processes of demographic ageing is heavily pronounced, namely healthy and active ageing and lifelong learning. Further, the European Commission's report analyzing the implementation of the *European Convention on Human Rights* concluded, inter alia, that the previously proposed Directive on equal treatment on grounds of age in the areas of social protection, education, housing, health care and access to goods and services should be adopted.

When it comes to the national legal framework, in addition to regulations in the field of non-discrimination, there are regulations governing social relations of direct impact on the older population, such as pension and disability insurance, health and social protection, which are important. Also of importance are the announcement of changes in certain regulations and the adoption of new ones, such as amendments to the Law on Social Protection and the Family Law, the adoption of the Law on Gender Equality, etc. In Serbia, the existing anti-discrimination legislation has been the foundation for promoting equality and combating discrimination, but it needs to be improved and harmonized with the *acquis communautaire* and international standards. Thus, there is a need to amend the Law on Prohibition of Discrimination, where the establishment of a single system for monitoring discrimination and ways of functioning of the legal protection system should be included. Such inclusion could contribute to knowledge on the situation in our society and to the promotion of the fight for equality, especially bearing in mind that the practice of the Commissioner in dealing with complaints indicates that older persons are less likely to address the competent authorities. Of no less importance is constant education on the concept and forms of discrimination, as well as on the mechanisms of protection, of all social actors (employees in social work centers, health care institutions, local government, police, etc.), but also of older persons themselves, in cooperation with civil society organizations that bring together or deal with the position of older persons. It is also important to promote the media and encourage tolerance and understanding, highlighting examples of good practice. In order for these principles of intergenerational respect to be accepted as general and universal values, and the position of all generations to be improved, they should become part of the curricula during schooling and education from the youngest age.

Until 2015, the National Strategy on Ageing was in force, which guided actors in the system on the direction of development of various areas and indicated ways to improve the social, economic, political and cultural position and role of older persons. However, after five years of its expiration, a new document that would implement these activities has not yet been adopted. For years, the Commissioner has in regular annual reports been pointing out the need to adopt new strategic documents covering the ones that have expired, such as the National Strategy on Ageing. The need for the adoption of a new strategic document relating to older persons should not be viewed only from the aspect of demographic ageing of the population, but especially from the aspect of general acceptance of the passive role of older people in our society. This document, in addition to addressing all issues of importance for improving the position of older persons, would contribute to changing attitudes towards their passive role and to encourage active ageing and the capacities of this generation, while promoting intergenerational understanding and tolerance.

Pension and disability insurance in the Republic of Serbia is based on intergenerational solidarity, and a system of covering pension expenditures with current revenues from pension and disability insurance contributions, according to which employees finance the payment of pensions to existing beneficiaries and thus acquire the same right. However, in the light of demographic changes, this model of pension insurance is becoming unsustainable in its current form, and the amount of pensions is therefore becoming reduced compared to the period when such a system was established, with three or four insured persons paying the amount of insurance for one pensioner. This decline in amount threatens the financial security of older people and ‘pushes’ them into poverty. According to the data of the Republic Fund for Pension and Disability Insurance from January 2021, the average amount of pension is 29,378 dinars, while the average amount of agricultural pension is 11,896 dinars. When the available data are compared, the monthly pension is less than the amount of the minimum consumer basket (in September 2020: 37,741.06 dinars), and is received by over 75% of pension beneficiaries. Such incomes do not provide economic security in older age, but produce poverty and dependence on other family members and society as a community. Also, according to available data from the *Report on Progress in Achieving Sustainable Development Goals by 2030 in the Republic of Serbia*, the at-risk-of-poverty rate in 2018 was 24.3%, i.e. it has tended to decrease and has indicated a slight progress in all age categories – except in the case of the oldest population (65+), where a moderate decline has been noted.

Citizens living in poverty are among the groups most at risk and belong to the social groups most discriminated against. The fight against poverty is crucial in the field of economic and social rights, and it implies ensuring economic and social security and quality of life at all ages, taking special account of the poverty of older persons. In the recommendations given in the regular annual

reports several years ago, the Commissioner emphasized the need to envisage the implementation of measures and activities aimed at reducing poverty at all levels, in order to achieve full equality of citizens, especially vulnerable and marginalized social groups. Consequently, it is necessary to monitor especially the indicators of poverty among older persons and improve existing programs and activities that enable a dignified life in older age.

The Commissioner's practice shows that age is among the most numerous of the personal characteristics discriminated against during the entire period of the institution's work. This basis of discrimination was among the top five grounds in terms of the frequency of complaints filed, with the number of complaints increasing from year to year, or at least remaining stable. Thus, age as the basis of discrimination was the second basis in terms of the number of complaints during 2016, 2017 and 2018. In 2019, this basis for discrimination would be the fourth most frequent, but it was stated in approximately 10% of the total number of complaints, of which the largest number referred to discrimination against persons over 65 years of age. In 2020, age discrimination was the second most frequent basis, with 14.8% of the total number of complaints filed. When it comes to social relations, discrimination against older persons is manifested in almost all areas, such as: proceedings before public authorities, the provision of public services, social and health care, pension and disability insurance, labor and employment, property rights, housing, education, culture and sports, as well as in the field of public information and media.

Age as the reason for discrimination often appears together with with other personal characteristics – disability, health condition, gender, etc. which is especially the case with discrimination against older persons with disabilities in service provision and-or use of public areas. It should be considered that the number of complaints does not represent a realistic picture of discrimination against older people in our society, since most cases of discrimination remain unreported. Older persons often do not recognize discrimination and do not report it because of lack of information on their rights, insufficient knowledge of the meaning of discrimination and protection mechanisms, but also because their vulnerable position forces them to suffer certain behaviors by others, or even to consider themselves a shame to the family.

Discrimination against older persons is also conditioned by the position of certain categories of the population, regardless of age. The fact is that women in the Republic of Serbia are still at a disadvantage compared to men in all areas of social life, not only on the basis of gender, but also on the basis of marital and family status. Discrimination against women is particularly pronounced in the labor market, in the economic sphere, in education, in participation, and in decision-making, with the presence of gender-based violence against women.

This position of women during their life inevitably leads to a worse position and discrimination in older age.

In addition to gender differences, which are reflected from an earlier age, other differences among older persons are also expressed. Older persons are not a homogeneous group with equal needs and opportunities - there are differences between those living in urban or rural areas, between older persons over 80 years of age or older people younger than 80 years, those in institutional care or living alone, etc. Therefore, it is necessary to approach the improvement of older persons' positions in a multisectoral and comprehensive manner. Furthermore, there is a need to take into account the needs of different groups of older people in the prior analysis and in-depth review of all available reports and research, with a broad consultation process for all relevant actors. Goals and activities should be realistically defined and sources of funding provided. In these activities, but also in the implementation of specific measures, it is necessary to actively involve older persons and organizations that deal with the protection or improvement of the position of older people, especially at the level of local self-government.

The current situation of the Covid-19 pandemic at the global level during 2020 has especially pointed to the need to establish a balance between protecting the health of the population, respecting human rights, and minimizing the various consequences caused by the health crisis. Numerous bodies and organizations around the world, already in the first days of the health crisis, paid special attention to the position of vulnerable groups in the conditions of emergency situations. Older persons were recognized as one of the most endangered groups of the population in emergency situations, and were restricted or banned from moving in most countries of the world due to their vulnerability and susceptibility to infection. During the state of emergency, the Commissioner intensified the monitoring of the situation in the field of equality protection. They sent recommendations of measures and initiatives to the Government and line ministries which pointed out various problems of the most endangered groups of citizens and proposed concrete solutions to overcome them in practice. Thus, for example, there were recommendations to reconsider the measure of banning the movement of older persons, especially in terms of duration, the adequacy of the terms set down for movement and frequency, taking into account the risks to the health of older persons as vulnerable social groups. The Commissioner also pointed out the possibility of difficult communication between older persons, bearing in mind that electronic forms of communication are not available to everyone. At the same time they also emphasized the importance of functioning telephone lines to help older persons in local self-government units, as well as the importance of ensuring continuity in the provision of social protection services. During the state of emergency, the Commissioner sent 312 recommendations for measures and 12 initiatives.

As older persons are disproportionately affected by crisis situations, special attention should be paid to the diversity of this population and the many factors that contribute to their specific and increased vulnerability and the elimination of existing shortcomings in the protection of older persons. Meeting the increased needs for support, and the challenges and obstacles faced by older people in exercising their rights in emergency situations have not been recognized in time. This is the shared experience of many countries, which is why it is important to significantly involve older people in all phases of emergency management cycles, at the same time ensuring that the response to emergencies is approached from a human rights perspective. In order to create an appropriate response to crisis situations, it is necessary to have as precise as possible disaggregated data on the population, in order to prevent some groups of citizens from being left out of certain measures. Moreover, the close cooperation and involvement of as many representatives of vulnerable groups as possible in creating appropriate responses to crisis situations is needed, as well as encouraging volunteerism and social responsibility at all levels.

During the previous year, the necessity of providing all necessary services of an appropriate scope came to the fore. Namely, exercising the right to health care should not be a problem for any citizen, regardless of place of residence, diagnosis, age and other characteristics. As a result of depopulation and migration, some health care facilities, especially primary health care (health stations and dispensaries) in rural areas of Serbia, have been closed, leading to difficult access to these services for the rural, mostly older, population. Home care and assistance services in these areas are also rarely formed, owing to the small number of inhabitants and the fragmentation of the area. Integrated services at the local level, including the help of home care assistants, palliative care and care for patients in the terminal stages of the disease, are not sufficiently developed, and there are insufficient geriatric beds or opportunities for the institutional care for these people. Over the years, the Commissioner has made several recommendations for measures to achieve equality and initiatives related to the use of health care services. In that sense, it is necessary to provide continuous, complete access to health care services for all citizens, in accordance with needs, across the entire territory of the state. A special group of service users consists of those who, owing to their specific social and health status, need both social care and permanent health care, i.e. palliative care. Palliative care is very important for patients who are facing the final phase of life.

There are certain problems in terms of exercising the right to social protection services, the continuity of which is important, especially in crisis situations. According to the available data of the social protection services, the accommodation service is the most represented. It records an increase in the number of users in institutions for accommodation of adults and older persons by 62.6% in 2019 when compared to 2015. These institutions are dominated by

users older than 80 years of age, and according to gender structure dominated by women (with over 65%), with more than half of the users before accommodation having lived in single households. However, the total coverage of older people with dormitory accommodation is less than 0.8%, which is far below the average of European countries. When it comes to daily community services, in the period 2015-2018 the number of home help users for adults and older persons has more than doubled in nominal terms. However, the coverage of older people with this service – 1.24% of the total population of 65+ – is low, especially compared to developed countries. In 2018, the home help service for adults and older persons was provided for all 12 months in less than 50% of local self-government units, while in 19 local governments this service was provided for 6 months or less.

Capacities for providing support services to older persons, help and care at home, etc., as well as accommodation services, should be provided to the required extent in each municipality and place. There should be an effort to enable the use of these services for as many people as possible in smaller or remote environments, where these services are developed to a much lesser extent and the need is evident. Due to the current trend of transformation of the family, which is increasingly single in older age, as well as due to the reduction of living capacities, illness and disability, a significant number of older people have been referred to the use of appropriate social protection services. The current situation in Serbia shows that older family members mostly receive care from informal caregivers, i.e. from other family members and relatives, and the question of their capacity and possibilities for performing such tasks remains open. Improving the position and preserving the capacity and health of informal carers, along with improving the system of formal support for those in need, are ways to overcome the identified problems.

Stereotypes and prejudices about the inability of older persons to make rational decisions and disrespect for their autonomy are causes of discrimination. Several actions carried out by the Commissioner in previous years have referred to persons who were placed in older people's homes against their will. In addition to these, there are other prejudices about the capacities and capabilities of older people. In the general culture of imposing youth, beauty and physical fitness, older persons are seen as old-fashioned and incapable of adapting to change. Negative stereotypes about ageing, including the image in the media, portray older persons as sick, dependent and expensive for society. Precisely because of these stereotypes, society is often deprived of a more constructive image of intergenerational solidarity, which enables positive change and creates social innovations.

Complaints to the Commissioner are one of the indicators that has been continuously used in regular annual reports in order to illuminate the presence

of discrimination and the degree of respect for the principle of equality in society. The situation regarding the prevalence of discrimination is also influenced by other factors, including social and cultural context, society's attitude towards discrimination, civic awareness of the necessity and importance of compliance with regulations, willingness to report violations, degree of tolerance for differences, trust in institutions, knowledge of the grounds and forms of discrimination, as well as the activities of civil society in the protection of human rights, etc.

In order to successfully combat discrimination and achieve equality, it is necessary for all mechanisms of protection against discrimination to function effectively, primarily the institution of the Commissioner and the courts. There is also a need for full implementation of the anti-discrimination legal framework by all public authorities, the keeping of a unique record of procedures for protection against discrimination in all areas of social life, insight into all relevant research and information on the prevalence of this phenomenon, as well as monitoring international and domestic anti-discrimination practices and policies. The raising of the level of information and awareness of citizens about the prohibition of discrimination is extremely important, but also about the importance of achieving the principle of equality for social and economic development and improving the quality of life of all citizens. Also, no less important, it is necessary to create a cultural environment in which discrimination is condemned and equality is respected and supported.

In the Republic of Serbia, there is no single database, i.e. single system for monitoring the occurrence of discrimination that would cover all cases of discrimination, including the actions of the courts. The Commissioner has been pointing this out for years, and the amendments to the Law on Prohibition of Discrimination envisage such records.

Research projects on the position of older persons conducted by the Commissioner in previous years, discussed in more detail in this report under the headings *Ageing in cities – the challenges of modern society*, *The position of older people in rural areas*, *A well-kept family secret: elder abuse and the position of older women in Serbia*; as well as the research given in this report in an integral form, *The position of older persons in Serbia - social context, data review and research results* (since this research was conducted in late 2020 and contains the latest data), are extremely important, because they allow insight into the overall position of older persons and the degree of frequency of discrimination on this basis. The research conducted gives us a broader picture of the context and the position of older persons in Serbia, bearing in mind that they cover various aspects of their lives. Thus, research enables the better implementation and creation of public policies aimed at eliminating the causes of discrimination and creating measures to achieve equality of older citizens. Such research also gives us a deeper insight into the problems of older persons

and their perception of their own position. Older people often feel like they are an unproductive burden on society, and they face poverty, poor health, difficult independent functioning, as well as loneliness, which is partly a product of the intergenerational gap. The results of the research have shown that every tenth respondent has an income below the absolute poverty line, and that there are almost as many older people in urban areas who are 'on the 'border' of' absolute poverty. Older people mostly feel discriminated against by younger people and institutions, and they feel that they are seen as a burden and as persons who are no longer worthy of attention and care. The way in which a society dominantly views older persons is extremely important, as it determines how older persons will be treated, whether as a surplus and a burden or as a valuable and equal part of society. Research confirms that older people most often do not address the competent authorities regarding discrimination, although a relatively large number believe that discrimination based on age is frequent and that they themselves have felt it.

An obstacle to the equal inclusion of older persons and people with reduced mobility is the inaccessibility of public facilities and areas, as well as services, information and communication. Accessibility is linked to the field of human rights and the various legal mechanisms for their protection, since the impossibility of physical access or lack of information makes it impossible to exercise a number of the rights envisaged. Adapting to an environment accessible to all ages, a comfortable, safe and integrated living space, where older persons can be active and autonomous and participate in social and cultural life, will facilitate their position and make societies more inclusive. In acting on citizens complaints and to ensure accessibility, the Commissioner has issued several opinions in which discrimination was found due to the existence of physical barriers that prevented independent access to facilities, services, information and communication.

On the one hand, the accelerated development of technology, especially digitalization and robotics, represent a great civilizational progress, since new knowledge greatly facilitates our daily life and work. On the other hand, the use of new technologies for the common good poses challenges in terms of equal inclusion of all generations, primarily older persons. Older people often do not have access to new channels of communication, which leaves them without timely and complete information about all social flows. Unavailability implies a lack of skills for advanced use of information technologies – e.g. electronic banking, e-government, e-applications for scheduling, etc. Therefore, the principle of lifelong learning, with tailored programs, especially when it comes to digital skills training, is the path to greater social inclusion of older persons. The transfer of knowledge between generations is therefore also crucial for the mental and emotional stability of individuals, as these experiences encourages mutual understanding and strengthen a sense of community. Respect for the

human rights of older persons should mean their true inclusion at all levels and areas in the community, and that the state should provide them with continuous support and assistance in exercising their rights and using services. Digital involvement of older persons has great potential for the transgenerational use of knowledge and experience of all generations, and thus exercises an impact on the development of the economy. We often witness the use of old crafts presented and sold on various digital platforms in a very creative way, which represents a great potential for economic development (the many examples would include healthy food, old recipes, old crafts, ethno villages in a healthy environment, etc.).

A healthy environment is crucial for the development and stability of every society and individuals in all generations, which of course also applies to older persons. Older persons could exercise the role of guardians in the preservation and promotion of a healthy environment, but also of innovators, given that they have 'old' knowledge that can be used and can modify the situation in accordance with the modern needs of the younger population. The need to preserve a healthy environment and develop ecology, as a particularly important social area, seems today to be an imperative for progress. In that sense, the awareness of older persons about the importance of preserving the environment in which we all want to live is encouraging, and the activism of older persons on this issue is useful and motivating for all generations.



Residents of Topli Do, Serbia, at a public protest to protect the Stara Planina rivers

Older people often face violence, abuse and neglect, where loneliness, health or dependence on other people's help makes them especially susceptible to these risks. Violence also occurs within the family itself, due to prejudices that older persons are a burden and that they do not contribute to the community and-or that their contribution is not valuable enough. One of the more common types is financial violence against older persons, since they often do not decide on how to spend the funds that other household members have at their disposal or support. Violence against older persons is a serious problem in society – it is a topic that is little talked about and is often hidden and not reported because of shame. This situation is a significant obstacle in solving the problem of violence against older persons. It is important to implement and strengthen the victim support system and the institutions responsible, suppress gender stereotypes and sexism, empower women, and to prevent violence in crisis situations, and all forms of abuse through the promotion of equality.

Based on the insight of the relevant available data on the situation regarding the achievement of equality of older persons, and considering the key problems manifested over the years in the Commissioner's practice as well as the results of research, the following recommendations are offered:

RECOMMENDATIONS

Social security of older persons:

Establish a special committee/subcommittee in the National Assembly on issues of improving the position of older persons, or delegate these issues within existing committees.

All bodies at the national, provincial and local levels, when creating and implementing various measures and activities related to poverty reduction, should pay special attention to statistical indicators and data from relevant research, as well as analyses of measures already taken, considering the long-term effects of all measures and practices on older persons, especially those who belong to multiple vulnerable groups, such as older persons over 80 years of age, older women, financially insecure older persons, and older persons from rural areas, etc.

Local self governments should develop support systems for older persons in local communities.

The Ministry of Labor, Employment, Veterans and Social Affairs should propose measures to provide support for financial security in older age through the reform of the pension and social protection system, in order to improve the efficiency and quality of financial support to overcome social and life difficulties (e.g. by expanding existing social cash programs). Assistance should be provided for the

most vulnerable older persons, by relaxing the property conditions for exercising these rights, and by introducing 'social pensions' for those who have not exercised the right to an older age pension or other type of pension).

The Ministry of Labor, Employment, Veterans and Social Affairs and the Ministry of Finance should propose measures to stimulate flexible forms of work that enable greater participation in the labor market and encourage employment of older persons in accordance with their abilities.

Strategic documents:

The competent ministries, primarily the Ministry for Family Welfare and Demography, in cooperation with the ministries responsible for health and social protection and human and minority rights, should develop a comprehensive strategic document on ageing and improving the quality of life of older persons, based on all relevant data and analyses, taking into account the diversity of this social group and the involvement of all relevant actors in the drafting process.

The government should adopt strategic documents and action plans the validity of which has expired in the previous period, taking into account the current demographic situation and its perspectives and covering issues of ageing and older persons (such as prevention and protection against discrimination, development of social protection, health care and palliative care, lifelong learning, mental health, infrastructure and traffic development, etc.).

When drafting strategic documents, action plans and other acts that envisage measures and activities relevant to older persons, and when implementing these measures and activities, representatives of older persons and organizations dealing with the human rights of older persons should be included, especially at the level of local self-government. Regular evaluation of the implementation of the envisaged measures and activities should be carried out, in order to consider their effect on different groups of older persons and the possible need for changes.

Regulatory changes:

The competent ministries should start working on amendments to existing regulations in relevant areas or adopting new ones in line with international standards, taking into account the improvement of the position and equality of all social groups, especially older persons (such as amendments to regulations on legal capacity, social protection, prevention of domestic violence, adoption of regulations on gender equality, etc.).

The Ministry of Human and Minority Rights and Social Dialogue should, through amendments to the Law on Prohibition of Discrimination, and in order to achieve

*harmonization with the *acquis communautaire* and overcome the problems identified in its implementation so far, envisage solutions for establishing and operationalizing a single, centralized and standardized system to collect the data used to monitor discrimination and the effectiveness of the anti-discrimination system.*

Crisis situations:

The Government should adopt a regulation establishing clear, precise and applicable procedures for dealing with all phases of crisis events, based on quality and disaggregated population data, after analyzing the response of the competent authorities to the crisis caused by the coronavirus. Experts from various fields and representatives of vulnerable social groups, primarily older persons, i.e. their organizations, as well as human rights institutions, should be involved in the process of drafting these procedures.

All competent authorities and organizations should consider ways and work to ensure access to adequate, comprehensive and timely information in crisis events, as well as ways to overcome them.

All bodies at the national, provincial and local levels should undertake activities to promote volunteerism and encourage volunteer work of all generations, while facilitating procedures for organizing volunteer services and encouraging social responsibility not only in crisis situations, but also in regular daily activities.

Health care system:

The Ministry of Health should undertake activities to improve the health care system and intensify work on increasing the availability and development of mobile and innovative services for older persons such as home treatment and care, patronage services for visiting and helping older persons, telephone counseling, etc., especially in rural and inaccessible areas.

The National Health Insurance Fund should continue working on providing more efficient therapies, drugs, materials and the new generation aids, at the expense of that fund.

Health care institutions should intensify activities related to preventive care, screening examinations and raising awareness and awareness of health risks among older persons.

The Ministry of Health should take measures to ensure greater availability of psychological support and protection of the mental health of the entire population, especially older persons, taking into account crisis situations.

The Ministry of Health should work on ensuring equal access to palliative care within the right to health care, without discrimination, with a simplification of procedures for the realization of palliative care and an improvement in the use of information technologies for the purpose of assistance.

Social protection system:

The quantitative and qualitative capacities of social work centers and other social protection institutions should be strengthened in order to fully ensure quality mapping of needs, recognition of social exclusion and timely activation of all forms of support and assistance to older persons.

The Ministry of Labor, Employment, Veterans and Social Affairs should propose ways to better link cash benefits to social protection services, ensure the strengthening of control mechanisms, and monitor and evaluate the quality of social protection services.

Local self-government units in cooperation with the ministry responsible for social protection should actively work on increasing evenly coverage of and continuity in providing appropriate support services to older persons, with special emphasis on rural and remote areas and especially risk groups (e.g. dementia patients, the poor, those at risk of violence and others).

The further development and creation of services should be encouraged by using innovative technologies (tele-assistance) and other innovative services, such as occasional and temporary accommodation, etc.

The conditions for licensing social protection service providers should be relaxed, and appropriate incentives to service providers be offered, in order to stimulate capacity development and improve the formal support system.

Concrete activities to improve the position and strengthen the capacity of informal carers should be undertaken, by considering their needs, introducing support services, training for doing business, networking, etc.

The adequate capacity and quality of institutional accommodation services should be ensured by applying a human rights-based approach, and the development of alternative forms of accommodation (such as economically viable housing communities) be encouraged.

Prevention of discrimination and violence:

The Ministry of Human and Minority Rights and Social Dialogue should intensify work on the Draft Law on Gender Equality, which will envisage measures to

eliminate stereotypical gender roles and achieve full gender equality of women in all areas.

The Government should take measures to improve the coordinated and efficient operation of all institutions of the system in providing protection against violence with the development of victim support services.

Into the system of protection against violence should be introduced the obligation to keep gender-sensitive statistics and statistics by age, which refer to reports of violence and processed cases, along with the implementation of continuous activities to raise awareness of the recognition and obligation to report violence by all actors. Prejudices and stereotypes about the role and contribution of older people to the community should be actively and continuously eliminated, paying special attention to the media reporting responsibly without discrimination, and controlling the publication of illegal media content.

In the media space, including social networks, the integration of topics that develop a culture of tolerance, understanding and respect for diversity, intergenerational solidarity, mutual respect, gender equality and non-discrimination should be encouraged, along with the fostering of mechanisms for protection against discrimination.

Adequate training to recognize and respond to cases of discrimination should be conducted continuously.

Social inclusion:

All bodies at the national, provincial and local levels should intensify work on improving architectural and information accessibility and the application of universal design in all areas.

Local self-government units should work on providing infrastructure and public transport without barriers in urban and especially in rural areas, access to emergency services, information services, SOS lines, etc. Through various measures at the level of the local community, intergenerational dialogue and exchange of knowledge and experiences between members of different generations should be encouraged, and activities to prevent loneliness carried out.

Lifelong learning and the inclusion of as many older persons as possible in a variety of tailored programs should be promoted, in accordance with the abilities and wishes of the older persons.

The Ministry of Trade, Tourism and Telecommunications should start drafting an Action Plan for the implementation of the Strategy for the Development of

Digital Skills in the Republic of Serbia, which elaborates in detail how to train older persons to use modern information and communication technologies, with special emphasis on Internet security.

All bodies at the national, provincial and local levels should encourage activities and projects in which the inclusion of older persons in various areas of social life, cultural, sports and other activities is carried out equally and in a planned manner. Active cooperation with civil society organizations and active participation of older persons in preventing the risk of social exclusion should be ensured, and various forms of self-organization and self-help of older persons encouraged, while raising awareness of personal responsibility for dignified, active and healthy ageing.



1. ABOUT THE COMMISSIONER FOR PROTECTION OF EQUALITY

The Commissioner for the Protection of Equality (hereinafter: the Commissioner) was established by the Law on Prohibition of Discrimination¹ as an independent, specialized state body responsible for the protection of citizens from discrimination and the promotion of equality.

By adopting the Law on Prohibition of Discrimination and other anti-discrimination laws, and establishing the Commissioner, the Republic of Serbia has made significant steps towards the implementation of international and European anti-discrimination standards. Therefore the competence of the Commissioner has been broadly defined in accordance with international standards, in order to enable the efficient and effective suppression of and protection against discrimination and to contribute to the realization and promotion of equality.

The independence and autonomy of the institution of the Commissioner are the basic postulates and key preconditions for the successful realization of its social role and mission. The Commissioner exercises its competence by considering individual, specific cases of discrimination, giving an opinion on whether there have been violations of the provisions of the Law on Prohibition of Discrimination, and issuing recommendations for their elimination, reminders, warnings, recommendations to public authorities and other persons for



1 'Official Gazette of RS', issue 22/09

equality, initiating court proceedings. presenting reports and opinions on draft laws and other acts, legislative initiatives, etc.

One of the basic competencies of the Commissioner is to deal with complaints of discrimination. A complaint can be filed by any natural or legal person, a group of persons, as well as organizations dealing with the protection of human rights. In the procedure on complaints, the Commissioner gives an opinion on whether there has been a violation of the provisions of the Law on Prohibition of Discrimination, gives recommendations on how to eliminate the violation of rights, and imposes measures determined by law in cases when the discriminator does not act on that recommendation. It should be noted that the Commissioner's recommendations are followed in a large number of cases – on average in over 80 to 90% of cases.

The Law on Prohibition of Discrimination stipulates that the Commissioner does not act upon a complaint when a procedure has been initiated before a court on the same matter or the procedure before a court has been finalized; when it is obvious that there is no discrimination present in what is being pointed out by the complainant; when the Commissioner has already acted in the same matter, and no new evidence has been submitted; as well as when, due to the lapse of time since the violation of rights, it is impossible to achieve the purpose of the action. In these cases, the complainants are informed about the reasons for rejecting the complaint, and they are also given information about which authority is competent in a particular case. With regard to complaints that were incomplete, most often the complainants have not provided all the necessary information to be able to act on the complaint, or have not submitted evidence, or have not supplemented the documentation within the deadline. Each submitter of an incomplete complaint is informed about the reasons why the complaint is incomplete, as well as about what data it is necessary to submit and-or what should be enclosed with the complaint, leaving a deadline for supplementing the complaint. If the submitter does not eliminate the deficiencies within the set deadline, the Commissioner does not act further on the complaint.

In cases when The Commissioner is not authorized to act, information will be provided to the complainant on their rights and the possibility of initiating court or other protection proceedings, i.e. on the ways to ensure protection of rights. The Commissioner is also authorized to recommend mediation.

The Commissioner is authorized by law to file lawsuits in court in the public interest, i.e. to initiate the so-called strategic litigation for protection against discrimination. The Commissioner selects cases in order to seek civil protection against discrimination in court, most often cases of frequent and widespread discrimination, as well as cases that cause severe consequences for members of marginalized social groups, and in which there are good prospects

for success and potential for achieving the goals of strategic litigation. On the other hand, the goal or purpose of strategic litigation is to clarify the meaning of a certain norm through court practice, or to point out through this practice that a certain regulation needs to be amended or supplemented, i.e. improved. In addition, the Commissioner is authorized to file a request to initiate misdemeanor proceedings, and may also file criminal charges. The Commissioner also submits proposals for the assessment of constitutionality and legality.

The Commissioner is authorized to warn the public about the most common, typical and severe cases of discrimination.

One of the powers of the Commissioner is to recommend public authorities and other persons to take measures to achieve equality. Mechanisms for protection against discrimination before the Commissioner proved to be especially important for citizens during the Covid-19 pandemic. The Commissioner has at their disposal clear mechanisms of action, primarily the possibility of sending recommendations for measures to achieve equality, of giving warnings, introducing initiatives, making announcements, etc. What has been proven important in such situations is that the procedure before the Commissioner is free and accessible to citizens, making it faster and easier. The mechanisms and way of working, the quick reaction with which the Commissioner has responded, have contributed to a great extent to finding easier solutions of problems, as well as to the correction of certain omissions in procedure.

The Commissioner is also authorized to monitor the implementation of laws and other regulations, to initiate the adoption or amendment of regulations for the implementation and improvement on the protection against discrimination, and to give opinions on the provisions of draft laws and other regulations concerning the prohibition of discrimination. Having in mind the importance that the adopted regulations have on the prevention of discrimination and the promotion of equality, the Commissioner gives opinions on draft and proposed acts. When giving an opinion, the need to amend or supplement certain provisions of applicable regulations that are not covered by the proposed amendments are pointed out, in order to harmonize them with the provisions of the Law on Prohibition of Discrimination. The integral texts of the given opinions are published on the Commissioner's website. In addition, the Commissioner considers the application of certain regulations in practice of daily work. From the aspect of the necessity of achieving equality for all citizens, the Commissioner submits initiatives to appropriate bodies for changes in existing or the creation of new regulations that enable improvement for vulnerable social groups. Some examples of these initiatives are given in the text of this report.

The Commissioner submits a regular annual report on the work to the National Assembly of the Republic of Serbia, which contains an assessment

of the situation in the field of equality protection. If there are particularly important reasons, special reports can be submitted on their own initiative or at the request of the National Assembly. Each report contains recommendations for taking measures aimed at overcoming the identified weaknesses and more effectively preventing and combating discrimination.

In addition to the regular annual reports, the Commissioner has so far submitted to the National Assembly four special reports - on discrimination against persons with disabilities, on discrimination against children, on discrimination against women, and on discrimination in the field of labor and employment. This report is the Commissioner's fifth special report, and is specific in that it indicates discrimination against older persons in conditions in which demographic ageing is present in a large number of countries, especially in Europe. The Republic of Serbia belongs among those countries where the process of demographic ageing is heavily pronounced, and faces a similar perspective: a population that is getting older, a birth rate which is declining, and a life expectancy which is rising, all of which greatly affects individuals, families, communities and society. Improving the behavior towards older persons and creating appropriate opportunities to meet their rights and needs will enable not only the realization of equality for older persons, but for all generations, bearing in mind the ageing process which inevitably, over time, encompasses all generations.

An important part of the Commissioner's activities is related to the establishment and maintenance of cooperation between bodies responsible for achieving equality and protection of human rights in territories of autonomous provinces and local self-governments.

In order to promote equality, as well as to better inform citizens about the concept and forms of discrimination, the ways of protection and the work of the institution, the Commissioner continuously conducts trainings on the concept of discrimination and its protection mechanisms. This is a very important activity not only in the field of education, but also in the prevention of discrimination and equality. The Commissioner also publishes reports, manuals and brochures, and collects all actions, information and opinions, as well as recommendations of measures for achieving equality and opinions on draft acts in which the Commissioner has made remarks. All these, and other initiatives by the Commissioner, are available on the official website: www.ravnopravnost.gov.rs (ravnopravnost.upr.srb).

2. OVERVIEW OF THE CONDITION AND POSITION OF OLDER PERSONS

This part of the report presents the position of older persons, having in mind primarily the demographic picture and trends of population ageing in Serbia, the international and domestic normative frameworks, and the exercise of certain rights in practice. This chapter also provides an overview of various publications – reports, research and analysis on the position of older persons, and opportunities for its improvement. A special aspect, having in mind the current situation caused by the corona pandemic, are the documents related to the health crisis and the possibilities of protecting older people as one of the most endangered groups in this period.



Andrea Lešević, 7th grade, Kraljevo, Serbia, 2018.

2.1. Data overview – a reflection of the demographic situation in Serbia

2.1.1. Trends in the demographic ageing of the world's population

Demographic ageing of the population is one of the characteristics of modern society that is present around the world, and above all in Europe. There is more and more talk about the demographic ageing of the population, primarily having in mind the implications that this situation has on the overall development of

each country, but also the need to find ways to meet the needs of older persons. The process of further demographic ageing will obviously continue, as shown by statistical forecasts and analyses, which necessitates the creation and implementation of appropriate state policy measures in various areas and at all levels, especially taking into account accelerated changes in all areas of social life.

The process of demographic ageing of the population in general is the result of a decreasing share of the young population (0–14 years) in the total population, bearing in mind that the birth rate is declining and the life expectancy of the population is increasing. According to the United Nations, the number of people over the age of 60 exceeded the number of children under the age of five in 2000, and it is estimated that in 2050 the number of people over the age of 60 will exceed the number of children under the age of 15. This condition greatly affects individuals, families, communities and society as a whole and causes the need for developing specific social, health and economic policies. The demographic situation around the world has led to an overall change in the picture of the population, and thus placed certain demands on social and health care systems, pension systems and the economy, which need to be adjusted to the increasing number of older people in society, especially given the negative natural increase, prolongation of life and working life, extreme increase of the urban population in relation to the rural population, and rapid technical and technological progress. Globally, a significant characteristic of demographic ageing is ‘its feminization’. There are 84 men per 100 women over the age of 60 and 61 men per 100 women over the age of 80, with women in a worse economic position and more exposed to discrimination and violence than men, which puts additional focus on the position of older women.

The issue of demographic changes and the ageing of the population has been a high topic on the political and social agenda of the European Union in recent years.

The European Union is a conglomerate of more than 500 million people, of whom 19.2% (approximately 100 million) are older people. Population ageing triggers dramatic demographic, epidemiological and anthropological changes, emphasizing the importance of active and healthy ageing. In Europe, the most common type is the single household (33.4% of the total number of households), which recorded the largest increase between 2005 and 2015, thereby highlighting several issues, both from an individual and from a public perspective, such as, who will take care of the current generation as we get older, and what types of health and social organizations need to be developed in order to preserve the quality of life of older persons and maintain health and social care systems in the medium and long term. Supporting active and healthy ageing is part of the answer to these questions, because it reduces the demands on these systems;

and, what is more, in many cases older adults in good health can support their colleagues and represent a force dedicated to shared well-being.²

The pandemic that marked 2020 showed the vulnerability of the older population, which speaks of the need to improve intergenerational solidarity and build a more equal and resilient society. In order to lay down a solid qualitative and quantitative basis for further activities, the European Commission prepared a *Report on the Impact of Demographic Change*³ in 2020, which looks at population ageing, migration, longer life expectancy, mobility and declining population trends. For example, the average life expectancy in the EU in 2070 is expected to be 86 years, while 30% of the population will be over 65, compared to today's 20%. The median age of the population will reach 49 years, which is five years more than today's results. It is important to mention that the trend of increasing the number of inhabitants is expected to continue until 2025, when a trend of decrease is expected, which will reach 5% by 2070, i.e. 424 million inhabitants. Finally, it is stated that the percentage of the working population will have fallen by 18% by 2070, which could lead to disruptions in the labor market.

All the above data indicate the need to adapt to the given circumstances, i.e. to implement an inclusive approach towards groups for which the labor market has been more difficult to access so far, especially in relation to women, older persons and people with disabilities. It is strongly emphasized that the fight against all forms of discrimination will be crucial in this process, with an improvement of the balance between business and private life, and investing in the improvement and recognition of new skills and qualifications. The gender perspective is not only covered in the area of employment but also in relation to incomes of older people and poverty of older persons.

The report also highlights the need to improve access to health care, diagnosis and treatment for all, pointing to the European Pillar of Social Rights, especially its principle of long-term care. It also points to equity in relation to social protection systems, and emphasizes the fact that social protection systems will face major challenges, which need to be addressed in a timely manner. When it comes to the regional and local dimensions, the data show that the trend of urbanization of the population will continue, where a slightly lower rate of depopulation will reach the rural areas around cities. Older people are cited as a particularly vulnerable group, especially in terms of the risk of poverty. In order to slow down this process, the need to build infrastructure and access

2 *Active Ageing in Europe: Adding Healthy Life to Years*, April 2018, available on the website: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5946166/>

3 *Report on the Impact of Demographic Change*, European Commission, 2020, available on the website: https://ec.europa.eu/info/sites/info/files/demography_report_2020_n.pdf

to services was emphasized, as well as the formation of comprehensive public cohesion policies, which are considered crucial.

The fight against isolation and digital exclusion was also emphasized. In this regard, the development of an Action Plan for digital education has been announced, which is expected to contribute to the solution of this issue. Last but not least, this report discusses the interconnectedness of the digital and green transition and the demographic challenge - a comprehensive approach that is crucial for achieving fair and sustainable solutions across generations.

2.1.2. Demographic trends in the Republic of Serbia

The Republic of Serbia belongs to the group of countries where the process of demographic ageing is pronounced and a high average age of the population is present as a result of major changes in the age structure in the 20th century, caused primarily by long-term decline in fertility, mortality and migration trends. According to some of the available data, in 2019, Serbia was the eighth country in Europe in terms of the share of the older population,⁴ while on a global scale, in 2018 it was in 11th place, with 20.2% of the total population over the age of 65 (Japan was in first place, with 28.2%; and the rest were all European countries).⁵



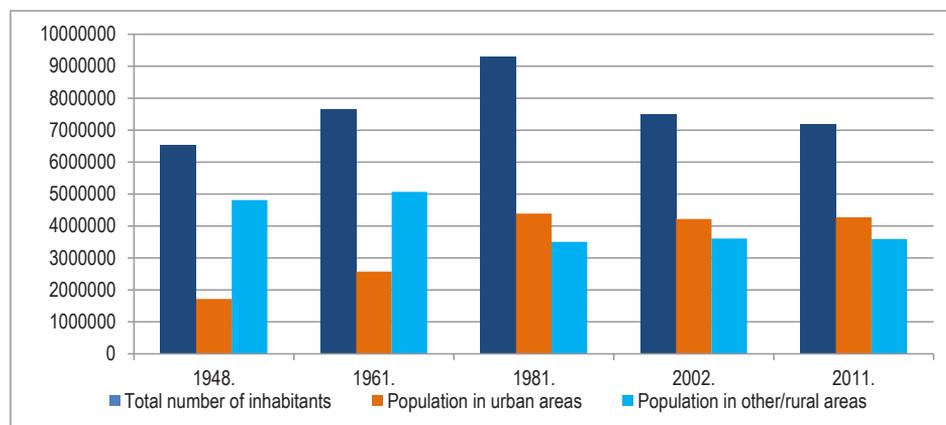
Photo from the 2017 'Bridge of Understanding – Intergenerational Solidarity' competition

4 *Share of population that are aged 65 years and older in European countries in 2019* available on the website: <https://www.statista.com/statistics/1105835/share-of-elderly-population-in-europe-by-country/>

5 *Countries With the Oldest Populations in the World*, Population Reference Bureau, March 23, 2020, available on the website: <https://www.prb.org/countries-with-the-oldest-populations/>

Following the conducted censuses, the population of the Republic of Serbia has been continuously declining in recent decades. According to the data of the Republic Bureau of Statistics, comparing the censuses, and bearing in mind that the census is conducted every ten years and that the last one was in 2011, the total population has been declining since 1981, with a decrease in the rural population.

Graph 1: *Comparative overview of the population*⁶



At the level of the Republic of Serbia, the birth rate fell from 14.4 to 9.1 between 1971 and 2011, the mortality rate increased from 9.1 to 14.3, and the natural increase rate went from positive (5.2) to negative. (-5.2 ‰). In the period 2001–2011 there was also a decline in natural increase rate (total decline of -337,066 inhabitants, and the average annual decline in natural increase was -30,642 inhabitants).⁷ According to the results of the 2011 Census of Population, Households and Dwellings in non-urban (other / rural) settlements, the rate of natural increase fell to -9.8 inhabitants, and there are more and more such settlements.

Some of the most important demographic characteristics of the Republic of Serbia in the period from 2001 to 2011 are declining birth rates, high mortality, negative natural increase rate, negative migration balance, low fertility, depopulation and intensive population ageing.

6 *A comparative overview of the population numbers*, National Statistical Office, available on the website: <https://www.stat.gov.rs/sr-Latn/oblasti/popis/popis-2011/popisni-podaci-eksel-tabele>

7 *Villages in Serbia, changes in structure and problems of sustainable development*, National Statistical Office, Belgrade, 2015, available on the website: http://media.popispoljoprivrede.stat.rs/2015/11/Sela_u_Srbiji.pdf

Table 1: *Age structure of the population (without Kosovo), 2002-2011*

AGE	2002.		2011.	
	number	%	Number	%
Total population	7.498.001	100	7.186.892	100
0-14 years	1.176.770	15,8	1.025.278	14,3
15-64 years	5.032.805	67,6	4.911.268	68,3
65 and older	1.240.505	16,7	1.250.316	17,4
Ageing index	1,05		1,22	
Average age	40,2		42,2	

In addition, in the period 2002-2018 the population of the Republic of Serbia was continuously declining. At the regional level, only the Belgrade region records population growth, while the most pronounced decline is in the Region of Southern and Eastern Serbia. The pressure of such demographic trends is mostly reflected in the dependence coefficient of the older population (number of people aged 65 and over per 100 people aged 15 to 64), which according to estimates in 2018, in the Republic of Serbia was 30.8.⁸

A particular challenge is the rapid decline of the rural population (rural depopulation), which exceeds the pace of reduction of the agricultural population (de-agrarization) and the total population as a whole. These are villages with an older population, which have a lower birth rate, higher mortality, and negative natural increase, i.e. a pronounced depopulation. The share of the agricultural population in the total population is constantly declining, so that in 1991 it was 17%, and in 2011 it was 6.84%. According to the results of the 2011 Census, there are as many as 1,034 villages with less than 100 inhabitants (717 in 2001 and 281 in 1981). These are settlements from which a mass of young, reproductively capable people have already emigrated, and the rest are older people and those who could not go anywhere. The balanced pyramid of the population by age and sex has been disrupted, and the critical mass that ensures the normal reproduction of one population has been reduced.

8 *Population estimates 2019, Announcement*, National Statistical Office, Belgrade, 2020, available on the website: <https://www.stat.gov.rs/sr-latn/vesti/?a=18&s=1801>

2.1.3. Some of the latest demographics

According to the estimates of the National Bureau of Statistics, in the Republic of Serbia in 2019 there are 6,945,235 inhabitants.⁹ Observed by gender, 51.3% are women and 48.7% are men.

According to the same estimates, the trend of depopulation continues, which means that the population growth rate, compared to the previous year (2018), is negative and amounts to -5.4‰.

According to the data from the Monthly Statistical Bulletin of the National Statistical Office from July 2020,¹⁰ the natural increase in January 2019 was -6.5, while in July 2020 it was -7.1.¹¹ In the first six months of 2019, the average natural increase was -6.1, while in the first six months of 2020 it was -6.5.

According to the last census (2011), as many as 160 local governments have a negative natural increase. Data derived from that census show that 30% of women between the ages of 30 and 34 are childless, and in Belgrade as many as 43%. For comparison, according to the data of the National Bureau of Statistics, the natural increase in 1953 was 14.5 while the average age of the population was 29.4 years, and life expectancy in the same year was 58.7 for male children and for female children 60,4 years.

According to the data from the *Monthly Statistical Bulletin* of the National Bureau of Statistics,¹² 5,927 babies were born in July 2020, while 10,023 people died, which means that there were almost twice as many deaths as births. At the annual level, more people die than the 35,000-40,000 people who are born, which practically means that one city in Serbia disappears annually.

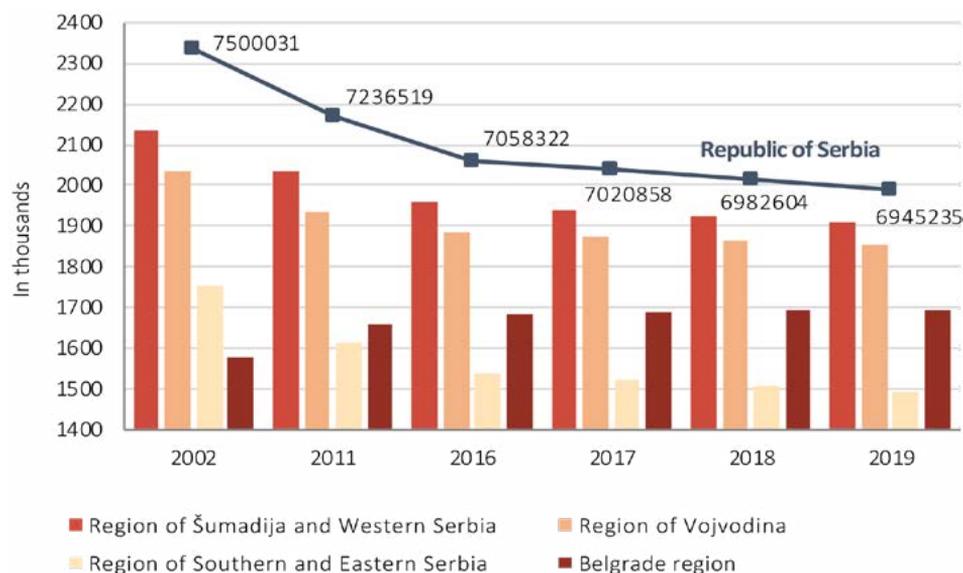
9 *Database*, National Statistical Office, available on the website: <http://www.stat.gov.rs/oblasti/stanovnistvo/procene-stanovnistva/>

10 *Statistical calendar 2020*, National Statistical Office, Belgrade, 2020, available on the website: <https://www.stat.gov.rs/oblasti/stanovnistvo/demografski-indikatori/>

11 *Monthly statistical bulletin*, National Statistical Office, Belgrade, 2020, available on the website: <https://www.stat.gov.rs/sr-Latn/oblasti/stanovnistvo>

12 *Statistical calendar 2020*, National Statistical Office, Belgrade, 2020, available on the website: <https://www.stat.gov.rs/oblasti/stanovnistvo/demografski-indikatori/>

Graph 2: *Estimated population (annual average), 2002–2019, by region*¹³



The average age of the population in 2019 was 43.3 years, and life expectancy for men was 73.1 years and for women 78.3 years. The ageing index, i.e. the ratio of older persons (60 and older) and young (0-19 years) population was 144.1.

In the period 2002–2019, the average age of the population increased from 40.2 to 43.3 years. The increase in the number of the older is certainly influenced by the greatest achievement of civilization - the extension of life expectancy, which for the total population was 3.4 years - from 72.3 years in 2002 to 75.7 years in 2019.

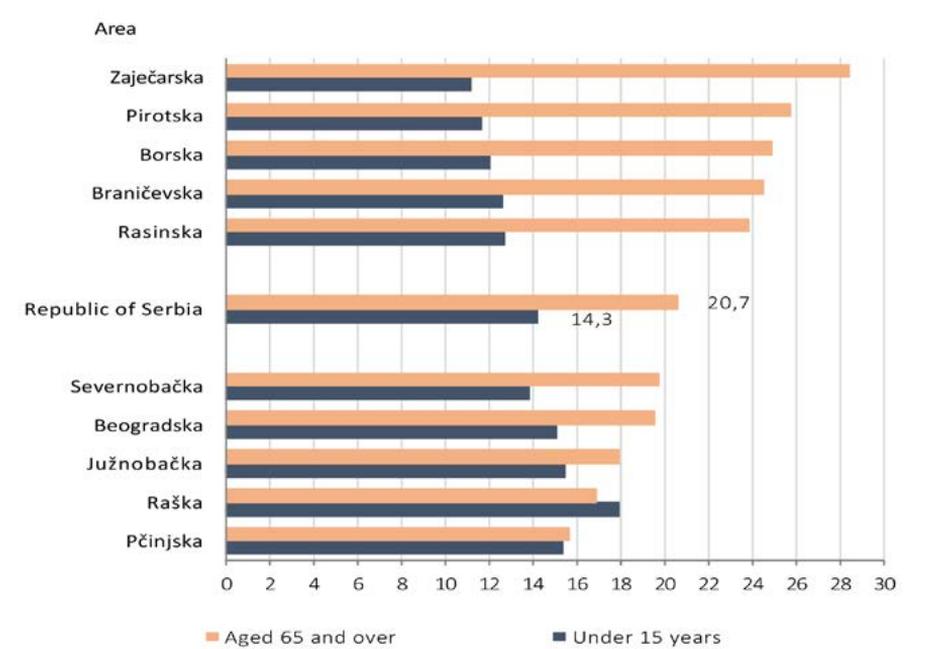
Such trends also affect the decrease in the share of the working age population (15–64) in the total population, from 67.3% (2002) to 65% (2019).¹⁴

The process of demographic ageing of the population is manifested by the low and constantly decreasing participation of young people and the high and continuously growing share of older people in the total population. The share of persons aged 65 and over in 2019 is 20.7%, but of those under 15, 14.3%.

13 *Population estimates 2019, Announcement*, National Statistical Office, available on the website: <https://www.stat.gov.rs/oblasti/stanovnistvo/procene-stanovnistva/>

14 *Database*, National Statistical Office, available on the website: <http://www.stat.gov.rs/oblasti/stanovnistvo/procene-stanovnistva/>

Graph 3: *Share of young and older population in the total population, estimated in mid-2019*¹⁵



The coefficient of dependence of the older population

The coefficient of dependence of the older population¹⁶ mostly reflects the pressure of the mentioned demographic trends (the number of people aged 65 and over per 100 people aged 15 to 64). According to estimates, the dependency ratio of the older population in 2019 is 31.8 and is most pronounced in the Zaječar (- 47.2) and Pirot (- 41.2) areas, while the lowest workload is in the Pcinj area (- 22.8) (The graph shows the first and last five areas in which the share of older persons (65+) is the largest, i.e. the smallest, respectively).

Observed at the level of municipalities / cities, the largest population growth occurred in seven Belgrade municipalities and in Novi Sad, but also in Novi Pazar, Tutin and Presevo, and the largest loss in Crna Trava, Gadzin Han and Babusnica.

The change in the age-gender structure of the population is evident, in addition to the change in the total population. In 2002, the most represented

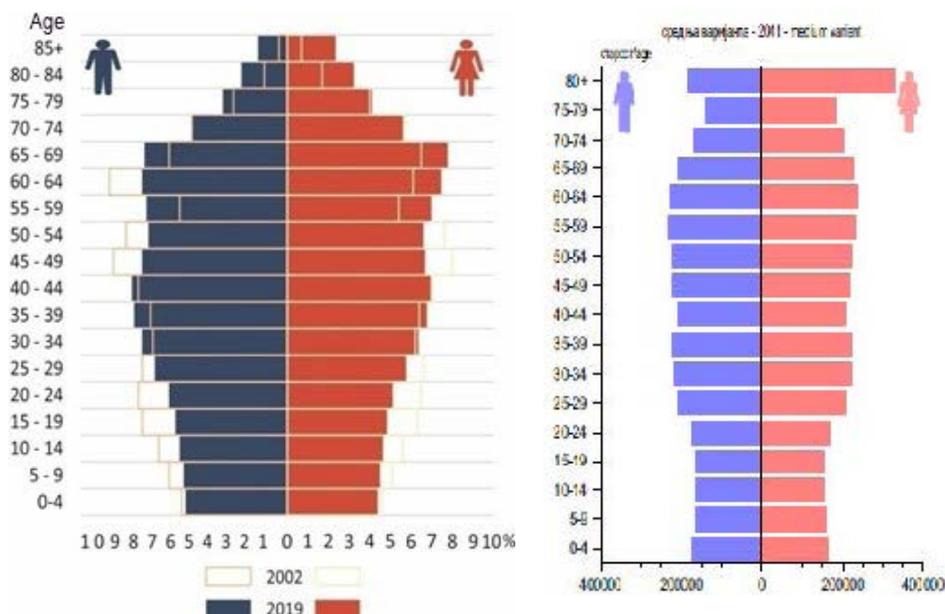
15 Graph taken from the Announcement of the National Bureau of Statistics Population Estimates 2019.

16 Source: Releases of the Population Assessment 2019, National Statistical Office

population was aged 45–49, while in 2019 the largest share of men was of 40–44 years and of women of 65–69 years, in the total population.

In the period 2002–2019 the share of persons under 15 years of age decreased from 16.1% to 14.3%, while at the same time the share of people aged 65 and over increased from 16.6% to 20.7%. The share of the fertile female population (15–49 years) in the total population in the same period decreased by 2.4%.

Graph 4: Age pyramid of the population 2002-2019 and the middle projection variant for 2041¹⁷



The latest data from the publication *Women and Men in the Republic of Serbia*¹⁸ by the National Bureau of Statistics show that as many as 180,000 more women than men live in the Republic of Serbia. Despite the fact that they are more numerous and educated, women find it harder to get jobs, are more frequently laid off, and earn less than men. According to data for the academic year 2019/2020, 137,910 girls and 104,058 boys enrolled in high school and college, of which girls mostly chose to study at the university departments of social, artistic and medical fields, while boys mostly enrolled in the schools

17 Graph taken from the Announcement of the Population Assessment 2019 and the publication of the Population Projection of the Republic of Serbia 2011-2041, National Statistical Office.

18 *Women and men in the Republic of Serbia*, National Statistical Office, Belgrade, 2020, available on the website: <https://www.stat.gov.rs/vesti/20210305-republicki-zavod-za-statistiku-objavio-publikaciju-zene-i-muskarci-u-republici-srbiji-2020/?a=0&s=0>

of electrical engineering, mechanical engineering, construction, agriculture, forestry and veterinary medicine. In the same academic year, 25,002 women and 17,947 men graduated, and 448 women and 334 men defended their doctorates. At the same time, the figures indicate that only 971,000 women compared to 1,333,000 men have a job, and the earnings gap is 8.8% in favor of men. This means that a woman would have to work an additional 35 days each year to receive the same earnings. When it comes to employment, the largest gender gap in the labor market was recorded between the ages of 55 and 64, where it was noticed that only 40% of women, as opposed to 61% of men, were employed. As regards the number of widows, Serbia is at the very top of Europe – about 560,000 widows and about 150,000 widowers live in our country. Life expectancy is 78.3 years for women and 73.1 years for men. In 2019, 2,014 men were victims of murder, suicide or accidents, as opposed to 819 women, 404 men and 130 women were killed in traffic accidents, and 12,525 men and 7,881 women were injured. In the same year, 3,701 men were convicted of crimes against marriage and family – neglect and abuse of minors, domestic violence, lack of support – compared to 472 women convicted of the same types of crimes. The perpetrators of domestic violence are in 90% of cases men - 4,561 men and 462 women were convicted for this crime.

2.1.4. Population projections for the next period

Projections of the National Statistical Office¹⁹ made for the period 2011-2041 indicate that in the next thirty years, the population of the Republic of Serbia will continue to age demographically, regardless of the projection variants. The share of young people is low and with a tendency to further decline, while the share of older people is high and constantly growing. According to the low variant, where the most intensive ageing process is observed, the share of the population younger than 15 would fall from 14.4% to 11.7%, while the share of people older than 65 would increase from 17.3% to 25.2%.

Observed by regions, in the next thirty years the depopulation process would be avoided only in the Belgrade region. The largest decrease in population (about 30%) would be recorded in the Regions of Southern and Eastern Serbia. In thirty years, the share of persons over 65 years of age would, according to the low variant, increase by 8%, so that at the end of the projection period more than every fourth inhabitant of Serbia (25.2%) would be over 65 years of age (simultaneously, an increase in the number of persons older than 80 years of age, as well as an increase in the number of older women). At the same time, the share of persons under 15 in the total population would decrease from 14.4% to 11.7%.

19 *Population projections of the Republic of Serbia 2011–2041*, National Statistical Office, 2014, available on the website: <https://popis2011.stat.rs/?p=3403>

Also, according to all variants of projections, a decrease in the share of the working age population (15-64) in the total population is inevitable, and the decline would range from 3% to 8.2%, depending on the variant of projection, which certainly poses a serious challenge to the economy and development of society, and speaks in favor of the fact that as soon as possible special attention should be paid to the creation of optimal public policies in order to avoid more serious consequences.

In addition to the reduction of the total number of inhabitants, a further increased depopulation of the inhabitants in smaller settlements and villages can be expected. Out of about 4,700 villages, over 1,200 are already in the phase of disappearing. There are less than 100 inhabitants in about 1,000 villages, while there are less than 50 inhabitants in over 500 villages, and more than 100 villages are empty; and in more than 200 there are no inhabitants younger than 20 years.

All variants of the projections also point to an increase in the number of inhabitants over the age of 80, especially the almost doubling of the number of women in this age category.

2.2. Normative framework for exercising the rights of older persons

As the Republic of Serbia is one of the countries where the process of demographic ageing is (heavily) pronounced, with the perspective of further ageing and life expectancy prolongation among the population, these dynamic and significant demographic changes pose major social challenges related to the financial stability of older persons (coverage by adequate pensions and social protection) and health care, as well as to the adequate provision of the various services required for this population group. Correct behaviour towards older persons and the creation of appropriate opportunities to meet their needs enables not only the realization of the equality of older persons, but of all generations, bearing in mind the inevitable process of ageing. The pension and disability insurance, social and health care systems, responding to the challenges of this demographic structure, and monitoring European trends in public policies, and, above all, the needs and opportunities of the domestic economy, have changed and tightened the conditions for the exercise of the right to a pension. Coverage by various social protection services, except in certain individual municipalities, is increasing to a limited extent.

On the other hand, the current health crisis caused by the Covid-19 pandemic has affected older persons – a very diverse group of people – disproportionately. The specific needs, challenges and obstacles faced by older people in exercising

their rights in emergency situations have not been recognized in practice, which is the experience of many countries; which is why it is important to significantly involve older people in all phases of the emergency management cycle, approaching emergencies from a human rights-based perspective.

2.2.1. International normative frameworks for achieving and protecting the equality of older persons

In the *Universal Declaration of Human Rights*,²⁰ within the framework of international law, older persons are not explicitly recognized as a special group with specific needs and resources. At the United Nations, there has long been controversy, especially in recent years, over the need to adopt a new instrument to protect the rights of older persons, especially given that only one international convention on human rights (*International Convention on the Protection of the Rights of All Migrant Workers and Members of their Families*) advocates against age discrimination. Proponents of the new convention on the human rights of older persons emphasize that there are quality documents, such as the *Madrid Action Plan on Ageing*,²¹ but that such documents are not legally binding and therefore only impose moral obligations on states regarding the economic, social, civil, cultural and political rights of older persons; and they consider that a new United Nations convention is needed to ensure that older women and men can exercise all their rights. Proponents of the new convention stress that demographic change around the world has resulted in a sharp increase in the number of older people, who may be directly affected by age discrimination and ‘ageism’, increasing pressure on societies to respond. Therefore, the new convention should include provisions that would reduce age discrimination and ‘ageism’, oblige states that ratify the convention to adopt anti-discrimination regulations, draw attention to many forms of discrimination to which older people are exposed, create a basis for advocacy, raise awareness and education on the rights of the older, strengthen societal responses to the challenges of demographic change, and promote solidarity between generations.

20 *Universal Declaration of Human Rights*, The General Assembly, Decembre 1948, available on the website: https://www.ohchr.org/EN/UDHR/Documents/UDHR_Translations/eng.pdf

21 *A guide to the national implementation of the Madrid International Plan of Action on Aging*, UN Department of Economic and Social Affairs, 2008, available on the website: <http://www.zavodsz.gov.rs/media/1254/vodic-za-nacionalnu-implementaciju-mipaa.pdf>

Wishing to raise awareness among countries about the importance of implementing the Madrid International Plan of Action on Ageing, the UN General Assembly adopted **Resolution 65/182** in 2010,²² establishing the Open-Ended Working Group on Ageing,²³ whose task is to strengthen the protection of the human rights of older persons, as well as to point out possible shortcomings in the international legal framework. This working group is of particular importance, as the only international mechanism within the United Nations which has been established to work in the best way to improve the protection of the human rights of older persons. Furthermore, UN General Assembly Resolution 67/449²⁴ mandates the Open-ended Working Group to consider drafting an international legal instrument to protect the human rights of older persons, using a holistic approach based on the principles of social development, human rights and non-discrimination. Today, the Open-ended Working Group on Ageing/ consists of representatives of Member States, relevant civil society organizations and national human rights organizations with A status under the Paris Principles.

At its annual sessions, with the exception of 2011 when two sessions were held, the work of this working group has been dedicated to the situation regarding the realization of the human rights of older persons, consideration of the existing international and regional framework and human rights mechanisms, exchange of information on the latest achievements, identifying a number of shortcomings in protection systems, empowering older people to demand their rights, ensuring their participation in policy development and creation, and recognizing their contribution to society. Social protection in the form of public and social pensions to prevent or combat poverty, and access to work and education are also considered important human rights issues. As a growing segment of the population, older persons are the social group that is expected to have the highest growth rate in the coming decades. Accelerated population ageing poses a number of new challenges to both the social and sustainable development of all societies. In this regard, the importance of considering older persons as an active group that can make a significant contribution to social development is emphasized when there are certain guarantees that will enable their full participation in society, i.e. treat older persons as special rights holders and entitled to the full and effective enjoyment of human rights and fundamental freedoms, to enable them to participate in social, economic, cultural, civic and

22 *Resolution 65/182. Follow-up to the Second World Assembly on Ageing*, General Assembly, February 2011, available on the website: <https://undocs.org/A/RES/65/182>

23 *Open-ended Working Group on Ageing for the purpose of strengthening the protection of the human rights of older persons*, UNDESA, available on the website: <https://social.un.org/ageing-working-group/index.shtml>

24 *A/RES/67/139 - Towards a comprehensive and integral international legal instrument to promote and protect the rights and dignity of older persons*, General Assembly, December 2012, available on the website: <https://undocs.org/A/RES/67/139>

political life, and to exploit their experience and potential to contribute to all areas of development.

Each of the sessions was organized around individual topics, and since the establishment of this Working Group, the following topics have been covered: age and multiple discrimination; the right to the enjoyment of the highest attainable standard of physical and mental health; violence and abuse; social protection and the right to social security; age and social exclusion; autonomy, independent living and health care; life in dignity; access to justice; long-term and palliative care; education, training, lifelong learning and capacity building. Regarding the social exclusion of the older, it was pointed out that significant factors are the lack of information, knowledge and understanding of the rights of older persons, lack of participation mechanisms, lack of education for all regardless of age, and lack of adequate consultation in decision-making.

In September 2013, the Human Rights Council adopted *Resolution 24/20* establishing the mandate of the Independent Expert on the Enjoyment of All Human Rights of Older Persons, whose mandate complements the mandate of the Working Group. An Interregional Group of Friends of Older Persons has been formed as a bearer of human rights and development actors, which aims to upgrade the discussions of the Working Group and transform them into concrete actions.

Also, at the session of the Working Group on Ageing, the *Decision on modalities for the participation of national human rights institutions in the work of this working group* was adopted. Based on this decision, national human rights institutions are able to be accredited to participate in the meetings of the Working Group, to occupy separate seats among Member States and observers, to declare (without the right to vote) on any item on the agenda, and to submit documents.

The United Nations is working with all actors to implement new policies aimed at improving the living conditions of older people around the world. Thus, at the 13th annual meeting entitled ‘Living, studying and earning longer: a business case for a diverse workforce’,²⁵ it was emphasized that the world is marked by a rapidly ageing population, and that there are now more older people than children under five. The AARP²⁶ briefing series at the United Nations used a key global platform to involve development leaders and stakeholders in a policy dialogue focused on global ageing and action to achieve internationally agreed development goals. The prospects for a /durable economy constitute a

25 *Briefing Series Executive Summary*, 2020 AARP-DESA, February 2020, available on the website: <https://www.un.org/development/desa/ageing/news/2020/03/14049/>

26 AARP is a non-profit, non-partisan organization that allows people to choose how they will live as they age.

call to reconsider attitudes about ageing, a multigenerational workforce, and opportunities and challenges, especially those brought about by new technologies.

The role of governments at the local, national and international levels to ensure adequate policies and institutional systems to remove barriers that may increase discrimination against older workers was emphasized. The general conclusion was that issues such as intergenerational exchange of knowledge, skills and experiences are extremely important, and that it is important to take into account gender differences, technological progress, lifelong learning, pension schemes, etc., which will all affect the future of work.

As the debate on the rights of older persons within the UN system has been going on for more than ten years, the commission monitoring the implementation of CEDAW (Convention on the Elimination of All Forms of Discrimination against Women) has issued *General Recommendations on the Rights of Older Women*,²⁷ recognizing the various forms of discrimination faced by women as they age. It highlights the content of the commitments made by States parties on ageing with dignity and the rights of older women, and makes recommendations aimed at addressing the problems of older women as a major issue in national strategies, development initiatives and action, so that they can fully participate in society without discrimination and on an equal footing with men. In 2010, the Advisory Board of the Human Rights Council presented practical recommendations on how to better protect the rights of older persons.



27 *General recommendation no. 27 – Older women and the protection of their human rights*, Committee on the Elimination of Discrimination against Women, December 2010, available on the website: https://ljudskaprava.gov.rs/sites/default/files/dokument_file/27_opsta_preporukacedaw.doc

Until the eventual adoption of the new international convention on older persons, the current key universal international documents are in force, above all: the *United Nations Charter* of 1945, and then the aforementioned *Universal Declaration of Human Rights*²⁸ of 1948, the *International Covenant on Civil and Political Rights*²⁹ of 1966, as well as the 1966 *International Covenant on Economic, Social and Cultural Rights*,³⁰ the 1965 *Convention on the Elimination of All Forms of Racial Discrimination*,³¹ the 1979 *Convention on the Elimination of All Forms of Discrimination against Women*,³² as well as the *Optional Protocol to this Convention*³³ of 6 October 1999, and the 1984 *Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment*.³⁴

The *Convention on the Rights of Persons with Disabilities*,³⁵ which in Article 16 prescribes the obligation of states to take measures to prevent exploitation, violence and abuse, taking into account the specificity of measures in relation to age, gender and disability, is extremely important for the position of older persons. This convention obliges the state to provide health services with the aim of preventing further disability, including for children and older persons, as well as measures to protect against violence and exploitation, while respecting the specific needs and support specific to gender and age. Also, the ratified *Convention on the Elimination of All Forms of Discrimination against Women*, in Article 11, obliges states to work on the elimination of discrimination, especially in relation to the rights within the context of social protection and paid leave.

There are three documents as part of the international legal framework which are dedicated to older persons exclusively, namely: the *International Plan of Action on Ageing*,³⁶ the *United Nations Principles for Older Persons*³⁷

28 *Universal Declaration of Human Rights*, The General Assembly, December 1948, available on the website: https://www.ohchr.org/EN/UDHR/Documents/UDHR_Translations/eng.pdf

29 'Official Gazette of SFRY – International Treaties', No. 7/71.

30 'Official Gazette of SFRY – International Treaties', No 7/71.

31 'Official Gazette of SFRY – International Treaties', No 31/67.

32 'Official Gazette of SFRY – International Treaties', No 11/81.

33 'Official Gazette of SFRY – International Treaties', No 13/02.

34 'Official Gazette of SFRY – International Treaties', No 9/99.

35 'Official Gazette of SFRY – International Treaties', No 42/09.

36 *Report of the world assembly on ageing – The Vienna International Plan of Action on Ageing*, United Nations, 1982, available on the website: <https://www.un.org/development/desa/ageing/resources/vienna-international-plan-of-action.html>

37 *United Nations Principles for Older Persons*, December 1991, available on the website: <https://www.ohchr.org/EN/ProfessionalInterest/Pages/OlderPersons.aspx>

and the *Political Declaration on Ageing with the Madrid International Plan of Action on Ageing*.³⁸ Despite the fact that the mentioned documents belong to the category of 'soft' law, i.e. they are non-binding, they still provide guidelines on the attitude towards older persons and instruct states on how to formulate their policies in the field of their protection. These international documents do not provide a definition of the term 'older person'. However, the *Guide to the National Implementation of the Madrid International Plan of Action on Ageing*³⁹ explains that the standard criterion is that persons over the age of 60 are considered to be older persons. The *International Plan of Action on Ageing*, adopted at the First World Assembly on Ageing in Vienna in 1982, was the first important step in drawing attention to the problems, needs, and opportunities for older people to contribute to the society in which they live. The **Vienna International Plan of Action on Ageing** recalls that the fundamental rights guaranteed by the **Universal Declaration of Human Rights** are inalienable in relation to age, and calls for everyone, regardless of age, to enjoy the right to family life, security, health and participation in society. Also, this document draws attention to the importance of the impact of development on the older population and recommends that an international action plan be developed guaranteeing the economic and social security of older persons and giving them a better chance of integrating into society and thus contributing to its development. *The United Nations Principles for Older Persons* call on states to include older people in their development programs and plans. The principles contained in this document state the rights of older persons to independence, dignity, protection from abuse and exploitation, as well as care in accordance with social specificities. Although also non-binding, this document pays significant attention to the participation of older people in society through work, volunteering or transferring knowledge to younger people, with the development of their own abilities.

The Political Declaration on Ageing with the Madrid International Plan of Action on Ageing reaffirms its commitment to the Vienna International Plan of Action on Ageing, the United Nations Principles for Older Persons and the Millennium Development Goals, and the adoption of a joint action plan to respond to demographic change in the 21st century. The Madrid International Plan of Action on Ageing represents progress in preventing discrimination against older people. The general framework of this document consists of the following issues: the relationship between social development and older persons, the enjoyment of the right to participate in society, the creation of a supportive

38 *Madrid International Plan of Action on Ageing*, United Nations, April 2002, available on the website: <https://www.un.org/development/desa/ageing/madrid-plan-of-action-and-its-implementation.html>

39 *Guide to the National Implementation of the Madrid International Plan of Action on Ageing*, United Nations - Department of Economic and Social Affairs, May 2008, available on the website: <https://www.un.org/esa/socdev/ageing/documents/papers/guide.pdf>

environment, and the improvement of the health and well-being of older persons. This action plan suggests the responsibility of states to incorporate specific problems and rights of older persons into national and international legal frameworks governing human rights and social and economic development - to enable that population to enjoy rights in accordance with the specifics of their age. The importance of eliminating violence and gender discrimination against older persons was also recognized.

*The Sustainable Development Goals*⁴⁰ have been adopted under the auspices of the United Nations for the period from 2015 to 2030 and represent a set of goals related to future social and economic development in accordance with the principles of sustainability. They replaced the Millennium Development Goals, which ceased to be valid at the end of 2015. There are 17 main goals, and, within them, 169 specially defined sub-goals, which are almost equally important for members of all generations. However, among these goals, some of the most important for older persons can be singled out, namely: Goal No. 1, which refers to the end of poverty, Goal No. 3, which envisages that by 2030 the realization of specially defined goals will ensure a healthy life and promote well-being for people of all generations, Goal No. 4 which promotes quality education and the possibility of lifelong learning, Goal 5 – Gender Equality, Goal 11 which refers to the need to make cities and other settlements inclusive, safe, resilient and sustainable, and Goal 16 which promotes peaceful and inclusive societies for sustainable development and calls for access to justice for all, and envisages the building of effective, responsible and inclusive institutions at all levels.

The report of the United Nations Economic Commission for Europe (UNECE) *Guidelines For Mainstreaming Ageing*⁴¹ states that currently in the UNECE region every sixth person is older than 65, and that by 2030 this will be the case with every fifth person, while by 2050 every fourth person will be over 65 years of age. Population ageing affects all spheres of society and takes place in the context of climate change and accelerated digitalization. These complex and interconnected phenomena require innovative solutions in line with the United Nations Agenda for Sustainable Development. Therefore, societies need to adapt to the social and economic implications of an ageing population and extended life expectancy, in order to seize opportunities and mitigate the challenges of this demographic transformation, including fiscal pressures on social protection systems, changing labor market dynamics and family and intergenerational relationships. When designing public policies, it is important to ensure that everyone can equally realize their full potential throughout life

40 *The Sustainable Development Goals*, The United Nations, available on the website: <https://www.un.org/sustainabledevelopment/>

41 *Guidelines For Mainstreaming Ageing*, United Nations Economic Commission for Europe (UNECE), Geneva, 2021, available on the website: https://unece.org/sites/default/files/2021-03/ECE-WG.1-37_Guidelines_for-Mainstreaming_Ageing_1.pdf

and older age, safely and with dignity. The report emphasizes the importance of mainstreaming ageing, which is ‘a strategy, process and multidimensional effort to integrate ageing into all policy areas at all levels’.⁴² The benefit of

For years, the Commissioner has been pointing out in his regular annual reports the need to adopt a comprehensive strategic document on the older that would address all issues relevant to improving their position.

including ageing in public policies is the development of policies that are more relevant to society, because they provide more efficient responses to the needs of all age groups. Taking into account all generations and recognizing the heterogeneity and diversity within and among age groups, the introduction of ageing into public policies promotes both intergenerational solidarity and social cohesion, as highlighted by the Covid-19 pandemic.

The acts of the United Nations treaty bodies also deal with issues related to older persons. Thus, **General Comment no. 6 of the Committee on Economic, Social and Cultural Rights**⁴³ adopted in 1995, is considered one of the most comprehensive reviews of the international legal framework for the human rights of older persons. It is also important to mention other general comments (14,19, 20 and 21), which also cover the protection of the human rights of older persons.

Activities aimed at promoting the rights of older persons have also been undertaken by the United Nations Human Rights Council, which has adopted *Resolution 21/23*⁴⁴ of 2012 and *Resolution 24/20*⁴⁵ of 2013 which, above all, call for the full implementation of the Madrid International Plan of Action on ageing and the relevant General Assembly resolutions.

Important international documents include the **Toronto Declaration on the Prevention of Elder Abuse**⁴⁶ of 2002, which for the first time defines the

42 *Guidelines For Mainstreaming Ageing*, page 7.

43 *CESCR, General Comment No. 6, The Economic, Social and Cultural Rights of Older Persons*, 1995, available on the website page: <https://www.refworld.org/pdfid/4538838f11.pdf>

44 *HRC Resolution 21/23: The Human Rights of Older Persons*, Human Rights Council, October 2012, available on the website page: <https://documents-dds-ny.un.org/doc/RESOLUTION/GEN/G12/176/57/PDF/G1217657.pdf?OpenElement>

45 *HRC Resolution 24/20: The Human Rights of Older Persons*, Human Rights Council, October 2013, available on the website page: <https://www.unescap.org/resources/hrc-resolution-2420-human-rights-older-persons>

46 *The Toronto Declaration on the Global Prevention of Elder Abuse*, World Health Organization, 2002, available on the website page: https://www.who.int/ageing/projects/elder_abuse/alc_toronto_declaration_en.pdf

concept of abuse, and the *Beijing Declaration and Platform for Action*,⁴⁷ adopted in 1995 at the Fourth World Conference on Women, which specifically mentions older women, who are recognized as a particularly vulnerable group when tackling violence.

Among the most important documents in this area of the International Labor Organization (ILO), as a specialized agency of the United Nations in terms of promoting social and economic rights of workers, are *Convention No. 128 on Disability, Older Age and Family Pension*,⁴⁸ which specifically regulates cash benefits for older persons, after a certain age limit, recommended not to be higher than 65 years. The ILO has also issued *Recommendation no. 162. on Older Workers*,⁴⁹ which is related to the rights and current problems of older workers who face employment problems due to their age. States are recommended to ensure a gradual transition from working life to retirement, to adjust working hours in a certain way, such as introducing the possibility of gradually reduced working hours, increasing vacation time, introducing flexible and half-hour working hours, etc. It is necessary for States, in accordance with these recommendations, to introduce preparatory programs for retirement. These recommendations are not of great importance for the target group of this publication, but it can be seen how important certain adequate preparation programs would be for this period of life and for people living in rural areas, for whom there is no formal transition from the labor market to pensioner status.

Of the regional mechanisms for the protection of the human rights of older persons, the most relevant for the Republic of Serbia are those established by the Council of Europe and the European Union.

Among the relevant acts of the Council of Europe, the Republic of Serbia has confirmed the *Revised European Social Charter*,⁵⁰ which prescribes the rights of older persons to social protection, obliging the signatory states to take measures to enable the older persons freedom of choice and equal participation in society (Article 23). *The Council of Europe Resolution on Opportunities and Challenges for Demographic Change in Europe: the Contribution of Older Persons to Economic and Social Development*, adopted in 2007, emphasized the need to increase opportunities for the active participation of older people,

47 *The Beijing Platform for Action*, UN Women, 1995, https://beijing20.unwomen.org/~media/headquarters/attachments/sections/csw/pfa_e_final_web.pdf

48 *C128 - Invalidity, Old-Age and Survivors' Benefits Convention*, ILO, 1967, available on the website: http://www.ilo.org/dyn/normlex/en/f?p=NORMLEXPUB:55:0::55:P55_TYPE,P55_LANG,P55_DOCUMENT,P55_NODE:CON,en,C128,/Document

49 *Recommendation No. 162 concerning Older Workers*, ILO, 1980, available on the website: https://www.ilo.org/dyn/normlex/en/f?p=NORMLEXPUB:12100:0::NO::P12100_ILO_CODE:R162

50 'Official Gazette of RS – International Agreements', No. 42/09

including volunteering and new economic perspectives ('silver economy'), created by the growing demand of older people for certain goods and services, as well as the importance of a positive public image of older persons.

Among the most important documents of the European Union to be mentioned in relation to this area would be the *Charter of Fundamental Rights*,⁵¹ which prohibits discrimination on any grounds and explicitly mentions the age factor. Article 25 of the Charter recognizes in particular the right of older persons to a dignified and independent life, and to participation in social and cultural life. This charter became binding on the entry into force of the Treaty of Lisbon on 1 December 2009. Also relevant are *Directive 2004/113/EC*⁵² *on equal treatment for men and women in access to and provision of goods and services*, *Directive 78/2000/EC*⁵³ *on the prohibition of discrimination in respect of employment and occupation* and *Directive 24/2011/EU*⁵⁴ *on patients' rights to cross-border healthcare protection*.

The European Union has also adopted the *2020 Strategy – for a healthier EU*⁵⁵, which is a strategy for creating a smart, sustainable and inclusive economy, leading to a high level of productivity, employment and social cohesion. For older residents of the European Union, the *Strategy on the Welfare and Dignity of Older People in Need of Care and Assistance* is important, and specifically states that the economic crisis is affecting disadvantaged older persons and informal workers, especially women owing to traditional gender roles and reduction of state aid in the home. As such, countries are required to adopt a European standard for quality long-term care, and a legal framework to combat all forms of discrimination against formal and informal carers and volunteers, including in cases of cross-border cooperation, and to create an appropriate friendly environment for older persons.

In the European Union, great attention is paid to demographic change. Thus, in 2005, the European Commission adopted a *Green Paper on demographic change*, which comprehensively addresses the nature of the challenges facing

51 *Charter of Fundamental Rights of the European Union*, European Commission, October 2012, available on the website: https://ec.europa.eu/info/aid-development-cooperation-fundamental-rights/your-rights-eu/eu-charter-fundamental-rights_en

52 *Council Directive 2004/113/EC*, December 2004, available on the website: <https://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2004:373:0037:0043:en:PDF>

53 *Council Directive 2000/78/EC*, November 2000, available on the website: <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:32000L0078>

54 *Directive 2011/24/EU of the European Parliament and of the Council*, March 2011, available on the website: <https://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2011:088:0045:0065:en:PDF>

55 *Europe 2020 – for a Healthier EU*, Public Health – European Commission, available on the website: https://ec.europa.eu/health/europe_2020_en

Europe and the urgency to take action. Expressions such as ‘unprecedented ... change’ are used, summarizing that ‘the structure of society ... is changing radically’ and concluding that we are dealing with ‘... urgent issues that have a common interest to be answered by all member states’. At the same time, the Communication ‘Joint Action for Growth and Employment’ (European Commission, 2005) describes the ageing of the population in combination with the declining working age population as a challenge that needs to be addressed, as it will affect the economic and social future. The promotion of active ageing is seen as contributing to the European Commission’s overall goal of improving living standards.

In 2006, the European Commission stated in its Communication, *The Demographic Future of Europe – from Challenges to Opportunities*, that it is necessary to turn challenges into opportunities by designing and implementing adequate policies to manage demographic change. Among the basic policy directions, the following were identified: improving the conditions for the well-being of the family and the reconciliation of work with family life; encouraging employment - more jobs and longer, better working lives; increasing productivity and investing in education and research; integrating migrants; ensuring sustainable public finances and guaranteeing adequate pensions, health care and long-term care.



Nadja Ljubisavljevic, 8th grade, Krusevac, Serbia, 2019.

The priorities for adequate and sustainable pension systems are reflected in the *White Paper Agenda for Adequate, Safe and Sustainable Pensions*, presented by the European Commission in 2012. The White Paper presents current pension challenges, which are mainly seen in the context of the ageing population, and includes: the financial sustainability of pension systems; adequacy of pensions, which are the main source of income for a growing part of the population; increasing the participation of women and older workers in the labor market, which can largely neutralize the effects of population ageing on the share of pensions in GDP. To address these challenges, the White Paper recommends: linking the retirement age to increasing life expectancy; restricting access to early retirement and other ways of early exit from the labor market; supporting longer working lives by providing better access to lifelong learning; adapting jobs to a more diverse workforce; developing employment opportunities for older workers and supporting active and healthy ageing; equalizing the retirement age for men and women; and supporting the development of supplementary pension savings to increase pension revenues.

This approach implies in practice the concept of active ageing, which includes physical functionality, appropriate lifestyle, urban environment and social inclusion.

The European Commission's *Report on the Impact of Demographic Change*⁵⁶ announced, among other things, the launch of a consultative process for the development of two documents, *Green Paper on Ageing*⁵⁷ and *Rural Development – a long-term vision for rural areas – Roadmap*,⁵⁸ which should be closer to determining the necessary strategic framework and activities in order to achieve the stated goals. The Green Paper covers how the EU can make the most of the opportunities offered by older people, especially with regard to the silver economy. The roadmap, determined by the European Commission, defines the time frame according to which consultations will be conducted regarding the two mentioned documents, the adoption of which is expected in the second quarter of 2021. The reactions of civil society to the activities of the European Commission on this issue were cautiously positive, with strong expectations to learn lessons from the current pandemic situation and take measures that will better protect those groups that have proven particularly vulnerable, including older persons. The European Commission presented

56 *Report on the Impact of Demographic Change*, European Commission, 2020, available on the website: https://ec.europa.eu/info/sites/info/files/demography_report_2020_n.pdf

57 *Green Paper on Ageing: Fostering solidarity and responsibility between generations*, European Commission, January 2021, available on the website: https://ec.europa.eu/info/sites/info/files/1_en_act_part1_v8_0.pdf

58 *Rural development – long-term vision for rural areas – Roadmap*, European Commission, 2020, available on the website: <https://ec.europa.eu/info/law/better-regulation/have-your-say/initiatives/12525-Long-term-vision-for-rural-areas>

the Green Paper on Ageing and a public debate began in late January 2021⁵⁹. This document states that there are two policy concepts that can enable the successful ageing of societies, namely healthy and active ageing, and lifelong learning. Both approaches work best when they start at an early age, because they are relevant for the entire life cycle. It is important that high level of education and good health reinforce each other. Healthy and active ageing refers to the promotion of healthy lifestyles throughout life, and includes both the manner of consumption and nutrition, as well as the levels of physical and social activity, in which public policies can play a significant role. This document also emphasizes that continuous investment in education has many positive effects: acquiring and updating skills helps increase employability, professional advancement, continuing at work and increasing job satisfaction. In a rapidly changing world, lifelong learning is essential, because careers and educational opportunities change rapidly. Continuous learning can also help delay the onset of dementia and prevent the cognitive decline associated with ageing. It is also a way for older people to play an active role in society.

The current trends in EU legislation are also pointed out in the *Report on Fundamental Rights 2020*⁶⁰ from the Agency for Fundamental Rights of the European Union. The report states that the long-awaited adoption of the Equal Treatment Directive did not take place in 2019, leaving the EU legal framework on non-discrimination incomplete, but the appointment of a new Commissioner for Equality and the adoption of new legal instruments relating to the European Pillar of Social Rights supported the equality agenda (the EU has adopted two new legal instruments relating to Principle 3 – on work-life balance and accessibility).



This report advises that states should ensure that equality bodies can effectively fulfill their non-discrimination tasks, which implies independence and sufficient resources. Also, States should, inter alia, provide a coordinated approach to the collection of equality data and ensure that sanctions against discrimination are sufficiently effective, proportionate and dissuasive.

The report *Age discrimination law outside the employment field*⁶¹ from the European Commission analysed the implementation of the European Convention on Human Rights, and concluded that it is necessary to:

59 *Green Paper on Ageing: Fostering solidarity and responsibility between generations.*

60 *The Fundamental Rights Report 2020*, European Union Agency for Fundamental Rights, available on the website: https://fra.europa.eu/sites/default/files/fra_uploads/fra-2020-fundamental-rights-report-2020_en.pdf

61 *Age discrimination law outside the employment field*, European Commission, 2020, available on the website: <https://www.age-platform.eu/publications/age-discrimination-law-outside-employment-field>

- adopt the proposed Directive on equal treatment on grounds of age outside the labor market in the areas of social protection, education, housing, health care and access to goods and services;
- implement protection against victimization and inform stakeholders about its harmful effects through research and information campaigns;
- ensure that differences in treatment on the basis of age do not involve discrimination;
- implement protection of older persons from multiple discrimination;
- promote research and information on age discrimination in education.

The decisions of the **European Court of Human Rights** are of special importance for achieving equality in the practice of certain European countries. The Commissioner has been following the case law of the European Court of Human Rights in the field of discrimination and violation of Article 14 of the European Convention for several years, and the Council of Europe, in cooperation with the Institute for Comparative Law, has produced publications in Serbian of *Opinions of the Consultative Council of European Judges and Magna Carta Judges, Opinions of the Consultative Council of European Prosecutors, Selected Documents of the Venice Commission and the Committee of Ministers of the Council of Europe, and Selected Case Law of the European Court of Human Rights* and the *European Court of Justice*, with the aim of further encouraging the creation of knowledge-based policies. The publications are available to all interested parties on the website: https://www.coe.int/sr_RS/web/belgrade/news/

In the case of *Popović and Others v. Serbia* (judgment of 30 June 2020), the applicants brought actions for compensation for non-pecuniary damage due to mental pain suffered as a result of discrimination with regard to ‘military invalids’ who receive a much higher allowance for care and assistance. The European Court accepted the claims of the Republic of Serbia that the different treatment of the state towards the two categories of persons with disabilities is considered justified owing to the difference in the manner in which the disability occurs. Namely, ‘military invalids’ acquired a disability while performing military duty, which implies exposure to a higher risk, while in the case of ‘civilian invalids’, the disability arises due to an accident, health illness or in another way. The European Court concluded that the choice of the legislator in Serbia regarding the different amount of social benefits had an objective and reasonable justification. The judgment found that there had been no violation of Article 14 of the Convention in conjunction with Article 1 of Protocol No. 1 to the Convention. As an example, we cite the case of *Fabian v.*

Hungary (judgment of 5 September 2017). The applicant was employed as a police officer until 1 January 2000, when he fulfilled the condition for early retirement and retired before the age of 47. However, he started working in the private sector again from 2000 to 2012, and after that he was employed as a civil servant from 2012 to 2015. During 2013, an amendment was made to the Hungarian legislation according to which the payment of older-age pensions to beneficiaries who were employed in the civil service and received a pension at the same time was suspended, which did not apply to older-age pension beneficiaries working in the private sector. When the competent administration informed him that the payment of his pension would be suspended from July 2013, the applicant lodged a complaint claiming that his pension was an acquired right and that he was discriminated against in relation to pension beneficiaries working in the private sector. The position of the European Court was that in the field of finance, social policy and employment, the disputed ban, which precluded the right to a pension and the right to a salary from the state budget at the same time, was introduced as part of the reform for achieving the sustainability of Hungary's pension system. In the capacity of an employer, the state determines the working conditions for its employees, and as a pension fund manager, it determines the conditions for the payment of pensions. The Court concluded that there had been no violation of Article 1 of Protocol No. 1 (protection of property) on its own, nor of Article 1 of Protocol No. 1 in conjunction with Article 14 of the European Convention.

In the case of **Carvalho Pinto de Sousa Morais v. Portugal**, judgment of 25 July 2017, the European Court ruled that the Portuguese court's decision based on the presumption that sexuality was not relevant to a 50-year-old woman, mother of two children, to the extent that it was important to the younger persons, discriminated against the applicant. Namely, in her fiftieth year, the applicant underwent gynecological intervention, after which she suffered severe pain, had difficulty moving and sitting, and could not have sexual intercourse. Due to the physical and mental pain she suffered, she initiated court proceedings for damages, and the court ruled in her favor in the first-instance proceedings, while the second-instance court reduced the amount of damages, stating, *inter alia*, that with the applicant's loss of ability to do housework, her only task was probably to take care of her husband. The Portuguese court also warned that at the time of the operation the applicant was fifty-two years old and had two children, and at that age, sexual relations were not as important as they were to younger persons. The European Court found in this case that the assumption that sexuality is not important for a 50-year-old woman and mother of two to the extent that it is important for younger people, reflects the traditional

idea of female sexuality which is essentially related to childbirth. In the opinion of the European Court, gender and age were the decisive factors for the Portuguese court to make a final decision, and pointed out that such views reflect the prejudices that prevail in the Portuguese judiciary. The European Court also noted differences in the approach taken by the Portuguese court in earlier cases concerning allegations of medical abuse of male patients, aged fifty-five and fifty-nine, when the court concluded that the fact that the men could no longer have normal sexual intercourse affected their self-esteem and resulted in 'a huge and strong mental shock.'

In those cases, the Portuguese court did not consider the fact whether the prosecutors had children or not, nor did it consider other factors.

2.2.2. National legal framework

The Republic of Serbia has built an adequate anti-discrimination framework in recent years. Understanding the importance of respect for human rights and respect for the principle of equality, the most important universal and regional agreements in the field of human rights and non-discrimination have been ratified.

A comprehensive and coherent system of legal protection against discrimination has been established, which includes mechanisms of civil, criminal and misdemeanor legal protection, in which an important place belongs to the Commissioner.

The Constitution of the Republic of Serbia,⁶² Article 21, stipulates that everyone is equal before the Constitution and the law, that everyone has the right to equal legal protection, without discrimination, that any discrimination, direct or indirect, is prohibited on any grounds, especially race, gender, nationality, social origin, birth, religion, political or other belief, property status, culture, language, age and mental or physical disability. In addition, the Constitution stipulates that special measures that the Republic of Serbia may introduce in order to achieve full equality of persons or groups of persons who are essentially in an unequal position with other citizens shall not be considered discrimination. In the Constitution, senior citizens are especially mentioned in Article 68 as a special social group who, in addition to children, pregnant women, mothers during maternity leave, and single parents with children up to the age of seven, are guaranteed the right to health care from public revenues, if they are not receiving any other revenue or assistance on some other legal basis. Article 70,

62 'Official Gazette of RS', issue 98/06

which refers to pension insurance, determines the obligation of the Republic of Serbia to take care of the economic security of pensioners⁶³.

The constitutional prohibition of discrimination is further elaborated by the *Law on Prohibition of Discrimination*⁶⁴, which regulates in detail the general prohibition of discrimination, and the forms and cases of discrimination, as well as the procedure of protection against discrimination, which is largely harmonized with EU regulations governing this area. This law, , regulates Article 23 of this law defines discrimination on the grounds of age as a special case of discrimination, and prohibits discrimination against persons on the basis of age, and states that the older have the right to dignified living conditions without discrimination, and in particular, the right to equal access and protection from neglect and harassment in the use of health and other public services. In addition to this, other laws are important for protection against discrimination, such as the *Law on Prevention of Discrimination against Persons with Disabilities*⁶⁵ and the *Law on Gender Equality*⁶⁶.

According to the general assessment, the current regulations provide a good legal framework and adequate instruments for protection against discrimination, and its prevention and suppression in accordance with international and European standards. However, the reports of international organizations and the European Commission point to the need to improve certain legal solutions. Thus, among other things, in 2020 the European Commission published a *Non-paper*⁶⁷, i.e. a semi-annual report on the current situation in Chapter 23 (Justice and Fundamental Rights) and Chapter 24 (Justice, Freedom and Security). This document states, among other things, that the Anti-Discrimination Strategy expired in early 2018 and has yet to be renewed, and the harmonization of the Law on Prohibition of Discrimination with the *acquis* is seriously delayed, as well as the adoption of a new Law on Gender Equality. The adoption of the National Strategy for the Prevention and Suppression of Violence against Women in the Family and in Partnership was also postponed.

For further development and improvement of anti-discrimination legislation and policies, in addition to harmonization of legislation with the *acquis communautaire*, timely and adequate application of applicable regulations is of

63 'Official Gazette of RS', issue 98/06.

64 'Official Gazette of RS', issue 22/09.

65 'Official Gazette of RS', issues. 33/06 and 13/16.

66 'Official Gazette of RS', issue 104/09.

67 *Non-paper on the state of play regarding chapters 23 and 24 for Serbia*, European Commission, June 2020, available on the website: <https://www.mei.gov.rs/srl/dokumenta/eu-dokumenta/>

great importance, as well as the involvement of all relevant actors in the drafting process, including obtaining the opinion of all bodies in accordance with the law.

The position of senior citizens is also regulated by other regulations governing certain areas of social relations that have a direct impact on this population, such as: *Law on Pension and Disability Insurance*,⁶⁸ *Law on Social Protection*,⁶⁹ *Healthcare Law*,⁷⁰ *Health Insurance Act*,⁷¹ *Law on the Protection of Persons with Mental Disorders*,⁷² *Law on Planning and Construction*,⁷³ *Law on the Official Use of Languages and Scripts*,⁷⁴ *Law on Free Legal Aid*,⁷⁵ *Decree on the National Program for Preservation and Improvement of the Health of Older Persons*,⁷⁶ etc. Also, the announcement of changes in certain regulations or the adoption of new ones, such as amendments to the Law on Prohibition of Discrimination, the adoption of the Law on Gender Equality, the Law on Social Protection, the Family Law, etc.

The law that largely refers to older persons is the *Law on Retirement and Disability Insurance*, which provides and regulates in detail the rights in case of older age, disability, death and bodily injury. This law regulates mandatory retirement and disability insurance, who the insured are, conditions and manner of acquisition, and voluntary independent retirement insurance; it determines the persons who are to be provided with rights in case of disability and bodily injury caused by work injury or occupational disease, and defines retirement and disability insurance rights, namely: as concerns older age the right to an older-age pension and the right to an early old-age pension; and in case of disability, the right to a disability pension; in the event of death, the right to a survivor's pension and the right to reimbursement of funeral expenses; in the case of bodily injury caused by an injury at work or an occupational disease, the right to monetary compensation for bodily injury; in case of need for assistance

68 'Official Gazette of RS', issues 34/03, 64/04 – Constitutional Court decision, 84/04 – state law, 85/05, 101/05 – state law, 63/06 – Constitutional Court decision, 5/09, 107/09, 101/10, 93/12, 62/13, 108/13, 75/14, 142/14, 73/18, 46/19 – Constitutional Court decision, and 86/19.

69 'Official Gazette of RS', issue 24/11.

70 'Official Gazette of RS', issue 25/19.

71 'Official Gazette of RS', issue 25/19.

72 'Official Gazette of RS', issue 45/13.

73 'Official Gazette of RS', issue 72/09, 81/09 -correction, 64/10 – Constitutional Court decision, 24/11, 121/12, 42/13 – Constitutional Court decision, 50/13 – Constitutional Court decision, 98/13 – Constitutional Court decision, 132/14, 145/14, 83/18, 31/19 and 37/19 – state law.

74 'Official Gazette of RS', issues. 45/91, 53/93, 67/93, 48/94, 101/05 – state law, 30/10, 47/18 and 48/18 – correction.

75 'Official Gazette of RS', issue 87/18.

76 'Official Gazette of RS', issue 8/17.

and care of another person, the right to financial compensation for the assistance and care of another person.

Regulations in the field of health care and health insurance are also very important for the protection and position of older persons. Thus, according to the *Law on Health Insurance*, persons older than 65 are classified in the group of the population that is exposed to a special risk of illness and who enjoy special conditions in terms of health insurance. According to the *Law on Health Care*, social health care, under equal conditions, is achieved by providing health care to groups of the population that are exposed to increased risk of disease, and health care to persons in connection with prevention, control, various eliminations and treatments of diseases of greater socio-medical significance, and health care for the socially endangered population; and persons over the age of 65 are recognized as a special social group. Health care is provided in accordance with the principles of accessibility to health care, fairness, comprehensiveness, continuity, continuous improvement of the quality of health care, and efficiency.

The Law on Social Protection regulates the activities and goals, principles, rights and services of the social protection system, procedures for exercising rights, rights and obligations of beneficiaries, and the establishment and operation of social protection institutions, and is of great importance for the position of senior citizens, who are an older population that is particularly at risk of poverty and social exclusion. According to the law, social protection is provided in accordance with the principles of respecting the integrity and dignity of beneficiaries, prohibition of discrimination, best interests of beneficiaries, least restrictive environment, efficiency, timeliness, integrity, improving the quality of social protection, publicity, accessibility and individualization of social protection.⁷⁷ Users have specially defined and established rights to: information, participation in decision-making, free choice of services, confidentiality of data, privacy and the right to complain.⁷⁸ Social protection services that should be provided to older persons, in accordance with this law, are: assessment and planning services, daily community services, which, in addition to accommodation services (primarily home accommodation, shelter accommodation), are the most often represented in the case of older persons, and include home help services, day care, and other services that support the stay of users in the family and immediate environment, and others such as support services for independent living, and counseling-therapeutic and social-educational services. The Law on Social Protection regulates in detail the procedure for the use of social protection services,⁷⁹ as well as material support, i.e. material benefits that are very important for the position of the target group that this publication deals with,

77 articles. 24-33.

78 articles. 34-39.

79 articles 68-78.

and these benefits include: financial and social assistance, allowances and care for another person, increased allowances for help and care of another person, help for training for work, one-time financial help, non-cash compensation,⁸⁰ etc.

In addition to the above-mentioned laws, older persons, as a special group of residents, are mentioned in other regulations whose provisions directly or indirectly affect the position of older persons, but also in strategic documents and action plans that set goals and priorities for action in certain areas. Among the most important strategies in this area are: *Public Health Strategy in the Republic of Serbia 2018-2026*,⁸¹ *National Strategy for Gender Equality* for the period from 2016 to 2020,⁸² *National Strategy for Prevention and Suppression of Violence against Women in the Family and Partnerships*,⁸³ *Strategy for Improving the Position of Persons with Disabilities in the Republic of Serbia* for the period from 2020 to 2024, etc.

A number of strategic documents and action plans, which partly or completely refer to the position of older persons, have expired. This primarily refers to: the *Strategy for Prevention and Protection against Discrimination*, the *Strategy for the Development of Social Protection*, the *Strategy for Palliative Care*, as well as the *National Strategy on Ageing*. New strategic documents should be based on the evaluation of previously valid strategies, and taking into account the current situation and needs of the social groups to which they relate.

The National Strategy on Ageing,⁸⁴ the validity of which expired in 2015, sets the following strategic directions: affirmation and realization of a comprehensive approach to ageing through coordinated functioning of all competent republic bodies and consistent approach of all participants in the subject, as well as re-affirmation of family role and family solidarity, and improving the quality of life of older people in the development of the social community. These directions were realized through 10 set strategic goals. In the document ***Evaluation of the implementation of the National Strategy on Ageing of the Government of the Republic of Serbia***,⁸⁵ 2006-2015, and the proposals for a new strategic framework, it was stated, inter alia, that some progress had been made, but that the process of implementing this strategy had been slower than

80 articles 79-112.

81 'Official Gazette of RS', issue 61/18.

82 'Official Gazette of RS', issue 4/16.

83 'Official Gazette of RS', issue 27/11.

84 'Official Gazette of RS', issue 76/06.

85 *Evaluation of the implementation of the Serbian Government's National Strategy on Ageing 2006-2015 and recommendations for a new strategic framework*, National Institute for Social Protection, Belgrade, 2016, available on the website: <http://www.zavodsz.gov.rs/sr/biblioteka/analize-i-istra%C5%BEivanja/evaluacija-primene-nacionalne-strategije-o-starenju/>

expected and planned. Among other things, this document states that older women are not allowed to participate in the work of public authorities to an adequate extent, that they are disproportionately burdened with care obligations for sick and infirm family members and generally disproportionately burdened with household chores and much more often victims of domestic violence. Also, the position of older women in the countryside is extremely endangered, given the shortcomings of the pension system in relation to women farmers.

This document also states that the strategic framework for development in relation to ageing should continue to be kept within the set goals, because they cover all the priorities of society in adapting to the consequences of ageing and are contained in the European Strategy for Implementation of the Madrid International Plan of Action. This document also states that poverty reduction of older persons certainly has priority in taking action related to ageing, i.e., eliminating absolute poverty and taking action to reduce the risk to life of older persons below the poverty line, as well as creating long-term care policies, i.e. organizing, financing and providing social and health care services and other services and rights in order to provide the necessary daily assistance and support. Special attention is paid to regulating the manner of coordination and cooperation of health care with social protection, while defining appropriate rights and services and the manner of their financing, and increasing the capacity of existing services. This evaluation also emphasizes the need to take measures to protect against discrimination, neglect and violence against older persons, as well as to adapt the environment to the specific abilities of older persons.

Having in mind the above, i.e. the fact that the strategic document on ageing has expired, it is necessary to mention the provisions of the current *Decree on the National Program for Preservation and Improvement of the Health of Older Persons*.⁸⁶ This national program, which is an integral part of the regulation, is based on the integrative concept of providing care for older persons, and includes health services at the primary, secondary and tertiary levels of health care, social support and services in the field of social protection, occupation and support activities, and refers to connecting all those who participate in the protection of older persons in order to create a society for all ages and promote quality of life and active ageing. This program stipulates that in the part related to social support for older persons, the health care of older persons should not be left only to the health services, but should be the concern of the entire community. Within the activities and engagement of the entire community, it is necessary to establish inter-ministerial cooperation, the involvement of local self-government bodies and educational institutions, social protection, as well as the engagement of associations. Particular emphasis is placed on increasing the availability and equity of health care, which is of

86 'Official Gazette of RS', issue 8/17.

particular importance for all older persons, especially for those living in the most remote and rural areas. Closely related to accessibility is ‘ageism’ as a form of age discrimination, which is widespread in many spheres of life. In order to prevent ageism discrimination in the provision of health care services, it is necessary to include them in decision-making processes, and periodically review and innovate recommendations, guidelines and guides to good clinical practice in the treatment of older persons.⁸⁷

*The Strategy for the Development of Digital Skills in the Republic of Serbia for the period from 2020 to 2024*⁸⁸ states, among other things, that it is necessary to pay special attention to taking measures to create more inclusive and equitable opportunities for groups that had less opportunities to use digital technologies and develop basic digital skills due to their age, physical abilities, consciousness, geographical area, levels of education, price, etc. and accredit training programs for the development of digital skills of citizens with the development of models of increased access to citizens who belong to vulnerable categories, including senior citizens. This strategy also states that a certain number of older persons do not have basic digital skills, and the need to monitor information on modern devices, as well as the need to make contact and access various services in society, necessitates the development of this type of digital interactive skills. Therefore, as many older persons as possible should be trained in basic digital skills, which include learning the basics of how smartphones and the Internet work together to deliver applications, information and messages, including skills to set up new accounts and create passwords, research, search, download and the use of network and mobile applications. This strategy also states that it is necessary to conduct campaigns aimed at raising citizens’ awareness of the need to adopt digital skills and raising the level of interest, especially of certain vulnerable social groups, and that key performance indicators will be elaborated in detail within action plans.

2.2.3. Overview of the situation – exercising rights in practice

Current demographic data and especially projections of population changes for the next period, which indicate that the Republic of Serbia belongs among the countries where process of demographic ageing is heavily pronounced, with the prospect of further ageing and life expectancy, necessarily have implications primarily on pension and disability insurance systems. The growing number of users and the extension of the life expectancy of the population, as the greatest achievement of civilization, put the mentioned systems in all societies that are ageing before the challenges of sustainability. Therefore, in recent years, solutions have been sought that would have as little impact as possible on the standard of

87 Part 2. Leading principles, chapter 2.2 Society’s support for the older .

88 ‘Official Gazette of RS’, issue 21/20.

pensioners, and interventions have been made in terms of gradual extension of working life, i.e. tightening the conditions for exercising the right to pensions.

In addition to pension and disability insurance, the same problems are being faced by the social and health care systems. These problems are primarily related to the coverage of services needed by older persons, who increasingly live alone in older age, especially women, due to changes in family structure, shorter life expectancy of men and migration of the younger population to cities. All of the above causes the need for greater support from society. What also needs special emphasis is the discrimination, violence, abuse and neglect to which older persons are often exposed. This situation is a consequence of the prejudice that older persons are a burden to society and do not contribute to the community and / or that their contribution is not valuable enough for either the family or the community. Such attitudes are to a large extent a precondition for discrimination against older persons.

Respect for the human rights of older persons means their true inclusion in the community at all levels and in all areas, and the state should provide them with continuous support and, when necessary, assistance in exercising their rights and using services.



Bogdana Arsić, 7th grade, Belgrade, 2018.

Retirement and disability insurance

The pension and disability insurance system of the Republic of Serbia is facing challenges, as are similar systems in other European countries, owing to the accelerated ageing of the population and the growth of the number of pensioners in relation to the economically active population.

The reform of the pension system, which has been implemented in several phases since 2001, has significantly changed the characteristics and structure of this system. Thus, in 2014, amendments to the Law on Pension and Disability Insurance were adopted, which have gradually equalized the age limit for both sexes to 65, and early old-age pension was introduced, which means reducing the amount of pension in case of early retirement. Significant changes were also made in the area of benefited seniority. Additional measures, related to the amount of pensions, were adopted in the last quarter of 2014, as part of the fiscal consolidation program. All pensions of more than 25,000 dinars have been progressively reduced, for about 39% of pensioners.

According to the data of the National Retirement and Disability Insurance Fund,⁸⁹ the ratio of the number of pension beneficiaries to the number of insured persons is 1: 1.3 (all categories of insured persons are included), while in 2000 this ratio was 1: 1.8.

The number of insured persons dropped from almost 2,800,000 in 2000 to 2,200,000 in 2019, while the number of pensioners increased by about 200,000 in the same period. The average number of years for drawing the older-age pension are also increasing, so that in 2012, women drew the average older-age pension for an average of 18 years, and men for 16, while in 2019, women drew the average older-age pension for 20 years, and men for 17 years.

When looking at data on the use of other rights, such as monetary compensation for bodily injury, in 1997 there was a total of 168,337 users, while in 2019 there was a total of 55,469, which indicates a large decrease in rights in relation to the total number of users. On the other hand, there was a total of 59,443 cash benefits for assistance and care of another person in 1997, while in 2019 there was a total of 79,949 beneficiaries.⁹⁰

89 *Annual Statistical Bulletin 2019*, National Retirement and Disability Insurance Fund, available on the website: <https://www.pio.rs/sr/godishni-bilten>

90 *Annual Statistical Bulletin 2019*, page 34.

According to the data of the National Retirement and Disability Insurance Fund for December 2019,⁹¹ the total number of pension beneficiaries in the Republic of Serbia was 1,708,293, including employees and professional military personnel, independent insured persons and farmers, while the average pension was 26,336 dinars. The lowest was the average amount of pensions for farmers (11,265 dinars), and the highest for employees and professional military personnel (28,165 dinars).

According to the data from September 2020,⁹² the total number of pension beneficiaries is 1,693,642 persons, and the average amount of pension is 27,764 dinars. The average amount of older-age pension is 29,873 dinars, disability pension 26,043 dinars (15.9% of beneficiaries), while the average amount of survivor's pension is 22,290 dinars (19.8% of beneficiaries). According to available data from November 2020,⁹³ the largest number of beneficiaries receive a pension to the amount of 15-20,000 dinars (19%), and below that amount, another 19.3% of beneficiaries receive a pension, while the highest amount of pension in the Republic of Serbia is received by only 0.2% of users.

Table 2: *Amount of pensions, data from the National Retirement and Disability Fund, November 2020*

The amount of the pension	Number of users	Percentage of users
Up to 10,000 Serbian dinars	103,598	6,1
Up to 10-15,000 Serbian dinars	223,055	13,2
15-20,000 Serbian dinars	321,047	19
20-25,000 Serbian dinars	238,504	14,1
35-40,000 Serbian dinars	128,447	7,6
Highest pensions (100,000 and more)	4,194	0,2

According to data from January 2021,⁹⁴ the average amount of older-age pension is 31,611 dinars, disability pension 27,520, and family pension 23,590 dinars. When it comes to farmers, the average amount of older-age pension is 13,024 dinars, disability pension 13,405, and family pension 9,259 dinars. Cumulatively, for all pensioners, the average amount of pension is 29,378 dinars.

91 *Number of pension users and the average pension amounts in Serbia in December 2019 per branches and municipalities*, National Fund for Retirement and Disability Insurance, available on the website: <https://www.pio.rs/sr/ostalo>

92 *Monthly Statistical Bulletin*, National Retirement and Disability Insurance Fund, November 2020, available on the website: <https://www.pio.rs/sr/mesechni-bilten>

93 *Monthly Statistical Bulletin*, National Retirement and Disability Insurance Fund, November 2020, available on the website: <https://www.pio.rs/sr/mesechni-bilten>

94 *Monthly Statistical Bulletin*, National Retirement and Disability Insurance Fund, January 2021, available on the website: <https://www.pio.rs/sr/mesechni-bilten>

When the data on the amount of pensions and the number of beneficiaries are compared with the amount of the minimum net salary, which, depending on the number of working hours during the month, amounts to around 30,000 dinars (31,747 dinars in January 2020 and 30,900.24 dinars in January 2021), it can easily be concluded that a monthly pension that is less than the amount of the minimum wage is received by 65.6% of pensioners.

These data show that a larger number of pensioners are in a more difficult financial situation, especially when comparing the amount of the average consumer basket, which for December 2019 amounted to 71,992.61 dinars, or the minimum consumer basket, which for December 2019 amounted to 37,287.05 dinars.⁹⁵ The average consumer basket for the month of September 2020 amounted to 73,336.79 dinars, while the minimum consumer basket in the same month amounted to 37,741.06 dinars. According to these data, over 75% of pension beneficiaries receive a monthly pension amount that is less than the amount of the minimum consumer basket.

It should be noted, however, that in accordance with the regulations in the field of pension and disability insurance, RF PIO funds can be used for the social standard of pension beneficiaries, up to 0.1% of total income from contributions. Thus, rehabilitation costs are borne for beneficiaries whose pension is below average, if they do not have other personal income and if they have not used this right during the year. In 2020, 14,229 pensioners exercised this right.

Also, as a special type of social standard, RF PIO provides solidarity assistance which is granted in standardized packages, the content of which consists of basic foodstuffs and hygiene products for pension beneficiaries whose amount does not exceed the amount of the lowest pension.

The report *Reality of Poverty and Social Exclusion of the Older – AGE Platform Europe Policy Statement from 2018*⁹⁶ states that at the European Union level the risk of poverty and social exclusion of people over 65 is slightly declining, but that the poverty rate increases with age, which is the main reason for insufficient indexation of pensions over a longer period, due to which their value decreases with age. This report also notes the difference in life expectancy between women and men, bearing in mind that older women are more likely to live alone, and that the differences in pensions between men and women are 37% in favor of men (in 2017),⁹⁷ which will cause further problems related

95 *Consumer Basket*, Ministry of Commerce, Tourism and Services, available on the website: <https://mtt.gov.rs/informacije/potrosacka-korpa/>

96 *Poverty Watch 2018 Older persons' poverty and social exclusion – a reality*, AGE Platform Europe Policy Statement, October 2018, available on the website: https://www.age-platform.eu/sites/default/files/AGE_Poverty_Watch_2018.pdf

97 *Idem*, page 4.

to the growth of the poverty rate in older age.

According to the data from the *Third National Report on Social Inclusion and Poverty Reduction in the Republic of Serbia 2014-2017*,⁹⁸ the coverage of the population over the age of 65 with the pension in 2017 was close to 88%, with it being higher for men - 95%, while for women it was 82.5%. According to this report, the minimum pension from the insurance of employees / self-employed, which at the end of December 2016 amounted to 13,655 dinars, was received by 106 thousand pensioners – about 60 thousand older-age and 40 thousand disabled pensioners. When it comes to older-age pensioners who benefit

from the minimum pension, more than 80% of them have not worked for more than 25 years, and these are mostly women with work experience between 15-25 years. These data indicate that women, who on average live longer and use pensions longer, are at a disadvantage, which further causes a greater and longer need for various services and the provision of help and support to provide for their basic living needs. It is also necessary to mention here that, as of November 2014, there was a temporary reduction of pensions in force, the amount of which was higher than 25,000 dinars.



Milica Obradovic, 7th grade,
Sabac, Serbia, 2018

98 *Third National Report on social inclusion and poverty reduction in the Republic of Serbia 2014-2017*, Belgrade, November 2018, available on the website: <http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2018/11/Treci-nacionalni-izvestaj-o-socijalnom-ukljucivanju-i-smanjenu-siromastva-nacrt.pdf>

In the *Report on Progress in Achieving the Sustainable Development Goals by 2030 in the Republic of Serbia*,⁹⁹ according to the National Statistical Office, progress in achieving the Sustainable Development Goals (COR) was monitored as an important aspect of the implementation of the Sustainable Development Agenda until 2030, listing key findings for all objectives. Of these, we highlight the key findings related to achieving the first goal - COR 1 - which provides for the end of poverty in all its forms. The report states that the Republic of Serbia has made moderate progress in the long run (2013-2018), and significant progress in the short term (2015-2018), in reducing the risk of poverty and social exclusion. In 2018, compared to 2013, when the Income and Living Conditions Survey was first conducted, on the basis of which relative poverty was measured, the at-risk-of-poverty rate was reduced by 0.2 percentage points (from 24.5% to 24.3%). When it comes to trends observed by age groups, long-term trends indicate significant progress in poverty reduction in all age groups except the oldest population (65+), where there is a moderate distance from the target. Significant progress has also been made in relation to the sub-objective, which envisages the application of appropriate national social protection systems, due to the increase in the share of social protection beneficiaries in the total population. In the period 2011–2019, there was a continuous increase in the share of the population covered by social protection systems in the total population, by 2.6 percentage points.

Social Protection

Every individual and family who needs social assistance and support in order to overcome social and life difficulties and create conditions for meeting basic living needs, has the right to social protection in accordance with the Law on Social Protection. The right to social protection is provided by reception of social protection services and material support.

The following is a brief overview of the most common social protection services for the older, as well as a brief overview of material support aimed at the poorest citizens.

Social protection services in the Republic of Serbia include assessment and planning services, daily community services, independent living support services, counseling-therapeutic and social-educational services, as well as accommodation services. Services are partly under the jurisdiction of the national level (assessment and planning services, residential and family accommodation,

99 *Progress Report on the 2030 Sustainable Development Goals in the Republic of Serbia*, National Statistical Office, Belgrade, December 2020, available on the website: http://sdg.indikatori.rs/media/1545/izvestaj-o-napretku-u-ostvarivanju-ciljeva-odrzivog-razvoja-do-2030-godine-u-srbiji_web.pdf

shelters for human trafficking and sheltered housing for people with disabilities, except in the most developed cities and municipalities), and partly under the jurisdiction of local governments.

The Accommodation service is the most common social protection service. According to data from 2016, the users of dormitory accommodation in the public sector are dominated by the older, who are mostly accommodated in about forty homes for older persons and adults (approximately 6,700 users).¹⁰⁰ In the last decade, the accommodation service for the older in the private sector has also developed, mainly in homes with a smaller capacity of up to 30 users. At the end of 2016, approximately 3,000 users over the age of 65 were staying in over a hundred privately licensed homes.

According to the data of the National Institute for Social Protection from 2018,¹⁰¹ in 247 institutions for accommodation of adults and older persons on 31.12.2018, there were 14,531 users, which was 16% more than in 2017, and 87% more than in 2015. During 2018, the home accommodation service for adults and older persons was used by 23,415 users, half of whom were users over the age of 80. This group of users is showing a tendency to grow.

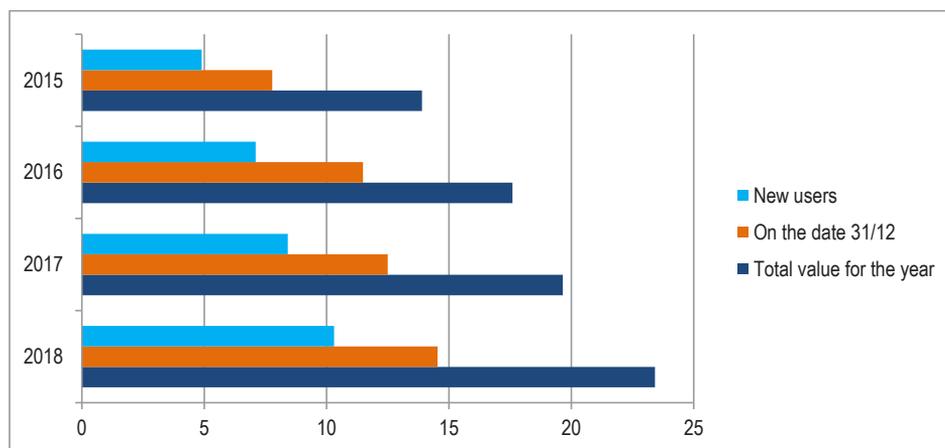
The observed five-year trend shows an increase in the number of users in institutions for accommodation of adults and the older by 62.6%, so in 2019, 15,297 users were accommodated in institutions for adults and older persons. Compared to 2015, the number of users in the public sector increased by 4.2%, while in the general sector it increased by 425.5%, as a result of the increase in the number of providers of this service. In 2019, users are seen to be over 80 years old, and when the gender structure is observed, women dominate, with over 65%.¹⁰² Regarding family status, more than half of the beneficiaries lived in single households before being placed in a home. About 60% of users have regular contacts with relatives. The most common reason for leaving the institution is the death of the user (about 75%), which is a value that has not changed during the last three years.

100 Idem, page 108.

101 *Report on the work of institutions for housing of adults and older persons for 2018*, National Institute for Social Insurance, Belgrade, September 2019, available on the website: <http://www.zavodsz.gov.rs/media/1878/izvestaj-o-radu-ustanova-za-sme%C5%A1taj-odraslih-i-starijih-u-2018.pdf>

102 *Adults in the social protection system 2019*, National Institute for Social Protection, Belgrade 2020, available on the website: <http://www.zavodsz.gov.rs/sr/biblioteka/izve%C5%A1taji-iz-sistema/izve%C5%A1taji-iz-sistema-2019/>

Graph 5: Number of users of housing services for adults and older persons 31 Dec 2015.-31 Dec 2018¹⁰³



The total coverage of older persons with dormitory accommodation in the Republic of Serbia is about 0.8%, which is far below the average of European countries (approximately the coverage of Portugal only, while in most European OECD countries the coverage of the 65+ population with institutional outpatient accommodation ranges between 4 and 5%).¹⁰⁴ According to the reports of homes for older persons and adults in the public sector, it is stated in the **Third National Report on Social Inclusion and Poverty Reduction** in the Republic of Serbia for the period 2014-2017 that, although there are waiting lists, the capacities for more independent users are unfilled. Reports from private homes also state that users opt for accommodation only in the ‘advanced stage of illness and infirmity’, while one number of users uses the service only temporarily, for example after hospital treatment.¹⁰⁵

Data from the Republic Institute for Social Protection¹⁰⁶ show that in the next thirty years the intensive process of demographic ageing will continue, and that the share of the working age population will decrease in the near future

103 *Report on the work of institutions for housing of adults and older persons for 2018*, National Institute for Social Protection, Belgrade, September 2019, available on the website: <http://www.zavodsz.gov.rs/media/1878/izvestaj-o-radu-ustanova-za-sme%C5%A1taj-odraslih-i-starijih-u-2018.pdf>

104 *Third National Report on Social Inclusion and Poverty Reduction in the Republic of Serbia for the period 2014-2017*, p. 207.

105 *Report on the work of institutions for housing of adults and the older for 2018*, p. 108.

106 *Adult (18+) users in the social protection system in 2018*, National Institute for Social Protection, July 2019, available on the website: <http://www.zavodsz.gov.rs/media/1879/punoletni-korisnici-u-sistemu-socijalne-za%C5%A1tite-2018.pdf>

and move to the category of the older, dependent population who will need state assistance, as indicated by current trends. In 2019, the number of social protection beneficiaries amounted to 741,205, which continued the growth trend in the number of social protection beneficiaries in Serbia, which had increased by 22.9% in the period 2010-2019.¹⁰⁷ The number of adult users is seen to be 543,492 - an increased of 25.2% over a ten-year period. In 2019, an average of 7.3% of the population of Serbia is on the records of centers for social work, i.e. uses social protection services. According to the same source, most users in the records continue to belong to the user group of materially endangered users - users of financial social assistance and one-time financial assistance. The percentage of this user group in 2019 is seen to have been 52.4%, and since 2011 the number of adult materially vulnerable users had increased by 33.5%. The high representation of this category of citizens in the social protection system is in line with statistical surveys dealing with poverty. According to the Household Budget Survey, the percentage of the population in absolute poverty in the Republic of Serbia in 2019 was 7.1%, and as much as 24.3% of the population is at risk of poverty.¹⁰⁸

Day services in the community are the most developed services for the older, compared to other groups of services, except accommodation services. This group of services also includes the three individually observed most widespread services: home help for adults and older persons, a personal companion for a child, and a day care center for children with disabilities. During 2018, daily community services were provided in a total of 135 municipalities and cities, of which 126 services were provided for adults and older persons in 126 local self-governments. Users of daily services in the community make up almost 90% of the total number of users of all services. According to the area in which they live, the users of these services are predominantly from the urban environment, and more than half of the total number of users of home help services for adults and older persons and day care centers for adults and older persons are female users.

In the period from 2015 to 2018, nominally speaking, the number of users of the home help service for adults and older persons more than doubled. However, the different models and scope of provision of this service affect the difference between the actual and equivalent number of users, but not to the extent that it is affected by the number of months of service provision during the year. In 2018, the home help service for adults and older persons was provided for all 12 months in less than 50% of local governments, while in

107 *Adult (18+) users in the social protection system in 2019*, National Institute for Social Protection, July 2020, available on the website: <http://www.zavodsz.gov.rs/sr/biblioteka/izve%C5%A1taji-iz-sistema/>

108 *Adult (18+) users in the social security system in 2019*, page.8.

19 local governments this service was provided for six months or less, which is reflected in the number of equivalent users (indicator service program sizes are reported as the total number of actual service users and as an equivalent number of users. The equivalent number of beneficiaries is calculated on the basis of the assumption that all beneficiaries in all local self-government units receive the same level / intensity of support for all 12 months of the year). Of the services that existed in 2012, only the number of users of home help for older persons actually increased (4.2%), while the number of users of all other services decreased in the range of -21%.¹⁰⁹

In 2018, the coverage of the home help service was 16,678 users on average per month, of which persons older than 65 are seen to make up 90.25% of the total number of users. The coverage of older persons with this service (1.24% of the total population 65+) is low, especially compared to developed countries. One fifth of the total number of service users are from Belgrade. The number of local governments that provide this service is almost identical to years ago (2012-122, 2018-123). Hypothetical coverage rate, the share of the number of equivalent users older than 65 in the population 65+ in 123 local governments, is 0.7%.¹¹⁰ The availability of this service is particularly insufficient in rural areas.

The *Long-term care report in Serbia 2018*¹¹¹ of the European Commission provides a general description of national long-term care systems in 35 European countries, including the Republic of Serbia, and provides a comparative analysis of national long-term care systems. The report states that Serbia does not have a comprehensive long-term care policy that would meet the needs of the older persons population. The current solutions and instruments in this area were designed several decades ago and have not been reformed under the conditions of rapid population ageing. Public formal care includes institutional care in public homes for older persons, home care services on a daily basis, and cash benefits for those who need someone else's care and assistance. Coverage of these services is extremely low: in 2016, only 0.5% of the older were covered by public institutional care, 1% were covered by day care and home care services, and about 7% received cash benefits for care and assistance. In addition, the report states that there are permanent waiting lists for admission to institutions and for day care services in larger cities. With the small volume of formal care

109 *Mapping social protection and financial assistance services in local self-government units in the Republic of Serbia*, Team for social inclusion and poverty reduction of the Government of the Republic of Serbia, 2020, <http://csp.org.rs/sr/publikacije/>

110 *Mapping social protection and financial assistance services in local self-government units in the Republic of Serbia*, page 20.

111 *ESPN Thematic Report on Challenges in long-term care Serbia 2018*, The European Social Policy Network, European Commission, February 2018, available on the website: https://ec.europa.eu/social/main.jsp?pager.offset=25&advSearchKey=espnltc_2018&mode=advancedSubmit&catId=22&policyArea=0&policyAreaSub=0&country=0&year=0

services provided, public expenditures are small, so in 2017, only 0.45% of the GDP was spent on all long-term care services and benefits for older persons.¹¹²

On the other hand, in order to see the overall picture, in the publication *Mapping of social protection and material support services under the jurisdiction of local governments in the Republic of Serbia*,¹¹³ it is stated that the total expenditures for social protection services under the jurisdiction of local self-government units in 2018 amounted to 3.65 billion dinars, or only 0.07% of GDP. For comparison, expenditures for social work centers in 2017 amounted to 0.06% of GDP, and total expenditures for the most widespread social protection services - residential and family accommodation – amounted to 0.14% of GDP. Expenditures for social protection services under the jurisdiction of local self-governments per capita amount to an average of approximately 454 dinars per year, and almost 70% of municipalities and cities allocated less than that amount. Expenditures for social protection services were not recorded at all in eight local self-governments.

The same publication also states that earmarked transfers allocated for local social protection services in 2018 amounted to approximately 622.4 million dinars (which financed 17.1% of total expenditures). 105 local self-government units received earmarked transfers, but 40 did not receive them, including eight that invest very little in local services (less than 0.5% of the local budget), as well as the six least developed municipalities. It is also stated that, according to the announcement of the competent ministry, in 2018 local self-government units that did not submit reports on spending funds, but also those that did not ensure adequate participation of funds from local budgets or were sanctioned for misuse of funds, were left without transfers.¹¹⁴

A special issue is meeting the needs for the implementation of various social protection measures in emergency situations, which is the situation caused by the Covid-19 pandemic. According to the report of the *Social Security Network during the Covid-19 crisis*¹¹⁵ During the crisis, the Republic of Serbia did not increase the adequacy or coverage of programs aimed at the poorest, and it is one of the five countries in the world (besides Hong Kong, South Korea, Singapore and Japan) that granted financial aid (100 euros) to all adult citizens only

112 *ESPN Thematic Report on Challenges in long-term care Serbia 2018*, page 4.

113 *Mapping social protection and financial assistance services in local self-government units in the Republic of Serbia*, Team for social inclusion and poverty reduction of the Government of the Republic of Serbia, 2020, available on the website: <http://csp.org.rs/sr/publikacije/>

114 *Mapping social protection and financial assistance services in local self-government units in the Republic of Serbia*, page 34.

115 *Social security networks in times of Covid-19 crisis*, Team for social inclusion and poverty reduction of the Government of the Republic of Serbia, July 2020, available on the website: <http://sociojalnoukljucivanje.gov.rs/sr/category/dokumentacija/>

after the state of emergency was lifted. Total expenditures for these purposes amounted to 1.3% of GDP in 2019. Based on the international review of the World Bank's social protection system response to Covid-19 up to July 10, 200 countries / territories have implemented 1,055 social protection measures in a broader sense (social assistance, social security and labor market interventions). The most common type of intervention was non-contributory social benefits, financed from the budget.

Financial-material support, in accordance with the regulations in the field of social protection, provides for the rights to: financial social assistance, allowance for assistance and care of another person, increased allowance for assistance and care of another person, special financial compensation, training and one-time assistance.

Social benefits should help those whose incomes are below the established minimum, so that the provided financial assistance will make their lives easier. In that way, citizens who face difficulties are enabled to live with more dignity, with the awareness that the state takes care of them and their needs.

Poverty is the lack of material goods needed to meet the most important needs of an individual, family or a larger social group. According to the United Nations definition, the poor are all those whose way of life, comfort and dignity are below the standards that are considered normal in the society in which they live.

In the *Third National Report on Social Inclusion and Poverty Reduction in the Republic of Serbia for the period 2014-2017*¹¹⁶ it is stated that the basic indicator for monitoring the implementation of the Europe 2020 Strategy in the field of social inclusion and poverty reduction is the risk of poverty or social exclusion. This indicator is a combination of three indicators – at-risk-of-poverty rates, rates of severe material deprivation and rates of very low labor intensity. However, some authors point out that this indicator does not necessarily provide a focus on the most vulnerable, and that it does not imply the essential multidimensional approach to poverty reduction. Although seemingly the population exposed to all three of these risk factors at the same time (the overlapping of the three risk groups) is the most vulnerable, it should be borne in mind that, due to the legal definition of low labor intensity, those older than 60 years cannot be found in the overlapping of all three risk factors,¹¹⁷ even when they are income-free and markedly materially deprived.

116 *Third national report on social inclusion and poverty reduction in the Republic of Serbia 2014-2017*, page 35-36.

117 Persons over 60 cannot simultaneously belong to all three categories, because the category of persons living in households with low labor intensity only includes persons under 60 as the set age limit

According to the SILC (2016) survey, 38.7% of the population of the Republic of Serbia (2.72 million) is at risk of poverty or social exclusion (the average of 28 EU countries is 23.5%).¹¹⁸ Observed according to risk factors, a total of 25.5% (1.79 million) of the population of the Republic of Serbia is at risk of poverty, 19.5% (1.37 million) are severely materially deprived, and 15.7% live in low-intensity labor households (1.01 million). Approximately 40% of the population which is exposed to the risk of poverty or social exclusion, is faced with a combination of two or three risk factors, i.e. is located at the intersection of all three indicators. According to these data, the at-risk-of-poverty rate decreases with age and reaches the lowest value for people aged 65 and over (19.1%), despite the fact that people older than 60 cannot be found in the intersection of indicators due to low work intensity. However, if it is about older persons living in one-member households, then the at-risk-of-poverty rate is significantly higher, above the average of the total population (27.2%), which indicates extreme poverty of older persons and the need for various types of help and support.¹¹⁹

According to the Ministry of Labor, Employment, Veterans and Social Affairs¹²⁰ in 2017, 105,051 families, i.e. a total of 257,354 persons, exercised the right to financial social assistance, 50,815 persons exercised the right to assistance and care from another person, and 526 persons exercised special financial compensation, while according to the data of the Republic Institute for Social Protection,¹²¹ in 2019, the right to financial social assistance was used by a total of 226,897 beneficiaries, i.e. 92,673 families, and the trend of decreasing the number of beneficiaries of this right continued, which in relation to 2017 amounts to 12.9%.

The amount of financial assistance depends on the number of household members of the applicant and the income that the family earns. According to the decision on the nominal amounts of financial social assistance,¹²² social assistance from April 1, 2019 amounts to 8,508.00 dinars.

118 *Third national report on social inclusion and poverty reduction in the Republic of Serbia for 2014-2017*, page 34.

119 *Idem*, page 37.

120 *Forms of social allowance*, Ministry of Labor, Employment, Veteran Affairs and Social Affairs, available on the website: <https://www.srbija.gov.rs/tekst/329833/socijalna-zastita.php>

121 *Adult (18+) users in the social protection system in 2019*, National Institute for Social Protection National Institute for Social Protection, Belgrade, 2020, available on the website: <http://www.zavodsz.gov.rs/sr/biblioteka/izve%C5%A1taji-iz-sistema/izve%C5%A1taji-iz-sistema-2019/>

122 'Official Gazette of RS' „Official Gazette of RS”, issue 36/19.

According to the data of the National Institute for Social Protection,¹²³ most users in the records of social work centers continue to belong to the user group of materially endangered users – users of financial social assistance and one-time financial assistance. The percentage of this user group in 2019 is 52.4%, and since 2011 the number of adult materially vulnerable users has increased by 33.5%. According to the same source, in 2019, among the beneficiaries of the right to financial social assistance, those older than 65 made up a share of 10.9% of the total number of recipients of this type of assistance.

Regarding the right to one-time financial assistance, according to the same report of the National Institute for Social Protection, in 2019, 163,602 decisions were made recognizing this right, which is 2.4% more than in 2015.

In addition to these rights, there are other benefits aimed at the older (65+) and the poor older (from utilities to the price of public transport), which have been introduced and practiced in most municipalities and cities in the Republic, especially in Belgrade, where, for example, poor senior citizens receive permanent financial assistance. The city provides an increase of this amount by slightly less than 1/5, has free public transport services for older persons (65+) and some other services such as use of libraries, reduced ticket prices for some events and the like. Funding for soup kitchens is provided in Belgrade, as well as in all major urban centers.

It follows from the above data that the continuously high representation of materially vulnerable beneficiaries in the social protection system, population ageing processes, increasing the dependency ratio between the working and inactive population and increasing the dependency rate, have significant implications for the social protection system.

Health protection

The organization of the health care system in the Republic of Serbia, social care for the health of the population, other issues of importance and general interest for the organization and implementation of health care are regulated by the Law on Health Care. Health care is provided by health activities and implemented through the health care system. Persons over the age of 65 are covered by social health care. Health care activities are performed at the primary, secondary and tertiary levels of health care.

At the primary level of health care, in accordance with the law, among other things, the Institute for Geriatrics and Palliative Care and the Institute for Palliative Care are being established. The Institute for Geriatrics and Palliative

123 *Adult (18+) users in the social protection system in 2019*, page 55.

Care is a health institution that provides health care for older persons and implements measures to preserve and improve health and prevent disease, home treatment, health care and rehabilitation of older persons, as well as palliative care for older persons and people of all ages. The Institute for Palliative Care performs palliative care for persons of all ages. Both institutions can have a hospital as well as a pain clinic.

According to data from previous years,¹²⁴ long-term care and treatment in the Republic of Serbia is performed in 13 health care institutions at the secondary level, in which palliative care units with 140 beds have been formed. There are no special health institutions for palliative care and care of patients in the terminal phase of disease. At the primary level of health care, only 40% of health centers in Serbia have a specially organized home treatment and care service whose services are aimed at the general population. Only in Belgrade is there a specialized institution for home treatment, care and palliative care of older persons – the City Institute for Gerontology and Palliative Care.

On the situation and needs in terms of health care (introduction of comprehensive geriatric assessment and formation of a team for assessment and coordination of the needs of the older), but also of intersectoral coordination, high level of cooperation between the health and social sector, and all other relevant factors in the protection of older societies, local self-government units, etc.), the research results show¹²⁵ differences on health assessment and the use of health care for people aged 65 and over in the territory of Vojvodina. The results of this research showed, among other things, that they had a better chance of receiving their health assessment if they were poorer women, and the poor. However, the predictors of visiting a general practitioner were: higher level of education, better financial status and greater allocation from their own income for outpatient health care, whilst the more often hospitalized were: men, people with lower levels of education, and respondents who assessed their health as bad or very bad. The research confirmed that there are significant inequalities in health and the use of health care among the older in Vojvodina, which need to be reduced through comprehensive public health policies and interventions. Expressed inequalities in the health of older persons are related to socio-economic characteristics, and it has been pointed out that it is necessary to implement measures aimed at reducing poverty, and increasing the living standards of pensioners and other older people. In addition, the results of this

124 *Social protection in old age: long-term care and social pensions*, Team for Social Inclusion and Poverty Reduction of the Government of the Republic of Serbia, 2014, available on the website: http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2014/06/sipru_DTNSC_web_jan.pdf

125 *Determinants of health and use of health care for the older people in Vojvodina*, PhD dissertation, Dr. Sonja Cankovic, Novi Sad 2017, available on the website: <https://nardus.mpn.gov.rs/handle/123456789/8658>

research indicate the unequal position of women, because among women there were significantly more of those who belong to the category of uneducated as well as poor, compared to men. Every third respondent from this study had an unmet need for health care. General practitioners and specialists are more often visited by persons with a higher level of education and those with better financial status, which is why there is an obvious need for preventive activities and implementation of measures and activities aimed at increasing accessibility of health care for older persons. Having in mind the demographic processes, which are characterized by the ageing of the population, it is necessary to adjust the health care system and society as a whole to the needs of older persons, the report states.

The Strategy for Palliative Care (adopted in 2009), at the level of primary health care, envisages the formation of teams for palliative care in health centers, within-the-home treatment and care services, and at the level of secondary health care, the formation of special units for palliative care. By 2015, in accordance with this strategy, the establishment of more palliative care units in hospitals and clinical centers had been planned, as well as the establishment of the Center for the Development of Palliative Care at the Institute of Oncology and Radiology.

According to the *Report on improving the quality of work in health care institutions of the Republic of Serbia in 2018*, from the 'Dr. Milan Jovanovic Batut'¹²⁶ Institute of Public Health of Serbia, among other things, the indicators of the quality of health care for older persons were considered, which referred to the length of waiting from registration to the exit from the commission for admission of patients for home treatment, the number of patients with decubitus wounds that occurred during treatment and care, the percentage of patients receiving palliative care, the percentage of patients who were assessed for pain on admission to palliative care. According to the submitted data, the lowest percentage of newly formed decubitus wounds is in patients from the Health Center of Nis, and the highest from the Health Center Novi Sad. The average length of waiting from registration to the visit the commission for admission of patients for home treatment in the Belgrade City Institute of Gerontology is 11 days, in the Health Center of Nis two days, while in other health centers there is no waiting for the visit the commission.¹²⁷

However, as a result of depopulation and migration, some health care facilities, especially primary health care (health stations and dispensaries) in rural areas of Serbia have been closed, leading to difficult access to these

126 *Report on improving the quality of work in health care institutions of the Republic of Serbia in 2018*, 'Dr. Milan Jovanović Batut' Institute of Public Health of Serbia, 2019, available on the website: <http://www.batut.org.rs/download/izvestaji/Izvestaj%20kvalitet%202018.pdf>

127 *Report on improving the quality of work in health care institutions of the Republic of Serbia in 2018*, p. 91.

services for the persons living in rural areas, mostly older persons. Home care and assistance services in these areas are also rarely formed owing to the small number of inhabitants and the fragmentation of the area. Integrated services at the local level, which include the help of geronto-housewives, palliative care and care for patients in the terminal stages of the disease, have not been developed to the required extent, and there are not enough geriatric beds and possibilities for institutional care for these people.

The aforementioned *Decree on the National Program for Preserving and Improving the Health of Older Persons* states, among other things, that every individual should develop the awareness that ageing is a natural lifelong process and that investing in health and its promotion is the only way to ensure healthy and successful ageing, so that most people experience older age in good health, physically and intellectually able to contribute both to their personal well-being and to society as a whole. Therefore, it is necessary for each individual, at all ages, to develop an awareness of the need to take care and responsibility for their own health. This national program also states that health care for the older should not be left only to health services, but should be the concern of the whole community, and that it is necessary to establish interdepartmental cooperation, involvement of local governments, educational institutions, and social protection, as well as engaging associations. Also, in order to prevent discrimination against older persons in the field of health care services, it is necessary to include them in the decision-making processes, and periodic review and innovation of recommendations, guidelines and guides to good clinical practice in the treatment of older persons.

Protection from violence

Domestic violence, in accordance with Article 197 of the Family Law,¹²⁸ means inflicting or attempting to inflict bodily injury, causing fear by threatening to kill or inflict bodily harm on a family member or a person close to them; coercion into sexual intercourse; inducing sexual intercourse or sexual intercourse with a person under the age of 14 or a disabled person; restriction of freedom of movement or communication with third parties; insults and any other arrogant, reckless and malicious behavior. Domestic violence can manifest as physical, psychological, sexual and economic. Protection from violence is regulated by the *Law on Social Protection, the Family Law*, and the *Law on Prevention of Domestic Violence*, and it is also determined as a criminal offense by the Criminal Code.

128 „Official Gazette of RS“, issue no. 8/2005, 72/2011 - state laws 6/2015.

Violence, abuse and neglect of the oldest persons is a special phenomenon, and a greater challenge to the system of protection against violence because of personal attitudes towards this unacceptable behavior, and also because of deep prejudices and stereotypes about the lower social value of this social group and the attitude that they must listen to others and are not capable of making decisions about their lives. The same causes lead to age discrimination which in the most severe cases leads to different forms of violence. The dark number of cases of violence against older persons is very high because it is not recognized, and often the victims themselves deny and cover it up because of shame, the need to protect the perpetrator, feelings of guilt for violence, fear of the perpetrator, doubts about the possibility of getting out of the situation of violence, etc. In most cases, multiple forms of violence occur together, such as physical, economic, emotional, and other types of violence, neglect, or abuse.

There is not much research and data on the phenomenon of violence in the third age, either in the rest of the world or in the Republic of Serbia. Data from the World Health Organization show that 4% to 6% of older persons suffer some form of abuse in their home, but it is assumed that there are many more who have never been registered as victims of violence. In *The Study on Domestic Violence against Older Persons*¹²⁹ it was pointed out that the patriarchal model of family relations and intergenerational transmission of violence, but also other socio-economic factors, such as general impoverishment of a society, wars in the environment, negative effects of social transition, etc. contribute to increased domestic violence. What one of the conclusions in the *Practicum for the Public – Stop Discrimination and Violence against Older Women*¹³⁰ points out is that older women are at higher risk of abuse, neglect and domestic violence than older men, and that it is necessary to take all necessary measures to encourage older women not to remain silent about violence, as well as effective protection measures.

According to data from the Ministry of Labor, Employment, Veterans and Social Affairs from 2017, in the past five years the number of reports of violence against older persons increased by 153%, with the largest number of them related to physical and psychological violence.¹³¹ In the first six months

129 *Violence against older persons – Study on Domestic Violence*, Serbian Red Cross, Belgrade, 2012, available on the website: <https://www.redcross.org.rs/sr/resursi/%C5%A1tam-pane-publikacije/nasilje-nad-starijim-osobama/>

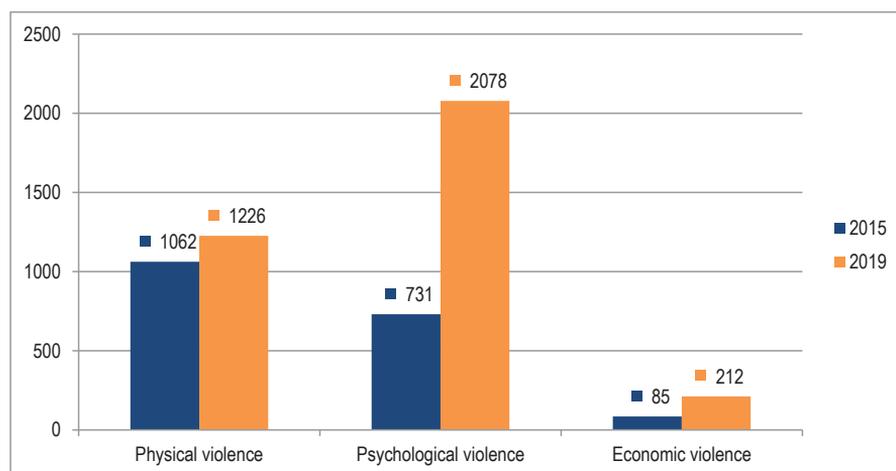
130 *Public Practicum – Stop Discrimination and Violence against Older Women*, Citizens' Association 'Strength of Friendship' – Amity, Belgrade, available on the website: <http://www.amity-yu.org/wp-content/uploads/2017/08/ZaustavimoNasiljeDiskriminacijuNad-Starima20170821.pdf>

131 *Violence against older persons remains among the greatest problems in society*, June 2017, available on the website: <http://socijalnoukljucivanje.gov.rs/rs/nasilje-nad-starima-i-dalje-jedan-od-najvecih-problema-drustva/>

of 2018 alone, 12 older persons were killed in Serbia. Of that number, ten were women over the age of 60 who lost their lives in domestic violence without its previously being reported to the services.¹³²

According to the data of the Republic Institute for Social Protection,¹³³ the total number of reports of violence has been steadily increasing over the past five years. In 2019, the total number of applications for all age categories was 36,227, which was 93.2% more than in 2015.

Graph 6: *Number of reports of violence against the older in 2015-2019*



The number of reports of violence against older persons increased by almost 80% compared to 2015. Of the total number of reports of physical violence in 2019, 73.4% are seen to be reports of women, indicating that it is gender-based violence. Women are more likely to be victims of economic violence in all age categories. The number of reports of sexual violence against the older has more than doubled (14 reports in 2015, while in 2019 there were 36 reports).

In the *Report on reported cases of gender-based violence in health care institutions in the Republic of Serbia 2018*¹³⁴ the data obtained from health

132 *Violence against older persons – murders, robberies, beating*, October 2018, available on the website: <http://penzija.org.rs/nasilje-nad-starima-ubistva-pljacke-i-batine/>

133 *Adult users (18+) within the social security system in 2019*, National Institute for Social Protection National Institute for Social Protection, Belgrade Belgrade, 2020, available on the website: <http://www.zavodsz.gov.rs/sr/biblioteka/izve%C5%A1taji-iz-sistema/izve%C5%A1taji-iz-sistema-2019/>

134 *Report on the cases of gender-based violence in health centers in the Republic of Serbia reported in 2018*, 'Dr Milan Jovanovic-Batut' Institute for Public Health in Serbia, 2019, available on the website: <http://www.batut.org.rs/download/izvestaji/Godisnji%20izvestaj%20rodno%20nasilje%202018.pdf>

institutions of the Republic of Serbia for the period from January 1 to December 31, 2018 were analyzed and an analysis of the response of the health sector to gender-based violence was made. The report states that in central Serbia in 2018 there were 3054 reported cases of violence against women in the health care system, and in Vojvodina 828.¹³⁵ The most vulnerable groups of women in this report are older women who face discrimination based on gender and age, pregnant women, women with chronic diseases and women with disabilities.¹³⁶ The number of registered women who belong to these most vulnerable groups, and were exposed to violence, in 2018 is higher than in 2017 and 2016. The report also notes that monitoring the registration and reporting of these women is very important, as they are at higher risk of violence and face greater barriers to accessing the health and other services they need. It was stated that the lack of work in this area by the health service of Serbia demonstrates a great inequality in the approach to examining women who have experienced violence and in recording the medical findings of various doctors, and that the medical findings are often incomplete and scanty, and therefore unusable in court proceedings. The adequate education of physicians on the recognition and documentation of domestic and gender-based violence is necessary.¹³⁷

The research entitled *A well-kept family secret: abuse of older persons*¹³⁸ showed that 19.8% of older people experienced some form of abuse or neglect, and that 11% of older people who participated in the research had experience of abuse in the last year. The research-based publication points out that abuse of older persons is often preceded by discrimination caused by prejudices, stereotypes and ideas about the unproductiveness of older persons, as well as the image that older people are passive recipients of help and a burden on society. There is not enough data on the phenomenon of violence against older persons, both in the world and in Serbia, and this research showed that the greatest risk exists from financial abuse (11.5% of respondents reported on December 13 some form of financial violence, while 13.5% of older persons said that they were not permitted to decide on how their own financial means should be spent).

135 *Report on the cases of gender-based violence in health centers in the Republic of Serbia reported in 2018*, page 10.

136 *Idem*, page 26.

137 *Idem*, page 31.

138 *A well-kept family secret: elder abuse*, Red Cross of Serbia, 2015, available on the website: http://www.redcross.org.rs/slika_4096_Dobro%20cuvana%20porodicna%20tajna%20e-knjiga.pdf

2.2.4. Reports, analyses and research on the position of older persons

The position of older persons, both in the outside world and in Serbia, has been observed in numerous reports, analyses and research, primarily with the aim of pointing out certain problems and ways of overcoming them in modern conditions and in the light of demographic changes.

Reports, analyses and research at the international level

In the ***Report on the modalities of the fourth review and evaluation of the implementation of the Madrid International Plan of Action on Ageing***¹³⁹ it has been pointed out that more than 15 years have passed since the Second World Assembly on Ageing presented a comprehensive vision and adopted this important document for building an inclusive society. It is still the basic comprehensive framework for developing policies and programs that concern the ageing population and older people. In all three cycles of evaluating the implementation of this document so far, the regional commissions continued to report on significant challenges in monitoring the implementation of the **Madrid Action Plan**, which include: lack of available data in many countries, especially data disaggregated annually; the impossibility of conducting comparative analyses between countries in certain regions, due to the lack of agreed indicators at the regional level; difficulties in collecting contributions from all relevant actors in countries where there are no coordination units for ageing; lack of capacity and limited national institutional frameworks in some countries and regions involved in the process of monitoring the implementation of this document at the national level.

Special attention in this report is paid to older women, who experience multidimensional discrimination, and where age is a complex factor crossed with other forms of discrimination, such as gender, ethnicity, disability, poverty and marital and family status. States' efforts must be geared to integrating a gender perspective into all policies, programs and legislation, taking into account the needs and experiences of older women. In this regard, further research is needed to better understand and address the cross-cutting inequalities faced by older women.



The chances for improving the implementation of the Madrid Action Plan on Ageing are seen primarily through: the implementation of the concept of long-term care (about 48% of the global population is

139 *Modalities for the fourth review and appraisal of the implementation of the Madrid International Plan of Action on Ageing*, 2002, report of the UN Secretary-General, 2020, available on the website: <https://undocs.org/E/CN.5/2020/4>

not covered by any type of services at the national level, and only 5.6% of countries in the world have legally regulated long-term care for all who need it); future work formats and the benefits older people should receive from changes in the labor market, promotion of activities and effective inclusion of older people through flexible work arrangements, increased opportunities for partial retirement and adaptation of jobs to different needs of older people, while providing access to lifelong learning; increasing access to ICT while promoting the digital literacy of older people, bearing in mind that knowledge of technological advances enables their independence and improves well-being; strengthening health policies and programs for the prevention, detection, diagnosis, treatment and care of non-communicable diseases, including Alzheimer's disease and dementia.

The *International Report on Ageing*¹⁴⁰ is submitted in accordance with General Assembly resolution 73/143 on the monitoring of the Second World Assembly on Ageing and includes an analysis of policies and priorities related to ageing within the 2030 Sustainable Development Goals. This report states that many national plans and strategies for sustainable development still do not have priorities related to ageing, but that the member states of the United Nations have included the issue of ageing in the implementation of the 2030 Agenda; and that older persons are one of the most vulnerable groups, among whom older women are particularly vulnerable and exposed to multiple forms of discrimination, which can be further exacerbated during emergencies. Despite some progress in this regard, there is often a lack of focus on the specific needs and challenges faced by older people, as well as their capacity and contribution in crisis situations.



*The recommendations addressed in this report to the Member States of the United Nations relate to intensifying efforts to develop the paradigm that presents ageing as an opportunity and to recognize older persons as active actors who already make a significant contribution to the development of society. Special emphasis was placed on the existence of the risks and vulnerabilities of older women, especially in crises, in order to ensure that the invisibility, marginalization or exclusion of older women does not worsen, i.e. to ensure that **their specific needs and priorities are adequately addressed.***

In the report *Age discrimination law outside the employment field*,¹⁴¹ The European Commission analyzes the impact of regulations at the regional

140 *Follow-up to the International Year of Older Persons: Second World Assembly on Ageing, Report of the Secretary-General*, July 2019, available on the website: <https://undocs.org/A/74/170>

141 *Age discrimination law outside the employment field*, European Commission, 2020, available on the website: <https://www.age-platform.eu/publications/age-discrimination-law-outside-employment-field>

level (EU directives and the European Convention on Human Rights) and at the national level (27 member states) on age-based equality, and points out that there are areas of concern that require harmonization measures (gender and race). Despite efforts to combat discrimination, existing legal protections against age discrimination at EU level relate only to employment and vocational training, while the proposed Equal Treatment and Age Directive in the areas of social and health care, housing, education and access to goods and services, since its introduction in 2008, has not been accepted.



The key recommendations arising from this report are: adoption of the proposed Directive on equal treatment on grounds of age, implementation of protection against victimization through research and information campaigns, certification that differences in treatment based on age do not constitute discrimination, implementation of protection against multiple discrimination against the older, and promotion of research and information on age discrimination in education.

In the report *Poverty in older age – a priority of development policy* (UNDESA),¹⁴² it is stated that older persons are particularly vulnerable to economic insecurity and poverty, because in many countries the absence of a high quality social protection system with adequate benefits, as well as personal property and savings, mean there is usually not enough to guarantee adequate security for life, significantly increasing the additional risk of poverty.

Accurate information on older-age poverty is hampered by the lack of an international harmonized database on poverty rates broken down by age. Evidence of the poverty rate among older persons is limited to individual studies at the state or regional level. According to available data, the poverty rate among people over the age of 60 ranged from 2% in the Netherlands in 2013 and 3% in the Czech Republic in 2012, to 34% in Australia in 2012 and 50% in the Republic of Korea in 2009, reaching up to 80% in Zambia in 2005. On average, the poverty rate for people over 75 in OECD countries is 14.7%, which is 3.5% higher than the poverty level among people aged 66-75.¹⁴³

The risk of an increase in the poverty rate in older age will increase if changes in existing policies are not made. Given the sheer size of global population growth, especially in low- and middle-income countries, ending poverty in all its forms, as required by the 2030 Agenda for Sustainable Development, depends on the international community and national governments committed to recognizing and solve these problems.

142 *Income Poverty in Old Age: An Emerging Development Priority*, UN Department of Economic and Social Affairs program on ageing, available on the website: <https://www.un.org/esa/socdev/ageing/documents/PovertyIssuePaperAgeing.pdf>

143 *Income Poverty in Old Age: An Emerging Development Priority*, page 1.

Social pensions have become a basic means of ensuring that older people have a stable income after working life and during older age. However, many older people continue to live without adequate protection, so that during 2010/12, almost half of the people above retirement age did not receive a pension.¹⁴⁴ The fact that two-thirds of older people in the world live in developing regions where the informal economy accounts for a large share of total employment is a cause for concern, as these workers are usually insufficiently or not at all covered by social protection. Unless significant efforts are made to expand social protection coverage by introducing non-contributory schemes, most informal sector workers will face income insecurity in older age. At the same time, in countries where pension coverage is higher, the adequacy of pension benefits remains a challenge. Many older people receive pensions that are inadequate for life and therefore continue to work in older age. In many cases, combining non-contributory and contributory indexing mechanisms are key to ensuring adequate pension levels and guaranteeing income security for the older. Maintaining pension levels is also a significant challenge for more developed countries, especially given that some governments are seeking to find cost-saving measures through public pension policy reforms as part of fiscal consolidation policy. Such adjustments undermine the adequacy of pension systems and therefore reduce their ability to prevent older-age poverty. It is alarming that according to existing laws and regulations globally, only 42% of future retirees can expect to receive an adequate pension.¹⁴⁵

In addition, income security in older age depends on the availability of and access to safe and affordable public services, including health systems and long-term care. In addition to ensuring good health, equitable access to and use of health services provides security against poverty in later life, as a consequence of high health care costs.

As a particular problem, this report states that access to social security in older age is closely linked to existing gender inequalities. This situation is a result of lower participation of women in the labor force, the large number of women who are self-employed, and the fact that women often have shorter and interrupted careers due to childbirth and raising children. Similarly, in developed countries, older women living alone or in single-person households are more likely to live in poverty than men. Also, in many countries, survivors' pensions are the only source of income for older women.

144 Idem, page 2.

145 Idem, page 3.

Policy brief – Gender equality in ageing societies¹⁴⁶ is one of the publications of the United Nations Economic Commission for Europe dedicated to the topic of gender equality in societies. This publication states that a fair approach to average demographic ageing of the population based on human rights cannot be achieved without an appropriate response to the gender differences between men and women which shape different experiences of ageing, which are often the result of accumulated inequalities throughout life. Some of the data in this document show that women are still under-represented in decision-making positions and leadership positions, which contributes to their lower incomes; so that the share of women among managers in 2017 varied from 15% in Turkey to 47.6% in Belarus, while in Serbia it was 30%. In addition, the gender pension gap ranged from 0.1% in Estonia, to 44.4% in the Netherlands, while the gap in Serbia is 18.3%.¹⁴⁷ The standard of living of many older women depends on their husbands' incomes and family pensions. The risk of falling into poverty and social exclusion in older age is particularly high among older people living alone, which includes single women and widows, especially given the longer life expectancy of women. The share of older persons at risk of poverty and social exclusion by household type (percentage of households with one adult aged 65 or over) is the highest in Estonia (82.1%), the lowest in the Netherlands (12.7%), while in Serbia it is 45.2%.¹⁴⁸



This publication recommends a three-pronged approach to promoting gender equality in older societies, through: preventing the accumulation of gender deficiencies throughout life by addressing inequalities at all levels and preventing the gender gap in education, employment, care, earnings and pensions; mitigating the risk of gender inequality of older people through equitable distribution of support; and anticipating the impact of current reforms on future generations by integrating age and gender into the creation of concrete measures.

New job opportunities in an ageing society¹⁴⁹ is a joint document of the International Labor Organization and the Organization for Economic Cooperation and Development, which states that longer life expectancy and higher cure rates for chronic patients mean that older persons can contribute more to economic and social well-being. As the population ages, the potential supply of labor is ex-

146 *Policy brief - Gender equality in ageing societies*, UNECE, March 2020, available on the website: https://www.unece.org/fileadmin/DAM/pau/age/Policy_briefs/ECE_WG-1_34.pdf

147 *Policy brief - Gender equality in ageing societies*, page 14-15.

148 *Idem*, page 19.

149 *New job opportunities in an ageing society*, International Labour Organization (ILO) and Organization for Economic Co-operation and Development, February 2019, Tokyo, Japan, available on the website: <https://www.oecd.org/g20/summits/osaka/ILO-OECD-G20-Pa-per-1-3-New-job-opportunities-in-an-ageing-society.pdf>

pected to decline further relative to the increased demand for long-term care. The dependency ratio of older people to working age will be halved by 2050, and the country will face significant employment challenges over the next decades. This paper highlights the challenges and policy interventions to address long-term care deficiencies. Rapidly ageing societies are driving increasing demand for long-term care, which can be an important source of job creation in the future.



Julijana Irić, Užice, 2017



The conclusions in this document refer to the creation of fiscal space for investment in service policies and quality infrastructure, which can contribute to eliminating shortcomings in the coverage of long-term care services and the deficit of decent work in this area, and state that access to these services should be provided to all who need them, without the risk of poverty and unmet needs, to meeting which universal health and social care systems can contribute. Professionalization of the care sector, better initial training, with the use of appropriate technology and career advancement opportunities, can attract more people to this sector and enable it to meet growing needs.

Recruitment and Retention in European Social Services – State of play, ways forward and the role of European social dialogue – joint position paper¹⁵⁰ is a document indicating that similar demographic trends have been observed across Europe: life expectancy is rising, the population is ageing, disability and disease rates are rising, women’s labor force participation is increasing, labor market changes are increasing job insecurity and producing greater demand for different services, and patterns of care are changing. The social protection services sector is one of the largest job creators in Europe, directly employing almost 11 million people, representing 4.7% of the total EU workforce. Together with health care services, these services represent 7% of total economic production in the EU.¹⁵¹ Over the past ten years, more than two million jobs have been created, and further growth is expected over the coming decades. Despite

150 *Recruitment and Retention in European Social Services - State of play, ways forward and the role of European social dialogue – joint position paper*, European Public Service Union and Federation of European Social Employers, June 2020, available on the website: http://socialemmployers.eu/files/doc/SEM%20001-20%20position%20paper_screen%20VS3.pdf

151 *Recruitment and Retention in European Social Services - State of play, ways forward and the role of European social dialogue – joint position paper*, page 3.

growing demand, many employers have difficulty finding, training, and retaining a suitably skilled workforce. For many, working in the social services sector is not a desirable career choice, as such work is often associated with flexible working hours, lower wages and emotionally and physically demanding working conditions. Difficult working conditions lead to high absences due to illness, so it is concluded that improving working conditions is essential. Working in the field of care is often considered a ‘woman’s job’. Looking at official EU data, it can be observed that the areas of education, health and social protection services are the most segregated sectors. Today, the most gender-segregated occupation in the EU is the personal care business, and women make up 90% of employees in that area. In contrast, the level of management in social services is predominantly male. Another key element of change in recent years has been austerity: social services often lack the resources to address growing demand in society. Austerity policies have led to reduced funding by governments and local governments, which limit wage levels. In addition, the workforce in the social services sector is ageing. With the increase in the share of workers over the age of 50, from 28.63% in 2009 to 36.12% in 2018, organizations face specific challenges in responding to the needs of older workers, but also in providing a new, younger workforce to replace those retiring.



In the current demographic context, providing a sufficient number of well-trained staff to provide social protection services is a high priority, and recruiting and retaining new employees in social services are issues that require urgent answers.

The report *Ageing Europe – Looking at the lives of older people in EU*¹⁵² covers a wide range of indicators from the health, social and economic domains, and gives a detailed picture of the life of older people in the member states of the European Union. The report states that at the beginning of 2018, 19.7% of the population of the European Union belonged to the category of older people (65+), and that it is predicted that by 2050 that percentage will have increased to 28.5%.¹⁵³ In addition, almost one third (32.8%) of the total population is older than 55 years. It is stated that, given the decreasing number of able-bodied population and the growing number of older and oldest old people in society, one of the most important concerns for policy makers is to encourage older people to remain part of the labor force for as long as possible. Regarding the relationship between the sexes, it is stated that in 2018, there were an average of 1.32 older women in the European Union, for every man of the same age. The results show that this difference has been decreasing in recent years, due

152 *Ageing Europe – Looking at the lives of older people in EU*, Eurostat, 2019, available on the website: <https://ec.europa.eu/eurostat/documents/3217494/10166544/KS-02-19%E2%80%91EN-N.pdf/c701972f-6b4e-b432-57d2-91898ca94893>

153 *Ageing Europe – Looking at the lives of older people in EU*, page 8.

to the fact that an increasing number of men live longer.¹⁵⁴ The coefficient of age dependence in 2018 is 30.5%, which means that there are slightly more than three able-bodied people per one older person, and it is predicted that by 2050, that ratio will be two able-bodied people per one older person.¹⁵⁵ The report states that the fact that there are an increasing number of oldest old persons (over the age of 85) has a number of consequences, such as the costs of providing appropriate health and long-term care.¹⁵⁶ Also, an increasing number (and share) of older people in the European Union live alone (especially older women) and constitute a particularly vulnerable group in society, at increased risk of poverty, social exclusion or isolation – 12.5% of people over 75 have symptoms of depression.¹⁵⁷ Between 2008 and 2016, the share of pension beneficiaries in the total population increased in the vast majority of countries, so that in 2016 almost a quarter (23%) of the total population was a pension beneficiary.¹⁵⁸ The last decade has been characterized by a decline in the average size of households, so that in the European Union there is an increasing number (and share) of older people living alone, and especially older women. Such a household structure makes them a particularly vulnerable group in society, with an increased risk of poverty or social exclusion. In addition to the fact that older women are mostly living alone, they are also more likely to live in nursing homes. In 2011, the percentage of older women in the EU living in nursing homes was 3.8%, which was twice the corresponding share for older men (1.9%), reflecting at least in part the longevity of women.¹⁵⁹ The traditional division of roles between men and women is also reflected in the use of pensions, so older women more often rely on the income provided by their partner. Regarding the level of income, it is stated that the income levels of people over the age of 65 are lower than the average, and that older women have lower incomes than older men.¹⁶⁰ Among the population over the age of 55, women over the age of 75 are at the highest risk of poverty.¹⁶¹ It is also stated that there is a digital divide between the generations, 2/5 of the population aged 65-74 never having used a computer, and less than 1/5 using social networks.

The demographic situation in the European Union has sparked debates over the economic implications of an ageing population. The two main concerns of decision-makers in this area relate to the level of pension expenditures, which are expected to increase both in absolute terms and as a share of gross domes-

154 Idem, p. 17

155 Idem, p. 19.

156 Idem, p. 21

157 Idem, p. 68.

158 Idem, p. 99.

159 Idem, p. 34.

160 Idem, p. 108 and 109.

161 Idem, p. 112.

tic product, and pension adequacy – in other words, how current and future pensions can help prevent older-age poverty and maintain the income of older people during retirement. The fact is that the number of pension beneficiaries will increase, while the number of contributors will decrease.

The situation in the field of exercising fundamental rights in the EU member states is analyzed in the *Report for 2018*¹⁶² of the European Union Agency for Fundamental Rights (FRA) – which states that some progress has been made in promoting equality and non-discrimination in the European Union. First of all, the European Pillar of Social Rights was proclaimed, which is based on the principle of non-discrimination. This report states that the realization of basic rights implies equal treatment of all, regardless of age, considering and respecting the individual needs of the citizens of the older generation. Ageism, commonly defined as a negative social approach to a particular age group, can affect people at any stage of life. However, older age has particularly negative connotations and ‘old people’ are often seen as having no value for society. Unlike other forms of discrimination, such as racism or sexism, ageism often tends to be ‘normalized’ and accepted. It is not uncommon for such stereotypes to justify differences in treatment, age restrictions or exclusion of people from certain treatments or services – which prevents the right of older persons to lead dignified and independent lives and participate in social and cultural life, as stated in Article 25 of the Charter of European Union Fundamental Rights.



The report states that a comprehensive legal framework ensuring essential equality for older persons has not yet been established at EU level, with the exception of the Employment Equality Directive.

Areas of special importance to older persons, such as social protection, health care, access to goods and services or housing, are not covered. The proposal for a directive on equal treatment presented by the European Commission in 2008 could fill this gap, through the horizontal extension of the principle of non-discrimination on different grounds to all areas relevant to older persons.

The *AGE Barometer 2019*,¹⁶³ AGE Platform Europe, is an annual assessment of the socio-economic situation of older people across the EU and its impact on respect for human rights. The publication focuses on gender equality, job search support, age-appropriate jobs, work-life balance, the fight against poverty and social exclusion, and the level of adequate income. When it comes to gender equality, the barometer states that women, although there is a comprehensive legal framework for non-discrimination, still face great inequalities, offer the

162 *Fundamental Rights Report 2018*, European Union Agency for Fundamental Rights, Luxembourg 2018, available on the website: <https://fra.europa.eu/en/publication/2018/fundamental-rights-report-2018>

163 *AGE Barometer 2019*, AGE Platform Europe, available on the website: https://www.age-platform.eu/sites/default/files/AGE_Barometer_2019-Final2_0.pdf

most unpaid care for family members, and are more vulnerable to the risk of poverty and social exclusion. What has been observed is that few EU member states consider the needs of older women in their national policies. Gender inequalities in employment rates and the pay gap increase with age, which also results in gender differences in pensions, which amount to 37%, with a tendency to increase in the coming years, as an effect of pension system reforms. Also, this gender gap in pensions is even more worrying because it also represents a higher risk of poverty and social exclusion of older women, which is seven percentage points higher than the poverty and social exclusion of men. This gap widens even more for women over the age of 75.¹⁶⁴ Poverty and social exclusion rates for older persons are even more pronounced during crises, especially for women living alone, people with disabilities and migrants. Pension systems should be aligned with increasing living costs. Given that policies to adapt pension systems to demographic change focus mainly on raising the retirement age, challenges remain in terms of the adequacy of future pensions.



This barometer also points out that demographic changes are increasing the pressure on informal care, because the forms of long-term care are not sufficiently adapted to growing needs. As a consequence, policies need to be created to address the needs of informal carers.

The new regulations on carers' licenses at European level are not sufficient support.

In the report of the European Commission ***Health and long-term care workforce – demographic challenges and the potential contribution of migration and digital technology***¹⁶⁵ it is stated that, as a consequence of demographic changes, national health and long-term care systems within the EU today face an unprecedented challenge. Due to the progressive ageing of the population, the need for health and long-term care services is increasing, which has the consequence that countries face difficulties in providing a sufficient number of adequately qualified workers in these sectors. Within the EU, a fifth of the population is over 65, and it is estimated that this share will increase to one third by 2060.¹⁶⁶ On average, older persons have a remaining life expectancy of 20 years, but half of that time is spent in poor health. One of the main challenges for the growing number of older people for the EU health system is the increased demand for treatment of chronic diseases. The calculated probability of contracting a chronic disease in the EU increases with age, reaching a peak in the population aged 75-84, after which it stabilizes or decreases slightly. At

164 *AGE Barometer 2019*, p. 11.

165 *Health and long-term care workforce – demographic challenges and the potential contribution of migration and digital technology*, European Commission, Luxembourg, 2021, available on the website: https://ec.europa.eu/jrc/sites/jrcsh/files/23-02-2021_health_and_longterm_care_workforce_online.pdf

166 *Health and long-term care workforce*, p. 30..

The report's findings show, among other things, that strengthening the potential of telemedicine for older people requires additional efforts to promote digital inclusion, especially for older people living alone, those with low levels of education and those living in rural and remote areas

the same time, the long-term care sector is facing an increasing number of older people suffering from severe functional limitations (or disabilities). The report points out that condition of health is marked by gender and territorial differences. Women live longer, but in poorer health conditions, and there are noticeable differences in the quality of health of older people between Member States. In addition, there is a very high concentration of employed women in health care, and even higher in the long-term care

sector. Almost three quarters of health workers and associates are women, while among personal care providers, women make up almost 90% of the workforce.¹⁶⁷ In order to improve care in an economical way, the health systems of EU countries have undergone a complex process of transformation that involves shifting activities from hospitals to primary health care institutions, homes and long-term care institutions. When it comes to digital technologies, such as telemedicine, the conclusion is that they have great potential for improving the population's access to health and long-term care.

*Human rights of older persons – the data gap*¹⁶⁸ is submitted to the Human Rights Council in accordance with resolution 42/12 on the human rights of older persons. The report examines the importance of data for the realization of the human rights of older persons, as a precondition for making decisions based on evidence and taking informed and normative action. In particular, the independent expert analyzes the current data gap on older persons, its causes and impacts on the enjoyment of all human rights of older persons, as well as the prospects and risks associated with the data revolution in this context. The current international human rights framework does not currently include a specific obligation to collect data on older persons in order to effectively monitor and measure the exercise of their rights. There is currently a serious gap in the available data to gain a realistic picture of the situation of older people, including that regarding the enjoyment of human rights. This lack of meaningful data and information on older people is in itself an alarming sign of exclusion and practically prevents meaningful policy-making and normative action. In order to overcome these obstacles in the realization of the rights of older persons, a fundamental conceptual shift in the method and process that takes into account the intertwining of digital and analog reality, or so-called digitality, is needed.

167 Idem, p.78.

168 *Human rights of older persons – the data gap*, Report of the Independent Expert on the enjoyment of all human rights by older persons, July 2020, available on the website: <https://undocs.org/A/HRC/45/14>



Data collection is crucial for creating visibility and building a database on human rights barriers for older people and potential responses, for breaking down stereotypes that feed ageism, stigma and discrimination, and for helping policymakers formulate measures to combat discrimination, isolation and inadequate access to health care.

The International Monetary Fund study *Risks of demographic change in Central and Eastern Europe*¹⁶⁹ deals with the implications of the great demographic pressures facing the countries of this region. The study points out that the population of the countries in this region (except Turkey) is expected to decrease significantly over the next 30 years, due to negative or low birth rates and migration. It is estimated that almost half of the countries of Central and Eastern Europe will experience total net population losses of 5% by 2030, and 15% by 2050.¹⁷⁰ These changes will have a significant impact on growth, living standards and fiscal sustainability, due to declining labor supply, and an ageing population that will increase demands for health care and pensions. For Serbia and Slovakia, it is estimated that the labor force percentage will decrease by 20% by 2050.¹⁷¹ Also, in half of the analyzed countries, the projections are that the ratio of the older to those aged between 20 and 64 will exceed 50%.¹⁷² It was also noted that policy-makers will face difficult choices relating, for instance, to curbing ageing-related expenditures, such as the extent of health care coverage and pension levels, and that the appropriate policy packages will need to be tailored to each country.



Given that the Republic of Serbia is in the process of European integration, the assessment of the situation in all areas is sublimated in the progress reports, which are prepared every year by the European Commission. In this regard, some parts of these reports were presented in order to better understand

the situation, overcome the shortcomings and problems that lie ahead, as well as compare the data over a longer period of time.

169 *Demographic Headwinds in Central and Eastern Europe*, International Monetary Fund, European Department, Washington, 2019, available on the website: <https://www.imf.org/en/Publications/Departmental-Papers-Policy-Papers/Issues/2019/07/11/Demographic-Headwinds-in-Central-and-Eastern-Europe-46992>

170 *Demographic Headwinds in Central and Eastern Europe*, p. 61.

171 *Idem*, p. 16.

172 *Idem*, p. 62.

This is the case in the *Progress Report of the Republic of Serbia for 2015*¹⁷³ where it is stated that the system of social services, including those for older persons, is still largely institutionalized. The procedure for depriving persons with psychosocial and intellectual disabilities of their legal capacity should be harmonized with international standards. When it comes to social protection, this report states that the deficit of the pension fund from 2014 is still high. As part of the fiscal consolidation measures, all pensions above 25,000 dinars (about 210 euros) were gradually reduced in November 2014, and this measure affected about 39% of pensioners. Amendments to the Law on Pension and Disability Insurance and the Law on Budget System, adopted in December, stipulate that pensions will not be increased until the ratio of pension expenditures to GDP falls below 11%.

In the *Report for 2019*¹⁷⁴ it is stated that in the area of social inclusion and protection, in 2017, 7.2% of the population was considered to be living in absolute poverty (7.3% in 2016). About half a million people in Serbia are unable to meet basic living needs. As in previous years, there is more poverty in rural areas than in urban areas (10.5% vs. 4.9%), while the regions of southern and eastern Serbia are particularly affected by poverty. Inequality in income distribution in Serbia is the largest among all European countries that keep statistics on income and living conditions (SILC), and it amounts to 37.8% of the GINI coefficient in 2017. The at-risk-of-poverty rate is 25.7%, which means that about 1.8 million people live in poverty. A new strategy for social protection in Serbia for the period 2019-2025 is being prepared, and amendments to the Law on Social Protection. In addition, the quality of services needs to be improved, and monitoring and regulatory mechanisms need to be strengthened. Also, this report states that there has been no progress regarding social protection services at the local level, or with the decentralization process. The system of earmarked transfers, which was introduced in 2016, is still not implemented systematically and transparently. Budget allocations are available on an annual basis, but without multi-annual commitments that would allow for the continuity of service delivery at the local level and a system based on indicators for setting priorities and monitoring results.

In the *Report for 2020*,¹⁷⁵ with regard to equality between women and men, it was stated that the adoption of the new regulation on gender equality

173 *Progress Report of the Republic of Serbia for 2015*, European Commission, available on the website: http://www.mei.gov.rs/upload/documents/eu_dokumenta/godisnji_izvestaji_ek_o_napretku/godisnji_izvestaji_15_final.pdf

174 *Report for 2019*, European Commission, available on the website: http://www.mei.gov.rs/upload/documents/eu_dokumenta/godisnji_izvestaji_ek_o_napretku/20190529-serbia-report_SR_-_REVIDIRANO.pdf

175 *Report for 2020*, European Commission, available on the website: <https://www.mei.gov.rs/srp/dokumenta/eu-dokumenta/godisnji-izvestaji-ek>

was seriously delayed, as well as the strategy and action plan against violence, and that the competence for these issues should be clarified. In addition, the report states that the employment rate for men (15-64 years) is higher by 12.8 percentage points, and their activity rate is 13.6 percentage points higher than that for women. Women's inactivity is reflected in their doing unpaid household chores, including caring for children, the sick and-or the older; in the lack of support they receive in reconciling work and family responsibilities; in discriminatory behavior of employers towards young women; in existing wage differences; in lower legal retirement age; and in the existence of a legal minimum base for social security contributions, which discourages part-time employment.

The Report of the European Commission for 2020, when it comes to the promotion and implementation of human rights, states that the annual reports of independent bodies were discussed at the plenary session of the National Assembly and the conclusions were adopted in 2020 for the first time in six years.

In the area of social inclusion and social protection, it was stated that in 2018 it was considered that 7.1% of the population lived in absolute poverty (7.2% in 2017), and that according to the survey on income and living conditions (SILK) the at-risk-of-poverty rate was 24.3% (EU-28 17.1%) and the at-risk-of-poverty rate or social exclusion rate was 34.3% (EU-28 21.8%). There is more poverty in rural than in urban areas (10.4% vs. 4.8%). About 10% of employees are at risk of poverty, which means that they cannot meet their basic needs, despite their work. About 58.4% of the population is subjectively poor, placing Serbia at the bottom of the list of European countries conducting the SILK survey.



This report also states that the new Social Protection Strategy in Serbia for 2019-2025 – the strategy of deinstitutionalization of social protection services – is still not adopted, and the new Law on Social Cards and amendments to the Law on Social Protection have not been adopted yet. The coverage and adequacy of cash benefits to meet basic needs are insufficient to cover them. The quality and coverage of services needs to be improved, and supervisory and regulatory mechanisms, monitoring and evaluation need to be strengthened. No progress has been made in social protection services at the local level, and the system of earmarked transfers is still not implemented systematically and transparently. Budget allocations are available on an annual basis, but without allowing for multi-year continuity of service delivery at the local level.

The report also states that during the declaration of a state of emergency on March 15, 2020, the government adopted a decree restricting, as permitted by the Serbian Constitution, certain human rights and fundamental freedoms, in particular freedom of movement - including an almost total ban on freedom

of assembly of persons over 65 years in urban areas and older than 70 years in rural areas, as well as of the right to vote. Three weeks later, on 6 April, the authorities notified the Council of Europe of the state of emergency derogation under Article 15 of the European Convention on Human Rights, but did not provide details of the measures taken as provided for in that article.

The study *Quality of Life – Life and Society in EU Candidate Countries*,¹⁷⁶ published by Eurofound, was created as a result of reviewing the Quality of Life Survey, and provides an overview of the quality of life, quality of public services and society in the five candidate countries for membership in the European Union - Albania, Montenegro, Northern Macedonia, Serbia and Turkey. The results of this study show that the level of life satisfaction and happiness in the candidate countries is still in a low position in relation to the member states of the European Union. When it comes to Serbia, this study states that the foundations for economic growth and macroeconomic stability have been positively assessed by the European Commission. The age structure in the candidate countries is changing rapidly, as are the challenges related to the ageing of the workforce, the future of pension systems and the adequacy of older age incomes, as well as the provision of services to older persons, i.e. the ratio of people in need of help and care in these countries Member States. This study points out the difficulties faced by older persons who suffer from poor mental well-being and high levels of difficulty in meeting everyday needs. The study states, among other things, that 62% of respondents in Serbia express concern about income insecurity in older age.¹⁷⁷ Also, the study pointed out that social cohesion in society is burdened with numerous problems because certain social groups, such as older persons, the poor and women, are excluded.

Reports, analyses and research of domestic institutions and organizations

In the *Second National Report on Social Inclusion and Poverty Reduction in the Republic of Serbia for the period 2011-2014*,¹⁷⁸ it is stated that persons with disabilities, older persons, Roma, the poor and other persons belonging to vulnerable and endangered groups are particularly exposed to discrimination and still have difficulties in exercising the human rights guaranteed by the Constitution. Among other things, the report states that employment is unavail-

176 *Quality of life – Life and society in the EU candidate countries*, Eurofound, Luxembourg, 2019, available on the website: https://www.eurofound.europa.eu/sites/default/files/ef_publication/field_ef_document/ef18032en.pdf

177 *Idem*, p. 40.

178 *Second National Report on Social Inclusion and Poverty Reduction in the Republic of Serbia for the period 2011-2014*, October 2014, available on the website: <http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2015/07/Pregled-2.-nac.-izvestaja-CIR.pdf>

able for people over the age of 50, that the lack of or difficult access to health and social protection services contributes to the exclusion and discrimination of particularly vulnerable categories of older persons in the rural population, and that older persons and children are socially excluded, especially children with disabilities.

According to the data from the aforementioned *Third National Report on Social Inclusion and Poverty Reduction in the Republic of Serbia for the period 2014-2017*,¹⁷⁹ compared to the previous reporting period, no significant progress has been made in the area of development of social protection services provided by local self-government units. The accommodation service is the most represented social protection service, while non-institutional services in the mandate of local self-governments are insufficiently and unevenly developed. The number of municipalities and cities in which services are provided, the total allocated funds, and even the number of users, have remained almost unchanged. Among the services, the most widespread are daily services in the community, namely home help for older persons and adults (in 122 local governments), and day care centers for children with disabilities (in 68 municipalities and cities). These two services include over 17 thousand users. The coverage of older persons with home help services (1.1% of the total population 65+) is low, even compared to European countries that rely heavily on a similar model of long-term care in terms of the relationship between cash benefits and services, and accessibility is particularly insufficient in rural areas. Apart from these two, all other services are provided in a small number of municipalities and cities.

The share of older persons in the total population is 19.2% and is at the level of the EU average. More than 1,350,000 people in the Republic of Serbia in 2016 were 65 and older. These data place the Republic of Serbia among European countries where the process of ageing is heavily pronounced, it is stated in this report.

The *Evaluation of the National Ageing Strategy of the Republic of Serbia for the period 2006 – 2015 and proposals for a new strategic framework*,¹⁸⁰ showed that some progress had been made, but that the implementation process

179 *Third National Report on Social Inclusion and Poverty Reduction in the Republic of Serbia 2014-2017*, available on the website: <http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2018/11/Treci-nacionalni-izvestaj-o-socijalnom-ukljucivanju-i-smanjenju-siro-mastva-nacrt.pdf>

180 *Evaluation of the National Ageing Strategy in the Republic of Serbia 2006 – 2015 and recommendations for a new strategic framework*, Ministry of Labor, Employment, Veteran and Social Affairs and the UN Population Fund in Serbia, January 2016, available on the website: <http://www.zavodsz.gov.rs/media/1253/evaluacija-primene-nacionalne-strategije-srpski.pdf>

had been slower than expected and planned. Among other things, the evaluation showed that older women were not allowed to participate in the work of public authorities to an adequate extent, that they were disproportionately burdened with care obligations for sick and infirm family members and generally disproportionately burdened with household chores and much more often victims of domestic violence. Also, the position of older women in the countryside is extremely endangered, given the shortcomings of the pension system in relation to women farmers.

The position of older persons in our society was largely dealt with by the Serbian Red Cross, which conducted a whole series of research on this topic. In the research *Social Inclusion of Older Persons (65+) in Serbia*,¹⁸¹ based on statistical data from official records as well as other available data, the level of social inclusion of older persons was considered, taking into account material living conditions, access to resources and services, social participation and social networks, leisure, lifestyle, culture and communications, quality of life and subjective satisfaction. The data show that the population in Serbia is one of the oldest populations globally, with a prognosis of further intensive ageing due to low birth rate and fertility, and the migration of the younger population. The research states that the picture of older women and men in Serbia, various aspects of their position and living conditions shows that their status is relatively unfavorable, compared to older people living in the European Union. Prolonged life expectancy and the increased share of older persons in the population of developed welfare states have been accompanied by significant changes in the understanding of the ageing process, and of the opportunities and needs of older persons, as well as programs that support quality of life in the latter stages. Also, this research points out that Serbia, faced with the difficulties of post-socialist changes, reforms of limited scope and changes in economic and social conditions, has not created conditions for a quality life for older persons, so the older face numerous economic, social and health challenges. This research also examined the experiences of older people when it comes to discrimination and prejudice, and the results indicate that older people feel discriminated against, especially by institutions and young people. Older people also mention the feeling of complete isolation from society, because they believe that others see them as people at the end of life who are no longer worthy of attention and care, and that they can no longer contribute to society.¹⁸²

181 *Social inclusion of older persons (65+) in Serbia*, Red Cross of Serbia, Belgrade, 2018, available on the website: <https://www.redcross.org.rs/media/4437/socijalna-ukljucenost-starijih-u-srbiji-e-knjiga.pdf>

182 *Idem*, p 58.



Based on this research, the key areas in which the priority is to improve the situation are: improving institutional mechanisms for monitoring the living conditions of older people, monitoring the implementation of policies and measures and assessing their effects, improving social and health care services, improving digital inclusion of older people, and reducing gender gaps among older persons through improving the protection of older women.



Majda Hadžimurtezić, 8th grade, Nova Varoš, Serbia, 2019.

The publication *Initiative for Social Inclusion of Older Persons – Successes and Lessons Learned*,¹⁸³ which was also conducted by the Serbian Red Cross, with the aim of using the power of the civil sector in five Western Balkan countries in response to demographic ageing, indicated support for local initiatives for the social inclusion of older people within the project of the same name as the publication. The project provided funds for the formation of a model of inclusion of older persons with their active participation. This publication also includes research conducted in the period 2017-2018 with the aim of reviewing the current situation, making recommendations for policy changes that carry the risk of social exclusion of older persons, but also defining the profile of socially included and excluded older persons, and presenting risk factors associated

183 *Initiative for social inclusion of the older – successes and lessons learned*, Serbian Red Cross, 2019, available on the website: <https://www.redcross.org.rs/media/5817/socijalna-inkluzija-srb.pdf>

with the social exclusion of this population. According to the results of this research, in addition to financial abuse, 19.8% of people over the age of 65 experienced abuse, 7.8% experienced psychological abuse, and 3.9% experienced physical abuse. Almost two thirds of older persons, or 64%, live in a household without younger members, which indicates the need to develop social activities and support networks. Observing the way older women and men live in Serbia, this publication states that their general status is unfavorable in relation to the status of older persons in the European Union, because only 15% of the population over 65 work, and in the same age group 8% of men and 17% of women are not covered by any form of pension.

One significant fact revealed by this research is that 20% of older women cannot use their own funds on their own, which indicates the frequency of financial abuse as the most common type of abuse of older persons in Serbia.



The main recommendations arising from this research are: the need to adopt a National Ageing Strategy to establish and coordinate measures and activities to improve for the older their economic status and access to human rights; to improve the portfolio of social protection services for older persons; to eliminate gender pension gaps, while creating a model for addressing the risk of poverty among older women living alone and with low pensions; and to ensure that online services are tailored to the needs and capabilities of older people.

In the publication *Freedom to decide for ourselves – What older people say about their rights to autonomy and independence, long-term and palliative care*,¹⁸⁴ conducted by HelpAge International and the Serbian Red Cross, it was pointed out that many older people face the denial of their right to autonomy and independence in terms of making their own decisions and managing their own daily lives whatever the age, which stems from the stereotype that older people are unable to make decisions independently. The report is based on the answers of 450 people from 24 countries, including Serbia. The answers of the respondents show that awareness of the right of older persons to autonomy, independence, long-term and palliative care is low, both among older persons themselves, and among their family members and service providers. One of the answers presented in this publication, given by an eighty-year-old respondent from Serbia, refers to the fact that he has access to home care and therapy, but that it covers only a small part of his needs. This research also shows that although there is no significant difference between the sexes in the answers

184 *Freedom to decide for ourselves – What older people say about their rights to autonomy and independence, long-term and palliative care*, HelpAge International and the Serbian Red Cross, available on the website: <https://www.redcross.org.rs/media/4441/sloboda-da-odlu-cujemo.pdf>

provided, some of the participants believe that older men have more autonomy and control over family issues than older women. Also, many older people do not have access to, or the ability to choose and control, the care and support services they may need to lead independent lives. What is more, there are no explicit standards of international human rights law on the right to care and support for independent living.



Lola Dimitrijević, 7th grade, Sokobanja, Serbia, 2018

Improving human rights through the development of palliative care services,¹⁸⁵ The Association of Lawyers for Medical and Health Law of Serbia – SUPRAM, is a publication that covers several sectors, and states that palliative medicine is aimed at comprehensive care of patients at the end of their life, and that the care in itself provides an approach that improves the quality of life of patients and their families. The focus of this research on the perception of human rights standards regarding the availability and quality of palliative care services states that, in the reality of the existing health and social system, this right often remains only an opportunity that most patients and their families fail to exercise, and that the majority of respondents complain about the basic lack of information and the geographical location of these centers. Some of the recommendations are that it is necessary to enable a palliative medicine specialist to prescribe medication, it is necessary to formulate and adopt appropriate regulations - guidelines as to which patient is suited for which accommodation,

185 *Improving human rights through the development of palliative care services*, Association of Lawyers for Medical and Health Law in Serbia - SUPRAM, Belgrade, 2019, available on the website: <http://www.supram.org.rs/wp-content/uploads/2019/12/CD-izdanje.pdf>

and for how long; and also as to the restriction of visits to patients housed in palliative care units.

Regarding the part related to palliative care through the assistance of court and administrative proceedings, this report states that although the Law on Patients' Rights and other general acts prescribe the right to relief of suffering and pain, and general care for terminally ill patients and members of their families, the standards for the adequate realization of this right have not yet been prescribed or implemented in practice. The procedures are too complicated and demanding, and in order not to exhaust the material and living resources of this sensitive group, they should become simpler and more accessible.

With regard to protection against discrimination, this report states that the Law on Prohibition of Discrimination prescribes age discrimination and discrimination based on health status as special forms of discrimination, and provides for out-of-court and judicial protection, which could be used to protect the right to palliative care, but that it is necessary to make the general public better acquainted with the possibility and manner of their use. What these procedures cannot provide, the research states, is speed of proceedings, especially when it comes to judicial protection provided by the Law on the Organization of Courts before the civil divisions of higher courts in civil proceedings, which owing to overload and extremely wide actual competencies, are often slow. Article 43 of the Law on Prohibition of Discrimination is also cited as an essentially effective remedy, although it may prove insufficiently effective in the time context, given the intervals between which courts schedule hearings. The legal means by which the right to palliative care could be exercised fastest is a temporary measure from Article 44 of the same law. All the listed remedies can be used only if the persons seeking this type of protection are discriminated against in relation to other patients.¹⁸⁶



This report states that it is very important for patients facing the final phase of life to be provided with all alternatives, and one of them is certainly end-of-life palliative care, which is why it should be borne in mind that palliative care is not limited to the older, but available to those of all ages suffering from incurable diseases, and not only to those who suffering from cancer, but also from other incurable diseases. In addition, the difficult situation of people who are at the end of their lives must in no way diminish their legal and social protection due to their weakness, but entitle them to additional protection in every respect.

¹⁸⁶ *Improving human rights through the development of palliative care services*, pp. 82-86.

The position of older women is discussed in the publication *Alternative Report to the Committee for the Elimination of All Forms of Discrimination against Women on Discrimination against Older Women in the Republic of Serbia*,¹⁸⁷ prepared by the Association 'Strength of Friendship' – Amity. It points out that there is a significant gender gap in the rates of activity and employment of older women. In the Republic of Serbia, it is implemented through active policy measures in the areas of the employment of hard-to-employ persons, which include women older than 50; but the question is raised as to the effect of these measures, bearing in mind that according to the National Employment Service, in 2017, a total of 13,164 women over the age of 50 were included in employment, and of this number, 843 older women were employed in public works lasting several months, 731 older women received employment subsidies for the unemployed under the category of hard-to-employ, and 406 of them received subsidies for self-employment.¹⁸⁸ Also, the report indicates that older women, especially those living in the countryside, are discriminated against by exclusion from decision-making even in their families, that they rarely own property, and that they are most often without a pension and other income. The highest percentage of illiteracy is among Roma women (out of the total number of Roma women, about 80% are formally illiterate or without any qualifications), and the combination of poverty and patriarchal tradition often leads to Roma women remaining in a vicious circle of poverty.¹⁸⁹

187 *Alternative report to the Committee for the Elimination of All Forms of Discrimination against Women on Discrimination against Older Women in the Republic of Serbia*, Association Strength of Friendship - Amity, Belgrade, 2018, available on the website: <http://www.amity-yu.org/wp-content/uploads/2018/07/Amity-Alternativni-Izvestaj-o-diskriminaciji-starijih-zena-u-Srbiji.pdf>

188 *Idem*, page 5.

189 *Idem*, page. 8.



Neda Lukić, 8th grade,, Sabac, Serbia

Quality of life of older people from older households in urban areas in the Republic of Serbia was the subject of the research of *Dimmed city lights – Study of the position and needs of older persons households in New Belgrade*.¹⁹⁰ This research represents a contribution to connecting theory and practice in the field of ageing through the use of purposeful support programs in everyday life. The results of the research show that the percentage of people who need help with movement is expected to increase with age, and ranges from 9% of those aged 65 to 69, to 55.9% of those older than 85.¹⁹¹ Older persons consider home help to be the most important of the existing support programs. However, in 23 local governments these services have not been established at all, while in 30 local governments they are not provided continuously. In 2015, day care services for older persons functioned in only ten local governments, and the number of users was 559. The needs for services and support services for older persons are significantly higher than the existing capacities.¹⁹² When asked if

190 *Dim city lights – a study on the position and the needs of older persons households in New Belgrade*, Citizens Association ‘Power of Friendship – Amity’, Belgrade, October 2017, available on the website: <http://www.amity-yu.org/wp-content/uploads/2017/10/Priguse-na-svetla-grada.pdf>

191 Idem, page 13.

192 Idem, page 22.

they had been personally discriminated against in any respect over the past year, three-quarters of respondents answered in the negative, as opposed to one-sixth who answered in the affirmative. Among those who stated that they had personal experience of discriminatory behavior, the most noticeable difference was among older persons from the point of view of income – the older persons with the lowest income are in the worst position. Most of the older persons who stated that they were discriminated against experienced this in the institutions of the health system, and in the state administration. This research indicates that older persons often feel unjustifiably burdened by society, and their daily lives are determined by numerous deprivations. They face challenges both personal (poor health and difficult access to health services, difficult independent functioning and loneliness), as well as infrastructural (poor regulation of their environment) and socio-political (with general reference to the still unfinished transition in society). They are aware of the depth of the intergenerational gap, as well as of its further deepening, even within the family.

*Intergenerational exchange in the Republic of Serbia*¹⁹³ is a study conducted by the Serbian Red Cross, bearing in mind the fact that the post-industrial era in most countries brings great demographic changes, increasing the share of residents over 65, while the share of residents under 20 is constantly declining. Starting with the definition of intergenerational exchange as any transfer of material goods and services, money or emotional support between people who are able to provide and those who are in need of them, provided they belong to different generations, the study covers all three dimensions of these exchanges: practical help and support in everyday life, receiving and giving financial help and gifts, and social support expressed through the frequency of contacts, emotional closeness and quality of the relationship between parents and children. According to this survey, money exchange is significantly more frequent among generations than support in activities (54% receive or have received financial assistance, 65% give or have given, and 25% receive or give support in activities).¹⁹⁴ All three generations (young, middle-aged and older) give almost completely equal financial assistance (over 60%), but it is received more by members of the younger generation (70%, vs. 44% in the middle generation and 49% in the older generation).¹⁹⁵ Older people receive the most support in the implementation of activities (40%),¹⁹⁶ while 26% of older persons also receive financial assistance for medicines and treatment costs.¹⁹⁷ Regular financial assistance is also the

193 *Intergenerational exchange in the Republic of Serbia*, Serbian Red Cross, Belgrade, 2019, available on the website: <http://www.mdpp.gov.rs/doc/Medjugeneracijska-razmena-u-Republici-SrbijiB5-knjizni%20blok.pdf>

194 *Intergenerational exchange in the Republic of Serbia*, p. 26.

195 *Idem*, p. 27.

196 *Idem*, p. 28.

197 *Idem*, p. 38.

most present form of giving funds. As for the exchange of time, as many as 20% of older persons say that they rarely see their children.¹⁹⁸ Pointing to the link between demographic ageing, an increased risk of functional dependence and the importance of informal support services, the survey found that 30% of older people need home help,¹⁹⁹ with an estimate that 90% of older persons in Serbia rely more on family support.²⁰⁰ Respondents receive an average of 328 hours of support during one month (direct help, housework, child support, housework, transport and procurement), which is equivalent to the value of labor of 112,000 dinars at the market price of labor. This shows the importance of support to informal service providers and the need for systematic investment in training and services for this part of the population, as well as in health prevention programs for the entire population within the concept of healthy and active ageing.²⁰¹

This research emphasizes that it is very important for society to promote a positive image of older persons and of ageing as a lifelong process involving all generations in society, along with the concept of intergenerational solidarity as part of all public policies, including those dealing with health, social protection, financial security, education, the labor market and employment. It is especially necessary to actively combat ageism and the negative, discriminatory stereotypes and prejudices that exist for all generations, through education, media campaigns, highlighting examples of good practice and social networks.

Intergenerational solidarity between family and state²⁰² is an attempt to understand and explain the importance of intergenerational solidarity within the family, and to make recommendations on how the state should promote intergenerational cooperation and support families and solidarity within the family through various incentive public policies. The research was conducted with the aim of exploring family support systems that enable autonomy and delay the dependence of an older family member, but also promote quality of life in older age.

Demographic changes bring an increase in the share of older people in the population, which also lead to an increase in the number of people who need help and support due to various forms of functional dependence.

198 Idem, p. 43.

199 Idem, p. 29.

200 Idem, p. 8.

201 Idem, p. 51.

202 *Intergenerational solidarity between family and state*, Serbian Red Cross, 2019, available on the website: <https://www.mdpp.gov.rs/doc/Medjugeneracijska-solidarnost-web.pdf>



As the family structure changes, the birth rate decreases and the number of informal family caregivers who can provide different types of support and assistance decreases. It is necessary to consider the extent of the need for support services in the future, and to prepare a strategic response based on human rights. It is also necessary to provide systemic support for family caregivers who provide services and support to chronically ill children or older persons through public policies that will provide various benefits - work from home, several days of paid leave, harmonization of obligations at work and in the family, use of paid leave in case of emergency, and flexible working hours, while developing community support services (caregiver education, information services, respite services) – but also, services that promote carers' well-being (such as mutual aid and support groups).

In the publication *Intergenerational Solidarity for Beginners*,²⁰³ it is stated that intergenerational solidarity is a complex concept present in all areas of society. Solidarity between generations should not be understood only in the financial sense, but as the very important mutual cooperation, understanding and coexistence of generations.



The publications research into attitudes analysed the different generations' attitudes towards the other generations and their own. 68% of young people, 80% of middle-aged people and 76% of older people believe that older people do not represent a burden on their country's economy, which is a good basis for further work to encourage intergenerational cooperation. But more work is needed to promote the role of older people in society, primarily among young people. One focus within this research is that there are two levels of solidarity - technical and professional support, that are the domain of the state, while empathy and emotional support, which come from the family.

In the research *Ageing and Intergenerational Solidarity in Institutional Accommodation, Challenges and Perspectives*,²⁰⁴ the quality of life of the older living in nursing homes and intergenerational cooperation with their family members were examined. The aim of this research was to make recommendations for improving the quality of life of older persons living in homes, as well as to make recommendations for improving intergenerational cooperation between

203 *Intergenerational solidarity for beginners*, Center for responsible action, Belgrade, March 2019, available on the website: [https://www.mdpp.gov.rs/doc/Medjugeneracijska-saradnja-za-pocetnikeB5\(2\).pdf](https://www.mdpp.gov.rs/doc/Medjugeneracijska-saradnja-za-pocetnikeB5(2).pdf)

204 *Ageing and intergenerational solidarity in institutional housing, challenges and perspectives*, Center for responsible action, Belgrade, 2019, available on the website: <http://www.mdpp.gov.rs/doc/starenje-i-medjugeneracijska-solidarnost-u-institucionalnom-smestaju.pdf>

the older persons living in nursing homes and their family members. Connection with family members is very important for the quality of life of older persons, regardless of where they live.

This research included 373 respondents – 309 from state homes for older persons, and 64 from private homes. The research showed that the vast majority of older home users cite the inability to live alone (49.7%), sudden illness (17.3%) and the desire not to be a burden to their children as the reason for moving to a home. This finding speaks in favor of the fact that the capacity of community services for home help is insufficient. The desire not to be a burden to their children shows that, due to demographic ageing and lower birth rates, there are fewer children who can help their parents in the role of informal caregivers, which means that those children who do provide such a service have to spend more time doing so. This occurs for lack of the systemic support that should be provided to them. On the other hand, 64.2% of beneficiaries in institutional accommodation are widows or widowers, and 18.1% are divorced or separated, which indicates that for the vast majority of home users, the spouse was the main source of support for independent living, and that when this support is no longer there, older persons often have no choice but to be placed in an institution.

In the publication *Improving the position of informal carers in the Republic of Serbia – research of comprehensive needs in order to create recommendations for public policies*,²⁰⁵ it was pointed out that informal care is gaining an increasing social role, that in developed countries work is being done on the development of intervention strategies and the provision of financial and other resources, as well as a system of formal support for and consideration of the needs of informal carers. In Serbia, the assessment of the needs of informal carers is an issue of wider social significance, and public policies should be based on research evidence, current regulations and possibilities for their implementation. Of the sample examined in this study, the largest part (more than three quarters) were women, mostly married, in the working period of life (from 35 to 64 years), half of them temporarily or permanently employed. Informal care is a demanding activity, most often found in relation to those who have reached older age, and can last for many years. According to the result of the survey, 74% of respondents cared for their relatives over the age of 66, with 77.2% of them for at least eight hours a day, 76.1% for more than a year, and as many as 34.1% of those respondents for more than five years. Informal care is most often provided to their closest blood relatives: parents, children or spouses. A significant segment consists of issues related to finances, and 56% of the caregivers surveyed stated that the financial resources at their disposal

205 *Improving the position of informal caregivers in the Republic of Serbia – an integral needs assessment aimed at creating recommendations for public policies*, HELP NET Center for Support and Inclusion, Belgrade, 2019, available on the website: <http://helpnet.rs/wp-content/uploads/2020/02/Unapredjenje-polozaja-neformalnih-negotatelja-istravanje.pdf>

were not enough, and 41% that they occasionally or permanently received additional material support from people around them, whilst only 28.4% of cared for persons receive financial-material compensation for help and care from another person.²⁰⁶



Recommendations arising from this publication relate to: the possibility of introducing flexible working hours, providing financially accessible day care centers, increasing the number of caregivers, geronto-housewives and personal assistants, improving cross-sectoral cooperation and information in the field of health and social protection, strengthening polyvalent health care and other services at the level of primary health care, reducing or subsidizing the price of basic necessary products, strengthening mechanisms for establishing responsible parenting, volunteerism, introduction of various types of support services, as well as increasing the visibility of this topic.

The handbook entitled *I, an informal caregiver*²⁰⁷ is intended for all those people who take care of their older parents and who are torn between different obligations and emotional and ethical dilemmas, such as – ‘Am I taking good care of myself?’, ‘Have I done everything in my power?’, ‘They took care of me, I have to take care of them too.’ Anyone who has had the experience of being an informal caregiver can say that they are never sufficiently prepared to face the situation that their parents are older, that they need additional help, that they can no longer do some things on their own. On the other hand, there is very little support for informal carers in society, and the support that exists is not available to everyone, or is not sufficiently visible. If we want a healthy functional family, we must also develop services to help informal carers. This handbook was created as an expression of the need to give simple, short instructions on how to take better care of older family members, but also yourself. The guide is intended for family members who live together, in some cases four generations under the same roof, as well as for those families whose members live separately and who are forced to ‘care remotely’. The guide contains short practical tips for informal caregivers on how to better care for older persons chronically ill or functionally disabled, but it also contains tips on how to take better care of themselves. It also contains tips for healthy ageing, which allow older women and men to be motivated to stay involved in family relationships and society for as long as possible and to stay active for as long as possible and not to give up healthy lifestyles, in accordance with their capacities.

206 *Improving the position of informal caregivers in the Republic of Serbia – an integral needs assessment aimed at creating recommendations for public policies*, HELP NET Center for Support and Inclusion page 69.

207 *I, an informal caregiver*, HELP NET Center for Support and Inclusion, Belgrade, 2019, available on the website: <https://www.mdpp.gov.rs/doc/ja-neformalni-negovoatelj.pdf>

In the publication *A city adapted to older persons – A roadmap for active ageing in the city of Belgrade*,²⁰⁸ the adaptation of the City of Belgrade to the needs of older persons was examined in order to create preconditions for creating public policies, programs and services, as well as technical and social infrastructure for improving the quality of life and promoting active ageing. The results of this research showed that older people in Belgrade are generally satisfied with living conditions and community care, but identified areas that can be improved to make Belgrade a more child-friendly city, such as public spaces and buildings, traffic, housing, social participation and support, respect and social inclusion, civic participation and employment, communication and information, community support and access to health services. This publication contains data related to the age of the population of Serbia, which has long been ranked among the oldest in Europe, and is 26th on the world age list, with an average age of 43.2 years. There are 315,664 (18.7%)²⁰⁹ inhabitants over the age of 65 living in Belgrade, and the age group between 63 and 73 years of age is the age group most represented.²¹⁰ According to this survey, older persons believe that public space in Belgrade is accessible to them (76.9%), 78% of them feel safe in the area where they live,²¹¹ 73% of respondents consider traffic affordable, despite the fact that almost 50% fatal traffic injuries among pedestrians occur in the age category of persons over 65 years.²¹² Among the problems they face, respondents in the survey cited the cost of housing - from the least financially burdened age group of 65-69 years, 36% said that the financial cost of housing burdens them. Two thirds of the respondents felt that they belonged to the community (61.7%), while 8.5% think that they are not respected.²¹³ 23.1% of the 65-69 age group are involved in community activities – a percentage which decreases with age, so that only 6.3% of those over 85 are involved in community activities.²¹⁴ 71.5% of respondents are satisfied with the quality of life, while 28.7% rate the quality of life as poor or very poor.²¹⁵ A relatively large number of respondents (12%) stated that they had experienced some form of violence in the last year compared to the time of the survey. Respondents in this study believe that they are increasingly marginalized and socially excluded, with the generally accepted perception that older persons represent a homogeneous group that does not contribute to the development of society. The emergence

208 *A city adapted to older persons – A roadmap for active ageing in the city of Belgrade*, Institute for public policies and PALGO smart, 2019, available on the website: <https://indd.adobe.com/view/42bbea10-ffe3-43e3-8514-e71e27e5dc3a>

209 Idem, page 13.

210 Idem, page 27.

211 Idem, page 70, 71.

212 Idem, page 41.

213 Idem, page 84.

214 Idem, page 88.

215 Idem, page 114.

of negative stereotypes is also influenced by the attitude towards older workers, who are often perceived as a worn-out and unproductive workforce, for whom it would be best to retire as soon as possible – an attitude which contributes to the emergence of so-called ‘ageism’.²¹⁶



Recommendations from this research relate to supporting initiatives that emphasize the preservation and development of the capacity of the older, the inclusion of the older in all aspects of everyday life, as well as the development of local policies to meet the problems of ageing, valuing the positive aspects of this life process.



Mirko Veljković, 8th grade, Melnica, Serbia, 2019

216 Idem, page 58.

The Serbian Red Cross and the Institute of Social Sciences also conducted research on *Ageing and Digital Inclusion*,²¹⁷ whose goal was to determine the degree of digital inclusion of the older in Serbia, their awareness of the existence of various online services, and the frequency of use. The general impression is that older people in Serbia do not use new technologies to a sufficient extent, and that people older than 65 fall into one of the categories at the highest risk of digital exclusion. Although this age group has shown great interest in learning to use information and communication technologies, their digital skills are minimal.²¹⁸ As significant data, it was stated that 43% of respondents do not use the Internet, and that out of 57% of those who use it, more than 90% do not use e-services.²¹⁹ The research points out that one of the most important elements in the fight against digital exclusion is work on educating older persons. The research also showed large differences between older people with higher and lower levels of education in terms of digital inclusion (78% of older people with a higher level of education own a computer and 74% a smartphone, while 79% of older people with primary education do not own a computer, and 86% are without a smartphone).²²⁰ The place of residence is also related to computer equipment (63% of the urban older population have a computer, and 57% a smartphone, while only 11% of the rural population have a computer, and only 9% a smartphone).²²¹ Although only 18% of respondents say they are able to use the Internet independently, as many as 74% believe that it has never happened to them that they could not exercise a certain right / obligation owing to lack of digital knowledge and skills.²²²



Given that digital inclusion implies equipment with ICT devices, access to the Internet and possession of digital skills and knowledge, if we lose sight of the fact that the older population must be empowered to use digital technology, further development of digitalization will contribute to their greater social exclusion and lack of access to rights.

217 *Ageing and digital inclusion*, Serbian Red Cross and the Institute for Social Sciences, Belgrade, 2019, available on the website: <https://www.redcross.org.rs/media/6183/starenje-i-digitalna-ukljucenost-web.pdf>

218 *Ageing and digital inclusion*, page 6.

219 *Idem*, page. 57.

220 *Idem*, page. 35.

221 *Idem*, page. 36.

222 *Idem*, page. 48.

The issue of violence against older persons has also been the subject of some research and publications. Thus, the publication *Violence against Older Persons – A Study of Domestic Violence*²²³ defined concepts of discrimination and violence, pointed out the different types of violence, who are the most common perpetrators and the persons who are at higher risk, as well as the institutions responsible for prevention. The second part of the publication refers to research into violence against older persons in the family context in Nis and Novi Sad, and to recommendations for reducing violence against older persons in the Republic of Serbia. The research collected and analyzed data related to reported cases of violence against older persons in the family environment during 2010. There is not much information about the phenomenon of violence in the third age, in the outside world or in Serbia. Data from the World Health Organization show that 4% to 6% of older persons suffer some form of abuse in their home, but it is assumed that there are many more cases of abuse and victims of violence. The scarcity of public information on violence against older persons in the family indicates that it is still taboo not only in Serbia, but throughout Europe.



Petra Vuleta, Obrenovac, Serbia, 2017

223 *Violence against older persons – A study on violence within families*, Serbian Red Cross, Belgrade, 2012, available on the website: <https://www.redcross.org.rs/sr/resursi/%C5%A1t-ampane-publikacije/nasilje-nad-starijim-osobama/>

Introduction to Ageing and the Human Rights of Older Persons - A pilot study on financial abuse of older persons²²⁴ is a publication containing basic data on population ageing around the world and the ways in which demographic ageing affects society. The number of older people around the world is growing rapidly. Today, 760 million people over the age of 60 live on the planet, and by 2050, that number will be more than two billion. It is estimated that the number of 'older people' will increase four times, and that the number of people older than 80 will amount to 395 million by 2050. Another important feature is the feminization of ageing. Women make up 54% of those over the age of 60, and 63% over the age of 80. Demographic ageing increases the risk of age discrimination, the risk of violence against older persons and the risk of human rights violations. The ageing process of the population brings with it a number of socio-economic, health, cultural and scientific consequences, and the need to turn challenges into opportunities. All countries of the world will have to adapt their policies, economies, health and social services to the needs of older persons, in order to provide them with quality care, secure income, access to goods, more flexible employment, and better inclusion in all spheres of society. Among the major achievements of the last few decades is the design of policies aimed at reducing inequalities and promoting social inclusion. It is especially important to ensure that the human rights of older persons are respected.

Within the framework of this publication, a pilot research was conducted in which the answers of older persons on the topic of financial abuse were collected and analyzed, and recommendations for decision makers were given. The survey included 140 randomly selected respondents – persons over 65 years of age, from ten cities / municipalities in Serbia. In addition to helping with raising grandchildren, older persons also help their children's families financially. This help is given by as many as 65.7% of respondents, and only about 1/4 of them do not provide this type of help.

In the ***Report on reported cases of gender-based violence reported in health care institutions in the Republic of Serbia 2018***,²²⁵ the data obtained from health institutions of the Republic of Serbia were analyzed on the basis of the Questionnaire drawn up by the Ministry of Health on the number of cases of violence against women for the period from January 1 to December 31, 2018, and analysis of the health sector response to gender-based violence. The report states that in central Serbia in 2018, there were 3,054 reported cases of violence

224 *Introduction to ageing and the human rights of older persons – A pilot study on the financial abuse of older persons*, Serbian Red Cross, Belgrade, 2015, available on the website: https://www.redcross.org.rs/media/1666/uvod_u_starenje_i_ljudska_prava_starijih.pdf

225 *Report on reported cases of gender-based violence in health centers in the Republic of Serbia in 2018*, 'Dr Milan Jovanovic Batut' Institute for Public Health, 2019, available on the website: <http://www.batut.org.rs/download/izvestaji/Godisnji%20izvestaj%20rodno%20nasilje%202018.pdf>

against women in the health care system, and in Vojvodina, 828 such cases.²²⁶ In addition, the police were informed about recorded cases of violence in 90% of cases in Serbia. In addition, the report states that women who have been exposed to gender-based violence among particularly vulnerable groups, such as pregnant women, mothers, women with disabilities and older women, have been recorded separately, and that 11.5% of such cases have been reported, of which 46% stated that they were members of the Roma minority.²²⁷ Also, this report states that 22 cases of violence against males were recorded in three health institutions in Serbia.²²⁸ The most vulnerable groups of women in this report are older women who face discrimination based on gender and age, pregnant women, women with chronic diseases and women with disabilities.²²⁹ It was stated that the lack of work in this area by the health service of Serbia demonstrates a great inequality in the approach to examining women who have experienced violence and in recording the medical findings of various doctors, and that the medical findings are often incomplete and scanty, and therefore unusable in court proceedings. The adequate education of physicians on the recognition and documentation of domestic and gender-based violence is necessary.²³⁰

In the survey *They have the same rights – what older women have to say about their rights not to be discriminated against, to be equal and free from violence, abuse and neglect*,²³¹ the need to involve older persons themselves in discussions on the exercise of their rights is emphasized, and, within the **Platform – Ageing requires action** – a questionnaire was developed in which 250 women from 19 countries (including the Republic of Serbia) participated in relation to issues related to non-discrimination and equality, as well as freedom from violence, abuse and neglect. This report practically summarizes the responses of the respondents themselves, and the conclusion of the responses is that older women state that they have been the target of discrimination in employment, health care, financial services, access to development programs, property ownership and property and inheritance management; and that discriminatory attitudes are particularly pronounced when it comes to widows or older women living alone, older women with disabilities, women from the countryside and migrant women.

226 *Report on reported cases of gender-based violence in health centers in the Republic of Serbia in 2018*, page 10.

227 *Idem*, page 18.

228 *Idem*, page 23.

229 *Idem*, page 26.

230 *Idem*, page 31.

231 *They have the same rights – What older women have to say about their rights not to be discriminated against, to be equal, and to be free from violence, abuse, and neglect*, Serbian Red Cross and HelpAge, 2017, available on the website: <https://www.redcross.org.rs/media/2467/imaju-ista-prava-pdf.pdf>

Respondents stated that they were exposed to violence, abuse and neglect, both in the houses in which they live, but also in institutions and public transport. This report concludes, among other things, that states need to ensure equality in practice for older persons, as well as the prevention of violence against the older, as well as support services and access to justice. It was especially emphasized that we should work on information, raising awareness and research.

The Association of Citizens FemPlatz, in partnership with the association ‘Strength of Friendship – Amity’, conducted a survey on the *Position and participation of older women in political and public life in Serbia*.²³² According to key research findings, older women in Serbia are at a disadvantage compared to older men, as well as compared to women and men from other age groups. Over 80% of older women believe that society does not pay enough attention to their position and needs, with the biggest problem they face being the poor socio-economic situation. Older women also do not participate enough in organized activities in the community, and their exclusion in rural communities is especially evident, this research stated. The political participation of older women is at a very low level. In the Assembly of Serbia, among 39% of women, only 1.2% are older women. Most of them are in the Assembly of Belgrade, where among the 46% of women there are only 3.63% aged 65 and over, while in the assemblies of Novi Sad and Bor there are no older women at all.

In addition to the above, in the *Public Practicum – Stop Discrimination and Violence against Older Women*,²³³ it is pointed out that older women are at a higher risk of abuse, neglect and (most frequently) domestic violence than older men, and it is necessary to vigorously encourage them not to keep silent about violence but to take effective measures to protect against violence. This publication states that older women do not represent a homogeneous group, but are characterized by a great diversity of experiences, knowledge, abilities and skills – which means that not everyone is at equal risk. It is further stated that violence is more common in women aged 85 and over, those who suffer from cognitive impairment and are users of some of the care services either at home or in institutions, and the divorced, lonely or isolated; and that older widowed women are at higher risk of financial abuse. Also, women aged 65-74, who have symptoms of depression or who live with a bully, are at higher risk of physical, sexual or psychological violence, and that when it comes to partner

232 *Position and participation of older women in the political and public life in Serbia*, ‘The Power of Friendship – Amity’ Citizens Association and the FemPlatz Women’s Association, Belgrade and Pancevo, October 2020, available on the website: http://www.femplatz.org/library/publications/2020-12_Polozaj_i_ucesce_starijih_zena.pdf

233 *A Practicum for the Public – Stop Discrimination and Violence against Older Women*, ‘The Power of Friendship – Amity’ Citizens Association, Belgrade, available on website: <http://www.amity-yu.org/wp-content/uploads/2017/08/ZaustavimoNasiljeDiskriminacijuNad-Starima20170821.pdf>

violence, it sometimes lasts 40 years or more. In addition, it was pointed out that older women are more often targeted by pickpockets than older men, that older women, especially those with lower educational status, are less likely to report violence, and that the perpetrators are children in almost half of cases, and then spouses/partners or former partners and other family members.

2.2.5. Reports and research on the position of older persons during the crisis caused by coronavirus

Already in the first days of the health crisis due to the epidemic caused by the Covid-19 pandemic, numerous bodies and organizations around the world paid special attention to the position of endangered groups of the population in the conditions of emergency situations. As one of the most endangered groups of the population in such extraordinary conditions, older persons were restricted or banned from moving in most countries of the world owing to their vulnerability and susceptibility to infection. The following text provides examples of individual reports and research. The position of older persons during the Covid-19 crisis, as one of the most vulnerable groups of the population, was addressed in a number of other texts on this topic.

Having in mind the current situation of the Covid-19 pandemic, during 2020 the United Nations paid special attention to the position of endangered



groups of the population in the conditions of emergency situations. The older population is recognized as one of the most vulnerable around the world in such conditions. This is the case in the ***Independent Expert's Report on the Enjoyment of All Human Rights of Older Persons***,²³⁴ which examined the protection of the human rights of older persons in emergency situations, an issue that the Independent Expert considers to be

of key importance in eliminating the existing shortcomings in the protection of older persons. The report emphasizes that older persons are disproportionately affected in emergencies, and that special attention should therefore be paid to the heterogeneity of this population and the many factors that contribute to the specific and increased vulnerability of its members. The report emphasizes the need to take into account, in the planning, response and recovery phases of emergency management, the fact that older persons are usually the last to leave their places of residence, and when displaced from those places, they risk

²³⁴ *Enjoyment of all human rights by older persons*, Report of the Independent Expert on the enjoyment of all human rights by older persons, July 2019, available on website: <https://documents-dds-ny.un.org/doc/UNDOC/GEN/G19/204/21/PDF/G1920421.pdf?OpenElement>

remaining in a situation of long-term displacement. There is also a need for a systematic approach to data collection and analysis at all levels. The specific needs, challenges and obstacles that older people face in exercising their rights in emergency situations have not been recognized in practice. It is therefore important to significantly involve older people in all phases of the emergency management cycle (including planning and budgeting, as well as monitoring and evaluation), while ensuring that the response to emergencies is approached from a human rights perspective. Thus, it is crucial to consult with the older in order to identify and overcome barriers to access to assistance, such as from the appropriate technology, restrictions on mobility, but also various administrative obstacles.

The Independent Expert also points to the insufficient number of researches on the prevalence and risk of abuse of older persons in emergency situations. The general tendency to under-report cases of abuse, harassment and violence against the older intensifies during emergencies, due to a multitude of factors, and it is necessary to start developing a mechanism for identifying such cases and the risk factors. It is important to raise awareness among humanitarian actors about the protection and risks faced by older people, but also to improve the accessibility of reporting mechanisms for people with hearing, vision or cognitive impairments, as well as for those who use local or minority languages or are at increased risk for other reasons.

Short edition on older persons and COVID-19: a moment for information, inclusive and targeted response,²³⁵ from the UN Department of Economic and Social Affairs (UNDESA), is a document created as a result of the world having to face an unprecedented health crisis and the fact that older persons have become one of its more visible victims. The pandemic is spreading among people of all ages and conditions, but available data suggest that the older are at greater risk of serious illness and death from Covid-19 (in China, about 80% of deaths have occurred among adults aged 60 and over).²³⁶ What has emerged as an accompanying and alarming situation is the pervasive effect of widespread discrimination against older persons, ranging from increased isolation to violations of the right to health and life on an equal basis with others.

235 *Issue Brief on Older Persons and COVID-19: A Defining Moment for Informed, Inclusive and Targeted Response*, United Nations Department of Economic and Social Affairs, 2020, available on website: <https://www.un.org/development/desa/ageing/wp-content/uploads/sites/24/2020/04/POLICY-BRIEF-ON-COVID19-AND-OLDER-PERSONS.pdf>

236 *Issue Brief on Older Persons and COVID-19: A Defining Moment for Informed, Inclusive and Targeted Response*, page 1.

This document states that public discourses around Covid-19, which portray the pandemic as a disease of older persons, can lead to social stigma and worsen negative stereotypes, as the Commissioner pointed out at the very beginning, after the introduction of the state of emergency.

Social stigma can result in labeling, stereotypes, discrimination and more, which can have negative consequences for patients and their carers, families and communities. Age discrimination can have a direct and often detrimental effect on the ability of older people to access a variety of services and goods, which is why it is necessary to ensure consultation with older people and their participation in policy decisions and the creation of support measures. First of all, it is necessary to ensure equal access

to health care, bearing in mind that due to the crisis, human rights experts have noted with concern that in some countries decisions related to the use of scarce medical devices are based solely on age and prevent the older from using them. Governments are urged to develop and adhere to protocols that ensure that medical decisions are based on medical needs, ethical criteria and the best available scientific evidence.

Also, this document points out that it is necessary to strengthen social support during the application of physical distance. Although physical distancing is necessary to reduce the spread of the disease, it can lead to increased social isolation of the older at a time when they need support the most. In addition, many older people live in long-term care facilities where there is a higher risk of infection. For this reason, a policy of banning visits and group activities has been introduced, which can also have a negative impact on the physical and mental health and well-being of users. That is why it is important to balance the protection of older and at-risk residents with their needs for family and connection with the community. Older people face barriers to community engagement, and may not be able to gain access to self-care information and access to relevant services, which can worsen the situation or lead to marginalization.



For many older persons, the Internet and digital technologies have become a window into the world and a way to keep in touch with family, friends and the community, and those with limited access to technology or insufficient knowledge of how to use modern services need to be able to do so. That this could prove crucial where restrictions on physical distancing apply, is one of the conclusions of this paper.

In the report of the **World Economic Forum, COVID and Longer Lives: Combating ageism and creating solutions**,²³⁷ it is stated that the coronavirus

²³⁷ COVID and Longer Lives: Combating ageism and creating solutions, World Economic Forum, October 2020, available on the website: http://www3.weforum.org/docs/WEF_Combating_ageism_and_creating_solutions_2020.pdf

pandemic has exposed long-standing challenges and inequalities in the way we define and protect the rights of older people around the world. It is undeniable that there is a need for greater cooperation among stakeholders in the public, private and social sectors for sustainable solutions in the care of older persons during and after Covid-19. Stereotypes that older people are fragile, helpless and a burden to society have led to prejudice and discrimination in the way policies and responses to Covid-19 are created and operationalized. Older people need to be at the center of collective action, and when they get involved in creating solutions, the whole community becomes more resilient to future disasters. Spaces that include different ages are a great way to protect yourself from social isolation and loneliness, as well as maintaining physical and mental engagement.

*Consequences of COVID-19 for older persons: a response to a pandemic*²³⁸ is a summary developed by the UNFPA Global Ageing Network to supplement the document *Short Edition on Older Persons and COVID-19: An Information Moment, Inclusive and Targeted Response*, emphasizing the humanitarian imperative to address the specific needs of older people in the Covid-19 Pandemic Preparedness and Response. The pandemic is a significant challenge to all governments and poses a global threat to public health and the global economy, and the data available at the moment are extremely uncertain, as some countries differ widely in the scope of virus testing and reporting, as well as the known number of infected cases. What is evident is that the risk of Covid-19 infection for older persons presents an increased risk, according to all national data. Also, the available data suggest that there are additional risks for older men compared to older women, and the World Health Organization and academic researchers are closely monitoring this gender difference as the pandemic generates more data on cases worldwide.

Older people can also rely heavily on long-term care providers at home or in institutions to meet their basic needs, setting unique requirements for the families, health care workers and carers who try to reduce their exposure. According to reports from the Covid-19 Response Team of Imperial College London, the need for hospitalization for people in their seventies is twenty times greater than the need for hospitalization for those in their twenties. Mortality rates from Korea, Italy and the Netherlands suggest a large jump in risk for the 70-79 age group in these countries, as well as an even more dramatic increase in the age group over 80; and where gender delimitation data are available, the risk is higher for men.²³⁹

238 *Implications of COVID-19 for Older Persons: Responding to the Pandemic*, UNFPA, 2020, available on website: https://www.unfpa.org/sites/default/files/resource-pdf/Older_Persons_and_COVID19_final.pdf

239 *Implications of COVID-19 for Older Persons: Responding to the Pandemic*, page 8.

When planning and implementing pandemic response strategies, the fact that the majority of older persons live alone or in nursing homes must be taken into account, and that they are facing a number of barriers to achieving quality health care, including accessibility, age discrimination and stigma. Older people living in long-term care facilities, such as nursing homes and rehabilitation centers, are particularly vulnerable to adverse outcomes and Covid-19 infections. On the other hand, those who live alone may face obstacles to obtaining accurate information, food, medicine, etc. during quarantine conditions. Caring for grandchildren, the important role played by some older people, can increase the risk, as well as greater mobility of younger family members living under the same roof.

In most countries, Covid-19 transmission reduction policies involve physical distancing, which can be an additional burden for older persons, as they are less likely to rely on social interaction via the Internet, especially the oldest (people over 80).

Although older men appear to have a higher mortality rate than women, according to available data, older women may also be at particular risk of Covid-19. Older people, especially in isolation and people with cognitive decline, dementia and people who are highly dependent on care, can become anxious, angry, stressed, upset or withdrawn while in isolation, which is why all actors in society must be aware of the fact that loneliness poses a serious

health risk for older people who are forced to avoid social contact. Continuity of practical and emotional support through informal networks (families), health workers, carers and volunteers must be ensured. Finally, older people are also at risk of abuse during a pandemic, including physical, psychological, sexual, and financial abuse / exploitation, and neglect.



UNFPA Global Ageing Network has called for urgent public health action to protect the rights of older people, to collect demographic data for preparedness, monitoring and follow-up, to advocate and facilitate coordination on exercising the right to health and protection of older people, informing about risks and engaging whole communities, as well as preventing age-based discrimination while encouraging intergenerational solidarity. When planning and implementing pandemic response strategies, the fact that the majority of older persons live alone or in nursing homes must be taken into account, and that they are facing a number of barriers to achieving quality health care, including accessibility, discrimination and stigma. Older people, this document states, especially those in isolation, persons with cognitive decline or dementia, and people who are highly dependent on care, may suffer additional consequences of isolation, which is why all actors in society must consciously work to ensure continuity of practical and emotional support through informal networks (families), health professionals, carers and volunteers.

The document *Policy Brief: The Impact of COVID-19 on older persons*²⁴⁰ by the United Nations, states that the Covid-19 pandemic causes unspeakable fear and suffering among older people around the world, which is why it is necessary to ensure that health care decisions that affect older people are guided by commitment to dignity and the right to health. The specific risks faced by older people in accessing health care, including discrimination, neglect, abuse and violence in housing, must be properly monitored. In addition, it is necessary to strengthen social inclusion and solidarity during physical distancing, because restrictions on freedom of movement and physical distance can lead to disruption of basic care and support for the older. Also, what was highlighted as important is the full integration of the focus on the older into the socio-economic and humanitarian response to Covid-19, both during the crisis and in the recovery phase. The structural causes that made older persons vulnerable need to be addressed if recovery and the provision of care and support are desired - including with investment in universal health coverage, social protection and strengthening of the national and international legal frameworks for the protection of the human rights of older persons.



This crisis has indicated the invisibility of older people in the analysis of public data, and that effective policy-making requires evidence and data disaggregated by age, gender and other relevant socio-economic characteristics; and the fact that a pandemic can significantly reduce the income of older persons and their standard of living, that physical distance can have a significant impact on mental health, and that violence against older persons can increase significantly.

In the research *Experience of the long-term care sector during the pandemic*²⁴¹ conducted in 17 countries of the OECD region, it was stated that countries that applied specific, mandatory prevention measures in the long-term care sector, while introducing a general obligation to stay at home and close public spaces (Australia, Austria, the Netherlands, Hungary, Slovenia), had a smaller number of cases of coronavirus infection, as well as a lower mortality rate in this sector. These measures included immediate measures to control the spread of infection, such as general testing and staff training, isolation of users to manage clusters, as well as additional support to staff in the form of staff increases, specialized teams, and personal protective equipment.

240 *Policy Brief: The Impact of COVID-19 on older persons*, United Nations, May 2020, available on the website: <https://www.un.org/development/desa/dspd/2020/05/covid19-older-persons/>

241 *Pandemic experience in the Long-Term Care Sector*, Canadian Institute for Health Information, Ottawa, 2020, available on the website: <https://www.cihi.ca/sites/default/files/document/covid-19-rapid-response-long-term-care-snapshot-en.pdf>

Older Persons in the Republic of Serbia and COVID-19 Pandemic – Research of the Impact of Covid-19 and Subsequently Introduced Mitigation Measures on the Health, Rights, and Overall Well-Being and Vulnerability of Older People,²⁴² is a UNFPA Serbia study that states that Covid-19 is a wake-up call to states and relevant stakeholders to strengthen cooperation in responding to emergencies and disasters, ensuring a timely, targeted and inclusive response. What needs to be strengthened in particular is the social protection system, according to this research, because stronger systems of social protection services reduce the vulnerability of the population, including older persons. Recognizing the importance of the social protection system as an integral part of emergency preparedness is a crucial step for planning preparedness, designing adequate measures and building the resilience of the population. It should be accompanied by better coordination of all systems to reduce existing inequalities, which drastically increase vulnerability during emergencies, sometimes exposing certain groups in the overall older population to a much higher risk.



Recommendations from this publication:– collect and analyze data related to health and social protection, but also other sectors, disaggregated by gender and age, and avoiding linking all those over 65 in the same category; – invest in health care, prioritizing prevention and preventive health measures;accelerate the provision of remote services (telephone, SMS, Internet) for health and social care systems);

- build capacity to provide services through mobile teams, while improving access to older people living in remote and rural areas;*
- actively joini the WHO Decade of Healthy Ageing Initiative and accept all recommendations and guidelines, in order to proactively address the phenomenon of demographic ageing and ensure a better quality of life for all generations;*
- introduce mental health support services for older persons and informal and formal carers into the health care system at the level of primary health care, especially in emergencies, in order to reduce the negative effects;*
- integrate long-term care services into a single, well-coordinated system;*
- formally and officially recognize the status of informal carers, following up with different types of structured support - training for care skills, counseling, break support, days off during the year, flexible working hours,*

242 *Older Persons in the Republic of Serbia and the COVID-19 Pandemic – Research Of The Impact Of Covid-19 And the Subsequently Introduced Mitigation Measures On The Health, Rights, And Overall Well-Being And Vulnerability Of Older People*, UNFPA Serbia, available on website: <https://0serbia.unfpa.org/sites/default/files/pub-pdf/older-persons-and-covid-19-01-12.pdf>

- etc.; and improve support for older people who have experienced violence, empowering them to report violence;*
- *identify the groups of older people who are at higher risk;*
 - *improve the digital inclusion of older people by training them in the use of modern information and communication technologies, as well as in avoiding the pitfalls of fraud, fake news, etc. ;*
 - *involve seniors in the design of software and digital services to suit their needs and be equally accessible to them, and provide different channels of information and communication, especially in emergencies and for those groups of the older population who are at higher risk;*
 - *invest and promote intergenerational solidarity;*
 - *address media that reinforce ageism and stereotypes with a protectionist discourse, that speaks of older people as a group to be protected and preserved;*
 - *clearly define and communicate to the public the scope and duration of the urgent epidemiological measures restricting certain rights of older persons (which are not unacceptable by default), with explanation of the reasons for their introduction and the expected effects;*
 - *ensure an emergency response which is inclusive, with measures tailored to the needs and capacities of older people;*
 - *analyze examples of good practice and performance in the coverage of different groups of older people;*
 - *build an additional support system or network of systems for population groups that could quickly adapt to emergencies;*
 - *adopt a new National Strategy on Ageing as a comprehensive and systematic response to demographic ageing and the challenges it brings;*
 - *promote the adoption of a new UN Convention on the Rights of Older Persons at the global level.*

Numerous publications also point to the specific position of women during the crisis caused by the Covid-19 epidemic, bearing in mind that the risk of domestic violence rapidly increases in situations of isolation and long restriction to the same living space. In the *Declaration of the Committee of States Parties to the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) on the Implementation of the Convention during the Covid-19 Pandemic*,²⁴³ which calls on the Committee of the Parties to the Istanbul Convention to ensure that

243 *Declaration of the Committee of the Parties to the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) on the implementation of the Convention during the COVID-19 pandemic*, Council of Europe, Strasbourg, 20 April 2020, available on the website: <https://rm.coe.int/declaration-committee-of-the-parties-to-ic-covid-/16809e33c6>

states that have ratified this convention respect its standards and recommendations during a pandemic marked by a jump in the number of reported cases of violence against women and domestic violence. The Committee notes that violence against women and domestic violence tend to increase in times of crisis and that the new data show an alarming increase in the number of reported cases of such violence worldwide, but also in many Council of Europe members; emphasizing the obligation of states to be particularly diligent in preventing, investigating, punishing and redressing acts of violence in this situation, while welcoming the approach of individual states 'seeking innovative ways to adapt their institutional responses to violence'.



This declaration draws attention to the choice of appropriate provisions of the Istanbul Convention and offers examples of possible measures to be taken during a pandemic, such as Article 6 (gender sensitive policies) - taking into account the possible consequences of various forms of gender-based violence during a pandemic. The Committee also points to the application of Articles 7-8, 11-12, 15-17, 19-20 and 49-53, in the context of a pandemic and possible responses to any form of violence. Thus, for example, by applying Article 19 (regarding Information), it is necessary to take into account victims of violence who are in isolation and live with a violent partner or family members, and provide them with access to information on possible support services and develop appropriate information campaigns.

In the publication *Covid-19 and the impact on human rights*,²⁴⁴ a brief overview is presented of the implications of the fight against Covid-19 for the protection of human rights and of the impact of the measures taken, especially isolation, with regard to the rights guaranteed by the European Convention on Human Rights. It is also stated that the Covid-19 pandemic has already grown into one of the most severe crises since the Second World War. The publication states that according to the European Convention on Human Rights, states have the obligation to take appropriate measures to protect individuals from the spread of the epidemic and prevent further infection. Given the importance of protecting life, states can justifiably take proportionate measures to isolate parts or the entire population in order to slow down the infection, and thus protect the fundamental rights guaranteed by the convention, because other rights are always limited.



The conclusions from this publication are that in crisis situations, the first priority is the protection of human life and health, and that states have an obligation to take all measures to protect and provide services, especially to help people whose health is in greater danger.

244 *Covid-19 and the impact on human rights*, The Aire Centre, 28 April 2020, available on website: https://www.rolplatform.org/wp-content/uploads/2020/10/Covid-19_and_the_WB.pdf

States have a duty to carefully assess their interference with the rights and freedoms of citizens and to limit the effects of such interference to the extent necessary. Secondly, states have an obligation to comply with national legislation governing emergency procedures, so that any measure may be subject to scrutiny by democratically elected bodies and courts. Finally, there is the learning phase, when consideration is given as to whether all precautions have been taken and whether more should have been done. The obligations of states under the European Convention concern the legality, necessity and proportionality of the adopted restrictions, including positive measures for the protection of particularly vulnerable categories of the population. It is necessary to establish a balance between collective protection and the protection of individual rights, which should not be sacrificed. The European Convention on Human Rights and the case law of the Strasbourg Court provide excellent guidance in the difficult situation caused by the Covid-19 epidemic, and compliance with the provisions of the convention can help respect and protect human rights, regardless of the challenges.

The responses of the Equality Body to the challenges of Covid-19 were an important source of information for drafting the ***Recommendation for a Fair and Equal Europe: Rebuilding Our Societies after Covid-19 – European Equality Body Network*** (EQUINET), of which the Commissioner is a full member. Equinet’s recommendations stemmed primarily from the fact that with the public health crisis triggered by Covid-19, states responded with measures that do not affect all social groups in the same way and do not have the same effect on groups that are generally disadvantaged and at greater risk of discrimination.

Recognizing the risk of severe economic consequences due to the Covid-19 pandemic, the ***European Network of Equality Bodies (EQUINET) sent recommendations to decision-makers at the national and European levels for equal reconstruction of society after the crisis.***²⁴⁵ Equinet starts from the fact that basic human rights, such as the right to equality, are the foundation of any democratic society and can be limited only if the conditions of necessity, proportionality and limited duration are strictly met. In this regard, it is necessary that the institutions of the system and politicians make it clear to the public that they will take care to protect the rights of all citizens, especially those citizens who belong to vulnerable social groups. The Recommendation further states that special attention should be paid to the increased risk of hate speech and the adoption of

245 *Recommendation for a fair and equal Europe: Rebuilding our societies after Covid19*, Equinet, 2020, available on website: <https://equineteurope.org/2020/11-recommendations-for-a-fair-and-equal-europe-rebuilding-our-societies-after-covid-19/>

measures containing elements of indirect discrimination. Furthermore, when it comes to measures to mitigate the economic consequences of a pandemic, special care is recommended when considering the effects on pre-existing economic and structural inequalities. It also emphasizes the need to strengthen the social protection system and social infrastructure in general, as the most important mechanism for reducing inequality in society. In addition, the importance of respect for the principle of equality by employers, service providers, educators and the public sector in general is emphasized. Finally, it is necessary to provide citizens with access to justice, among other things, by strengthening the capacity of equality bodies, in order to more effectively monitor the implementation of anti-discrimination legislation and control measures taken to improve the epidemiological situation and mitigate the expected economic consequences of the pandemic.

The realization of basic human rights during the state of emergency and the crisis caused by the coronavirus was also dealt with by civil society organizations in the Republic of Serbia. During the state of emergency, but also after its abolition, primarily due to the burden on the health system, the availability of health care was limited. This was discussed in the publication *Human Rights and COVID-19 – Analysis of changes in the legal framework during the epidemic COVID-19 and impact on the exercise of human rights in the Republic of Serbia*,²⁴⁶ in which it was stated that health care was limited as a consequence of the restriction of movement. Persons who urgently needed medical assistance and a maximum of two persons accompanying them could move to health care institutions, regardless of the ban on movement. Another way of limiting the availability of health care was reflected in the denial of services that were not related to the suppression of the epidemic, so that almost all forms of health care provision were postponed, except for emergency services. Healthcare institutions informed patients about the new work regime, and all non-emergency

The pandemic has triggered action on the side of the international organization for the protection of human rights, given that the restrictions on human rights due to the public health needs are a global challenge, and since the outbreak of the pandemic, the United Nations have issued timely instructions to the Member States on how to manage the epidemic, without prejudice to the international human rights standards, states this publication.

246 *Human rights and Covid-19 – Analysis of changes in the legal framework during the Covid-19 epidemic and the impact on the exercise of human rights in the Republic of Serbia*, Lawyers' Committee for Human Rights (YUCOM), September 2020, pages 27-28 – available on website: https://www.yucom.org.rs/wp-content/uploads/2020/11/Yucom_Covid_layout_SRP_all-1.pdf

operations, control specialist examinations and diagnostic examinations were postponed. In most medical institutions, doctors provided only emergency and urgent medical care. The Republic Health Insurance Fund has adopted certain technical measures in order to facilitate access to health care, so it is possible to receive health care without a certified health insurance document (automatic extension of the health booklet), sick leave has been automatically extended, and the Government's conclusion on extension adopted, with validity of prescriptions for renewable dispensing of medicines for nine more renewals.²⁴⁷

Other rights that were restricted during the state of emergency were also pointed out in the publications. The Lawyers' Committee for Human Rights – YUCOM – in the publication *Restriction of Movement and Trial during a State of Emergency*,²⁴⁸ pointed out that the European Convention on Human Rights, in Article 15, which regulates derogations from the Convention in extraordinary circumstances, states that in cases of public danger 'threatening the survival of the nation', " the state may take measures that deviate from its obligations, but only if it is necessary in such a situation. The Republic of Serbia restricted the right to freedom of movement without notifying the Secretary-General of the Council of Europe of derogations from certain rights, this publication states. It only did this on April 7, 2020, retroactively and without an accompanying list of the rights that would be limited or the time frame for the duration of restrictions. Although it can be said that the condition of the legality of the restriction of the right to movement was fulfilled, the restriction of this right was suffered by all citizens of Serbia, but not equally. Consequently, the questions of age discrimination against citizens over 65 or 70 years and justification for the measure of the total ban were raised. Unlike the constitutional courts in the region and across Europe, which assessed the constitutionality of similar measures, the Constitutional Court in Serbia remained passive throughout the state of emergency, allowing further legal uncertainty and violations of citizens' rights, the publication said. Precisely because of that, but also because of the frequent change of rules, there have been an extremely high number of cases in which citizens have been accused of the criminal offense of Failure to Act under Health Regulations. Since the National Assembly confirmed all measures adopted during the state of emergency and passed the Law on the Validity of Decrees Adopted by the Government during the State of Emergency, the final assessment of the constitutionality of the disputed measures should be made by the Constitutional Court of Serbia.

247 Idem, page 42.

248 *Restriction of movement and trials during the state of emergency*, Lawyers' Committee on Human Rights (YUCOM), available on website: <http://www.yucom.org.rs/wp-content/uploads/2020/08/Ograni%C4%8Denje-kretanja-i-su%C4%91enja-za-vreme-trajanja-vanrednog-stanja-YUCOM-jul-2020..pdf>

In the publication *Mental Health of Informal Carers*,²⁴⁹ by the Serbian Red Cross, it is stated that currently informal carers play a central role in providing long-term care. It is estimated that between 70% and 95% of all care needs are provided by family members, relatives, friends and neighbors, thus covering gaps in short-term and long-term formal care, allowing people in need a more dignified life, and delaying institutional care. Informal carers, through their engagement, represent an ‘invisible workforce’ that often does not receive support from the system or society, and their burden of time, financial, economic and health, is insufficiently recognized.

During the Covid-19 pandemic, informal carers found themselves in an even more demanding role, becoming a ‘protection dam’ and one of the pillars of the health and social care system. However, although this has been emphasized, they remain ‘invisible’ from the point of view of the support systems, policies and services stated in this publication. Given the demographic trends in our country, it can be expected that the number of informal caregivers will continue to decrease, which will increase the burden and increase the risk of depression, which is why this population should be provided with additional support to reduce the mental health risk.

Some of the results of the research conducted, which are an integral part of this publication, say that informal caregivers are mostly women (70.8%), while men make up 29.2% of the sample, which fits in with the global data showing that, in Europe, 76% of informal carers are female). The age of the caregivers surveyed ranged from 18 years for the youngest caregiver, to 92 years for the oldest caregiver. These data show that there is in fact a very wide range of carers, which indicates the need for public policies to provide special measures of support to different age groups. During the pandemic, what informal carers needed most was protective equipment. Lack of information also appeared as a problem (in 29.3% of cases), respite services were needed by almost a quarter of respondents, almost a fifth of respondents needed additional help, while hygiene products were required by 14.8% of respondents.²⁵⁰

249 *Mental health of informal caregivers*, Serbian Red Cross, November 2020, available on the website: <https://www.redcross.org.rs/media/6994/ment-zdravlje-neformalni-negovatelja-web.pdf>

250 *Mental health of informal caregivers*, page 44 – 63.



Art work from the 2017 'Bridge of Understanding - Intergenerational Solidarity' competition.

3. COMMISSIONER'S PRACTICE – ACTIVITIES FOR PROTECTION AGAINST DISCRIMINATION AND PROMOTION OF EQUALITY OF OLDER PERSONS

This part of the report provides a brief overview of the Commissioner's work since its establishment until 2020. Detailed statistical and other data by year are given in the regular annual reports on the situation in the field of protection of equality, which are available on the Commissioner's website.

The Commissioner's practice is presented primarily through work on citizens' complaints and opinions, recommendations for measures to achieve equality, initiatives and other actions by the Commissioner, and other activities carried out to indicate the position of older persons and their promotion. Special researches are presented, primarily those directly related to the position of older people; and the research paper, *The position of older people in Serbia – social context, data review and research results*, is given in integral form, bearing in mind that it was conducted in late 2020 and provides a clearer picture of

the possibilities available to us from the aspect of the latest data, as well as indicating how senior citizens themselves envisage what policy makers should be doing to enable a dignified older age and the enjoyment of all human rights and freedoms by the older, responding adequately to their needs and respecting their potentials; and thereby improving the position of both senior citizens and of all other social groups, who will also one day grow older.

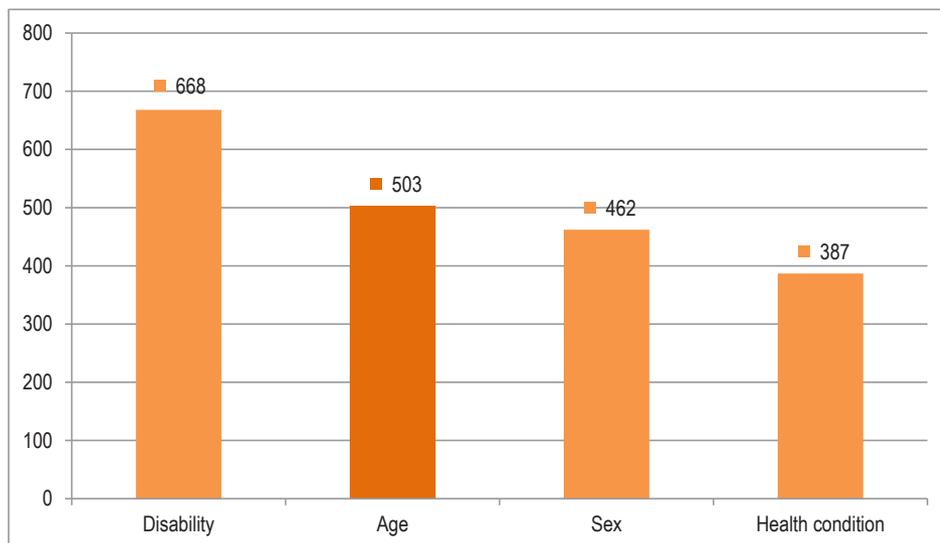
3.1. Commissioner's Practice – Activities for protection against discrimination of older people

In the period from its establishment until today, the Commissioner has received a large number of complaints of discrimination on the grounds of age. Such complaints have since the beginning of the institution's work been among the top five most frequent grounds for complaint. Discrimination on the basis of age in accordance with the law covers all age categories and includes discrimination against children and youth, discrimination against persons belonging to the so-called middle generation, but also discrimination against people over 65 years of age. Discrimination on the basis of age when it comes to younger categories of the population indicates a more unfavorable position for children (mainly children with disabilities or development difficulties) in the field of education, as well as a disadvantaged position for citizens aged 50 to 65, especially in the field of work and employment. With regard to discrimination over the age of 65, at this age there is a need for different support, especially for those older people who live alone, or in rural areas, or with a minimum income, or those who suffer some form of violence, abuse or neglect.

This report covers the position of persons older than 65 years of age, owing to the volume of material, but also the problems they encounter. A more detailed review of the position of the younger generations will be the task of the Commissioner in the coming period, because the improvement of the quality of life of all citizens is necessarily interdependent across all age groups, and concerns all generations. Although at first glance young people might not feel they have to be particularly interested, except in cases of personal connections, the position of the older is extremely important for the younger generation, both for their own future and for the whole society.

In the last five years (2016-2020), when the total number of complaints submitted to the Commissioner is taken into consideration, age has been the second most frequent basis for complaint. During this period, most complaints were filed on the basis of disability as a personal characteristic, followed by age, gender as a personal characteristic, and health condition.

Graph 7: Overview of the number of complaints submitted to the Commissioner on different grounds, in the period 2016-2020



Complaints to the Commissioner are certainly one of the indicators of the presence of discrimination and of the degree of respect for the principle of equality in society, but not the only one, as is continuously pointed out in regular reports. The situation regarding the prevalence of discrimination in society is also influenced by other factors, including social and cultural context, society's attitude towards discrimination, civic awareness of the necessity and importance of compliance, readiness to report violations, degree of tolerance for differences, trust in institutions, knowledge of the grounds and forms of discrimination, as well as the activities of civil society in the protection of human rights, etc.



At the meeting with Commissioner Brankica Janković, the President of the Republic of Serbia, Aleksandar Vučić, emphasized that he is fully aware of the challenges that citizens face every day, but that he believes that we are all ready to solve problems responsibly. The President

supported the Commissioner as the central state institution for protection against discrimination, and any activities carried out in order to achieve full equality of all our citizens, especially in the smaller and more remote villages of

Serbia, and stressed the importance of state bodies acting and recommending measures to eliminate discrimination.

In order to successfully combat discrimination and achieve equality, it is necessary to effectively operate all mechanisms for protection against discrimination, primarily the institution of the Commissioner and the courts. It is also necessary to guarantee the full implementation of the anti-discrimination legal framework by all public authorities, keeping central and unified records of discrimination in all areas of social life, to seek insight into all relevant research and information on the prevalence of this phenomenon, as well as to monitor international and domestic anti-discrimination practices and policies. Of great importance is the high level of information and awareness of citizens about the prohibition of discrimination, but also achieving the principle of equality for social and economic development and improving the quality of life of all citizens. Also, not less important, it is necessary to nurture cultural patterns in which discrimination is condemned, and equality is respected and supported.

In the Republic of Serbia there is no single database, i.e. single system for monitoring the occurrence of discrimination that would cover all cases of discrimination, including the actions of the courts. This situation makes it difficult to comprehensively consider the phenomenon of discrimination, or to assess the effects of the implementation of legal instruments for protection against discrimination, and of special measures aiming to achieve equality of vulnerable social groups.

There are no unified data on the occurrence of discrimination, but it is evident that discrimination is present in all areas of social life. In several annual reports, the Commissioner has made recommendations on the need to establish a single system for collecting and analyzing data to monitor discrimination and the effectiveness of the protection system.

In the first years of the Commissioner's work, a smaller number of complaints were submitted, which is understandable given that this was a new institution and that citizens were not aware of the opportunities available to them when it comes to protection mechanisms against discrimination. Thus, in 2010, 1.5% of the total number of complaints were filed on the basis of age; in 2011, it represented 4.5%, in 2012 7.8%, in 2014 11.3%, and in 2015 6.1% of the total number of complaints submitted to the Commissioner.

Age as basis of discrimination was the second most frequent basis for complaints in terms of number during 2016, 2017 and 2018. In 2019, age as the basis of discrimination was in fourth place in terms of the number of complaints filed, although the actual number was almost identical to the number of complaints

filed on the same basis in 2017. Compared to 2019, the number of complaints filed on this basis has increased significantly, which is to be expected, given the Covid-19 epidemic and the consequences it has had on the population for different age categories. In this regard, in 2020, age as the basis of discrimination was the second most frequent basis for complaints on discrimination, after the basis of health status. The largest number of such complaints filed in 2020 were due to discrimination against persons over the age of 65, which is to be expected, given the health crisis caused by the Covid-19 epidemic and the consequences of the measures taken on the position of older people.

Of the total number of complaints submitted to the Commissioner on the basis of age, about one third refers to discrimination against those over the age of 65.

Table 3: *Overview of the number of complaints submitted to the Commissioner on the basis of age in relation to the total number of complaints filed in the past five years*

2016.	2017.	2018.	2019.	2020.
11.8%	11.8%	16.5%	9.9%	14.8%

The gradual increase in the number of submitted complaints shows, among other things, that the institution, on the one hand, is increasing its visibility and acting more intensively in combating discrimination in our society, and on the other hand, that discrimination as a phenomenon is increasingly recognized, having in mind that the ten years of its existence of a protection mechanism is not enough for citizens to be fully informed about this mechanism. Also, the fact is that there is a misuse of the meaning of the term ‘discrimination’, which is often used in cases of non-exercise of certain rights for any reason, or in cases of various injustices.

When it comes to social relations, discrimination against older people is manifested in almost all areas, such as in: proceedings before public authorities, the provision of public services, social and health care, pension and disability insurance, labor and employment, property rights, housing, education, culture and sports, as well as in the field of public information and media.

It should be noted that there is a significant difference between the number of complaints received and the number of opinions and recommendations issued after the proceedings, because a number of complaints were rejected or the proceedings had to be suspended for reasons prescribed by law: it was obvious that there was no violation, the complaint indicated that court proceedings had been initiated or terminated, the Commissioner had already acted, no new evidence had been offered, or it had been assessed that due to the passage of

time, it was not possible to achieve the purpose of the proceedings. The number of rejected complaints and suspended proceedings indicates that citizens and all social actors should continue to be informed, i.e. that knowledge about the very concept of discrimination should be improved, given that discrimination is often equated with violations of other rights, and that many complainants consider any unequal treatment to be discrimination.

The total number of cases and complaints received by the Commissioner annually is influenced by such factors - in addition to knowledge of the concept of discrimination and mechanisms for protection against discrimination - as the adoption or amendment of certain regulations directly affecting the position of individuals, media coverage of certain topics, engagement of organizations dealing with the protection of human rights, and the conducting of situational testing, etc. For example, during 2018, a large number of complaints were submitted to the Commissioner in which birth was stated as the basis, and at the same time the adoption and the application of the Law on Financial Support to Families with Children had occurred.

It is evident that it is still necessary to improve the information that citizens have access to, given that very often discrimination is equated with violations of other rights, and that many complainants consider any unequal treatment as discrimination. It also shows that citizens are particularly sensitive to various injustices, situations and events related to the exercise of various rights.

It should be emphasized that discrimination against older people is related to the position of certain categories of the population, regardless of age. Discrimination in older age is conditioned by the position of social groups at a younger age. Thus, in the practice of the Commissioner, there are evident trends according to which women in the Republic of Serbia are still at a disadvantage compared to men in all areas of social life, not only on the basis of gender but also on the basis of marital and family status. Discrimination against women is especially pronounced in the labor market, the economic sphere, education, and participation in decision-making. There is also the presence of gender-based violence against women, which is not a characteristic only for our country. There are also very significant differences between men and women in the distribution of unpaid household and care work. Women spend on average almost three times more time per day than men in unpaid care and household chores, which limits their time for paid work, education and leisure and further worsens their gender-based disadvantage. This position of women inevitably leads to their discrimination in older age, which was discussed more in the part of this report that refers to reports and research on the position of older citizens.

Discrimination against people with disabilities is also reflected at all ages, and the diversity and number of problems that people with disabilities face

on a daily basis make them one of the most vulnerable groups in all aspects of social life. A large number of people with disabilities are poor and at the risk of poverty. They find it difficult to find employment and lack adequate education or access to community services, which are anyway often not organized and implemented consistently. These problems are further complicated by age.

Age discrimination often occurs in combination with another basis of discrimination. Multiple discrimination against a person occurs when discrimination is caused by two or more personal characteristics.²⁵¹ Due to its particularly severe consequences, it is classified by law as a severe form of discrimination. During the year, a significant number of complaints were submitted to the Commissioner in which several personal characteristics were indicated, among which in a large number of cases were age, sex, disability, marital and family status, health condition, property status, etc.

The following text provides a more detailed overview of the work of the Commissioner, per years active, in order to gain a more complete insight into the position of older people and the problems they face.

3.1.1. Actions of the Commissioner in the period 2010-2014

The following is a brief overview of the handling of complaints submitted to the Commissioner from 2010 to 2014. As already mentioned, in the first years of the institution's work, a smaller number of complaints was submitted compared to later years (in 2010, 1.5% of the total number of complaints were submitted based on age, in 2011, 4.5% were submitted, 2012, 7.8% of the total number of complaints). Since 2013, the number of complaints based on age is around 10% of the total number of complaints.

Thus, in 2013, 10.3% of the total number of submitted complaints (68 complaints) were submitted to the Commissioner on the basis of age, and this basis was the third most frequent, after health status and nationality, which was a jump compared to previous years. During this year, an opinion was given on the provision of the Draft Law on Patients' Rights, which stipulates that *'a patient has the right to equal access to health care, without discrimination in relation to financial possibilities, place of residence, type of illness or time of access to health care'*. This is also the only provision that mentions the term 'discrimination'. The opinion states that if this provision is not changed, it can lead to unforeseeable consequences from the aspect of the exercise of a patient's right to freedom from discrimination, having in mind the very restrictive list of

251 For example, an older woman with a disability may be discriminated against on the basis of gender, age and disability.

personal characteristics in relation to which the prohibition of discrimination applies.

The same pattern in terms of the frequency of complaints was observable during 2014, when age as the basis of discrimination was present in 11.3% of the total number of complaints (78) - the third most frequent basis for complaint.

Already during the first years of the Commissioner's work, it was stated that the inaccessibility of public buildings and areas is one of the basic problems in achieving equality for persons with disabilities, as well as for older people and for people who have difficulty moving. The existing legislation stipulates that facilities and areas in public use must be built in accordance with accessibility standards, to ensure unimpeded movement and access for persons with disabilities, children, and the older. However, many facilities are not accessible, including the premises of state bodies, which makes it difficult to exercise rights and prevents social inclusion.

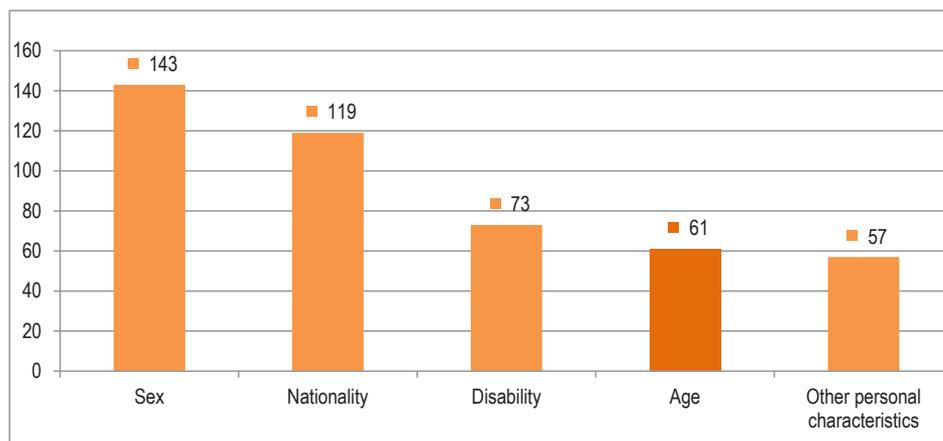
The next areas that stand out in terms of the number of submitted complaints are the areas of service provision, primarily health and social protection, but also other services. As an example, in the first years of the Commissioner's work it was pointed out that the Rulebook on the type of drugs prescribed and issued at the expense of compulsory health insurance listed certain drugs for which prescription restrictions had been established in relation to the insured person's age. Namely, persons suffering from metastatic prostate cancer who are older than 75 years of age, as well as women suffering from breast cancer who are older than 40 years, cannot receive drugs at the expense of compulsory health insurance, but must obtain them by their own means.

In addition to dealing with complaints, during this period the Commissioner prepared the *Special Report on Discrimination against Persons with Disabilities in Serbia* (2013) and *Report on Accessibility of Business Buildings* (2013).

3.1.2. Actions of the Commissioner in 2015

During 2015, age discrimination ranked fourth in terms of the number of complaints filed, with 9.4% of the total number of complaints filed (61).

Graph 8: Frequency of complaints on the grounds of discrimination in 2015



The number of complaints due to discrimination against persons over the age of 65 is higher than in the previous year. People over the age of 65 have filed several complaints of discrimination in the provision of public services and against various banks that set an upper age limit as a condition for exercising the right to certain banking services.

Opinion with a recommendation: The agricultural entrepreneur applied for assistance to agricultural farms through interest-free loans from the bank, based on the competition announced by the City Administration. Since he was approved for help after the end of the competition, he was sent to the bank to sign a contract, but was informed there that people older than 70 could not get a loan. ***During the procedure, it was determined that the bank, by prescribing the conditions that users of agricultural loans and other products intended for agricultural producers can only be holders of registered agricultural holdings who, among other things, are not at the time of application more than 65 years, nor more than 70 years at the time of repayment of the last installment of the loan, committed an act of discrimination based on age.*** Therefore, the bank was recommended to send a written apology to the complainant for discriminatory treatment, to harmonize the methodology of lending to agricultural producers with anti-discrimination regulations, as well as not to violate anti-discrimination regulations in the future, within the scope of its competence.

This recommendation has been followed.

Opinion with recommendation: The complainant stated that he was 77 years old and that he wanted to apply for a loan intended for pension beneficiaries, but that the bank did not allow him to do so because he did not meet the prescribed condition that the pension beneficiary be 75 years old on the last annuity. During the procedure, it was determined that the bank in its service of cash loans and refinancing loans for pension beneficiaries prescribed, among other things, the condition that pension beneficiaries be at least 55 years old at the time of application, as well as the condition to be maximum 75 years old on the date of the last annuity repayment. The Commissioner was of the opinion that ***the bank violated the provisions of the Law on Prohibition of Discrimination by prescribing conditions related to the age of the beneficiary of the loan for pensioners – minimum 55 years at the time of submitting the request and maximum 75 years on the day of repayment of the last annuity.*** The bank was recommended to harmonize the criteria and conditions for providing credit services intended for pension beneficiaries with anti-discrimination regulations in the future, within the scope of performing activities within its competence.

This recommendation has been followed.

In addition to the opinions issued in individual cases, the banks were sent recommendations for measures to achieve full equality of citizens of all ages. Most banks reacted positively and removed the upper age limit from their general acts as a condition for obtaining certain banking services.

Recommendations of measures to eliminate direct discrimination based on age in the use of banking services were sent to the addresses of 29 commercial banks in Serbia

Acting on complaints related to services offered by banks to individuals, it was noticed that most commercial banks in Serbia condition the use of banking services (current account loans, loans, etc.) on the age of clients. Banks often prescribe that they can use a certain banking service, e.g. 'persons under the age of 70' or 'not older than 67 at the time of repayment of the loan'. By determining the conditions of the upper age limit for the use of banking services, banks directly discriminate against citizens on the basis of a personal characteristic – age, by denying them the right to use banking services. Also, the type of violation of the principle of equal treatment is reflected in the imposition of additional conditions that are

required from older users of banking services (e.g. additional guarantee), which are not required from other potential users of services. It is not disputed that banks have the right to assess creditworthiness and credit risk in each individual case, because they have a legitimate and law-based interest in providing adequate profits by placing funds, which includes adequate credit risk assessment when approving the use of a particular service. However, every banking service must be available to all citizens under equal conditions, and in individual cases banks have the authority to assess whether a particular client meets the conditions for using the banking service. Therefore, banks are recommended to take all necessary measures to eliminate the discriminatory condition of the upper age limit for the use of banking services, which banks prescribe in their general acts.

Most banks responded that they had acted or would act in accordance with the recommendation.

Labor and employment is an area in which a large number of complaints are constantly submitted on all grounds. Not uncommonly, there were complaints based on age, especially when it came to women. Also, employers often laid off older workers just before acquiring the conditions for retirement. Older unemployed workers also failed to get jobs despite their work experience.

Opinion: The opinion was issued in the procedure regarding the complaint filed against the employer due to the decision prescribing the conditions for incentive departure of employees, i.e. the condition that employees who turn 65 next year and have at least 15 years of insurance experience can apply for incentive departure. The complainant considered that he had been discriminated against because he had turned 65 that year, and they said incentives did not apply to him. During the procedure, it was determined that the employer provided certain categories of employees with the opportunity to leave the company by taking certain incentives, i.e. by providing financial incentives, in order to achieve the goal that best suits the needs and material possibilities of the company. ***Given the fact that the employer has limited funds and that it is not in his financial interest to provide incentives to employees who will certainly retire by law by the end of the current year, in this case there is a ratio between the prescribed measure and the goal achieved by the measure.*** Therefore, the opinion was given that by determining the criteria and conditions in the Decision on conditions and criteria for stimulating voluntary departure from the company, the company did not violate the provisions of the Law on Prohibition of Discrimination.

When acting on the complaints of citizens it was also established that the National Employment Service had prescribed discriminatory conditions when approving subsidies for self-employment. Namely, in the complaint procedures, it was established that the National Employment Service, when approving subsidies for self-employment, prescribes the condition that the guarantor of the subsidy beneficiary cannot be a person older than 65, and by determining the upper age limit for guarantors directly discriminates against citizens' characteristics – in this case, age, by denying the right of a certain group of people (older than the upper prescribed limit) to be guarantors of beneficiaries of subsidies for self-employment. The National Employment Service was recommended to take all necessary measures to eliminate the discriminatory condition related to the age of the guarantors.

Recommendation of measures for achieving equality to the public utility company to enable entry to cemeteries by motor vehicles

The complainant, who is a person with a disability, stated that the security workers did not let him enter the New Cemetery in his own car for the day after Memorial Day, with the explanation that such a decision was made by the City Assembly. The analysis of the Decision on the prohibition of motor vehicles entering certain cemeteries in the territory of the city of Belgrade showed that the text uses incorrect, outdated and discriminatory terminology. The prohibition states that all persons are prohibited from entering cemeteries by motor vehicles on public holidays, Memorial Day and the day after Memorial Day. Furthermore, it is prescribed that persons may obtain a special permit to enter the cemetery on other days, on the basis of a written application and documentation confirming the disability.

The Commissioner recommended the change of outdated and discriminatory terminology in the decision, i.e. harmonization with generally accepted linguistic and terminological standards in the field of human rights; enabling transportation and / or entry by motor vehicles for persons who have difficulty moving to all cemeteries and on public holidays, Memorial Day and the day after Memorial Day, as well as facilitating the procedure for issuing special permits to enter the cemetery.

Following this recommendation, measures for achieving equality have been followed.

Domestic violence also occurs in complaints. However, as the Commissioner does not have the authority to provide legal protection to victims of domestic violence, nor does the institution have the possibility to provide free legal aid in the form of writing submissions and representing parties before courts and other state bodies, complainants are informed of the possibilities they can use in the proceedings involving protection from domestic violence.

Opinion: The complainant stated that she had been subjected to violence, but was informed that in her case there was insufficient evidence for the action of the competent public prosecutor. She also stated that the employees in the competent center for social work changed their behavior towards her and accused her of abusing her husband and members of his family. With full understanding of the difficult situation in which the complainant finds herself, based on the facts that she had stated, it was stated that she did not make probable the existence of a cause-and-effect relationship between any of her personal characteristics and the actions of the public prosecutor and the social work center. However, the complainant was informed about the options available to her. Namely, the fact that the public prosecutor considers that there is no evidence that the perpetrator committed the crime, does not mean that she cannot initiate criminal proceedings for committing the crime of domestic violence, by filing a private criminal lawsuit. She also has the possibility to request protection from domestic violence in civil proceedings, by filing a lawsuit for the imposition of one or more measures of protection from domestic violence (order to evict a violent family member from a family apartment or house, regardless of ownership; order to move in to the family apartment or house of the victim of domestic violence, regardless of ownership; prohibition of approaching at a certain distance; prohibition of access to the area around the place of residence or place of work; and prohibition of further harassment). If the complainant decides to file a lawsuit, but considers that she does not have the financial means, she has the opportunity to ask the court in writing to release her from paying the costs of the court proceedings and fees.

This year, the Commissioner submitted the *Special Report on Discrimination against Women* to the National Assembly, which states, among other things, that older women are exposed to multiple discrimination.

During 2015, a public hearing was organized with the Committee on Human and Minority Rights and Gender Equality on the topic of *Ageing – the years of life: from privilege to discrimination*.



Session of the Committee on Human and Minority Rights, 2015

During the meeting it was pointed out that statistics and practice show that, after Roma and people with disabilities, older people are the most discriminated against in society, and that this is not often talked about in public. It was also pointed out that the population of Serbia, according to all characteristics, with an average age of 42.2 years, can be classified under that group of countries where the process of demographic ageing is heavily pronounced, not only in Europe but also in the world. The Commissioner does not receive the number of complaints for age-based discrimination that correctly corresponds to the real situation in Serbia. Based on previous cases, it can be said that discrimination against older people most often occurs in the course of the providing of health services, or exercising rights in the field of health care, and in the field of work and employment. It was also pointed out that violence against older people is a serious problem and that almost 20% are exposed to some kind of violence - financial, emotional, physical, etc.

During this year, cooperation with civil society organizations was especially developed. Thus, with the representatives of the organization 'Power of Friendship' – AMITY, several challenges were pointed out such as: society's attitude towards older people, their particularly pronounced experience of discrimination, the lack of understanding of older people, and older people's difficulties when accessing services, especially health and social care services. The need for joint action and the organization of activities leading to the overall improvement of the position of older people was also pointed out as important.

The Commissioner, together with the Serbian Red Cross, organized a conference on the occasion of the International Day for the Elimination of Violence against Older People, entitled *How to Reduce Discrimination and Violence against Older People in Serbia*. It was pointed out at this conference that most complaints due to age discrimination were filed in the field of services, especially banking and health care; and activities were announced to abolish the concept of complete deprivation of legal capacity and reduce discrimination and violence against older people. The results of the research of the Global Alliance for the Human Rights of Older People were presented at the conference.



Conference to present the publication 'A well-kept family secret – abuse of older people', 2015

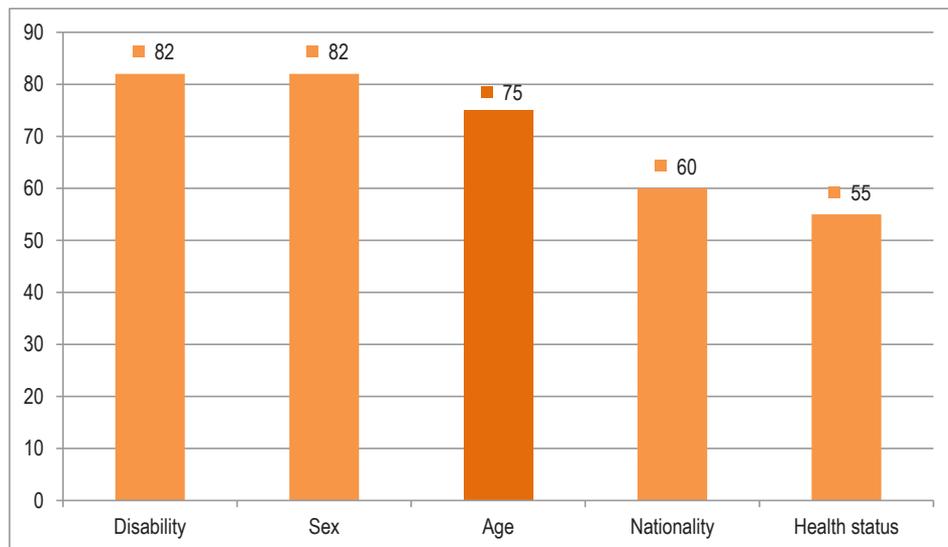
In December 2015, a conference was held on the occasion of the presentation of research on the abuse of older people and the publication *A well-kept family secret – abuse of older people*, organized by the Serbian Red Cross and the Commissioner, with the support of UNFPA. The publication defines a number of recommendations, from which the improvement of the normative framework through amendments to the laws regulating legal protection against violence stands out. At this conference, it was pointed out that special consideration should be given to amending the Criminal Code and defining a special criminal offense of neglect and abuse of the older or a qualified form of criminal offense of domestic violence, and that a strategic document on ageing should be drafted. Among the recommendations are also mandatory and continuous education of professionals from institutions responsible for resolving cases of violence, promoting SOS telephone services, developing psychosocial assistance services, as well as informing the older about their rights.

3.1.3. Actions of the Commissioner in 2016

During 2016, the number of complaints submitted to the Commissioner on the basis of age increased compared to the number of complaints on the same basis in the previous year. Age was the third most frequent basis, with 11.8% of the total number of complaints filed (75). The Regular Annual Report for 2016 states that older people are among the groups most frequently discriminated against, and among the reasons are the negative image, stereotypes and prejudices about

the unproductiveness of older people, and the attitude that they are exclusively recipients of assistance and mostly burden the people around them.

Graph 9: *Frequency of complaints on the grounds of discrimination in 2016*



The results of the public opinion poll *The attitude of citizens towards discrimination in Serbia*, in 2016, showed that respondents perceive older people and women as less discriminated against compared to previous surveys. The third group in terms of exposure to discrimination according to the results of this research are women and older people. Although it is estimated that they are significantly exposed to discrimination, there is no great social distance towards these groups, which is to be expected. Although the survey sample is not large enough to allow analysis at the level of groups at increased risk of discrimination, it shows a decrease in the confidence of rural residents and older people in institutions. Social isolation certainly contributes to reducing the trust of these groups and indicates the need to focus measures on their empowerment and the establishment of information and assistance services to citizens throughout the Republic of Serbia, which is why it is necessary to continuously implement public awareness campaigns about the problems that older people face, presenting a positive image of ageing, older people and their contribution to society.

During 2016, it was established that a large number of persons living in older people's homes were placed in these homes by the decision of their children and closest relatives, against their will. Home managements made accommodation contracts with children or other relatives, even if the older person had legal

capacity. Such conduct constitutes the gravest violation of the human rights of older persons to freedom of movement, participation and autonomous decision-making in their lives. Owing to this situation, the Commissioner sent recommendations for measures to institutions that accommodate adults and older people in the Republic of Serbia.

Recommendation of measures for achieving equality to all homes for adults and older people

During the procedure on citizens' complaints, the Commissioner found that some users of homes for older people were placed in a home against their will and were not signatories to contracts for the use of services, although they have full legal capacity, but that their relatives (mostly children) made contracts with the administration of the home. For example, a statement from a nursing home stated that the beneficiary was in the home against her will and that she '*expressed a desire to leave the home [...] However, she is incapable of independent living, which is supported by her medical findings.*'

The Commissioner recommended to homes for adults and older people in the Republic of Serbia ***that their decisions and actions when providing services to home users not be based on stereotypes and prejudices about the possibilities and abilities of older people to make decisions about their lives, especially given their age and health condition.*** Older people are exposed to the discriminatory attitudes that they are powerless, incapable of contributing to society and making rational decisions. It is an obligation to fully respect the anti-discrimination regulations of all service providers in the social protection system, both in the accommodation procedure and during the stay of users in accommodation in social protection institutions, and service providers are obliged to provide users without discrimination in accordance with the principles of the Law on Social Protection.

The Commissioner also filed a ***criminal complaint*** due to the person's stay in a home for older people without her consent and will. Namely, a civil society organization addressed the Commissioner, stating that the person is in a home for older people, that she does not have her personal documents or the key to her apartment, and that she is not familiar with the contents of the accommodation contract signed by her son. On that occasion, the Commissioner filed a criminal complaint against the director of the home for older people for the crime of unlawful deprivation of liberty under Article 132 of the Criminal Code. It was emphasized that older people are exposed to various forms of neglect or abuse,

often preceded by discrimination based on prejudices, stereotypes and ideas about the unproductiveness of older persons, as well as the image that they are passive recipients of help and a burden to society. One of the forms of abuse of older people is deprivation of the right to decide on one's way of life, which leads to restriction or deprivation of freedom of movement, and of free disposal of one's finances, choice of place of residence, and manner of treatment.

Opinion: In the complaint against the Government, the applicant stated that the amount of pension was calculated earlier taking into account the average for 10 years in which the pension was highest, as well as the level of education, i.e. qualifications, and that by 2014 the pension was increased several times, and that on one occasion it was increased by as much as 10%. It was pointed out that in order to acquire the conditions for retirement, it required fewer years of life and work experience than now, and that such a decision is discriminatory.

Having in mind that according to the Law on Temporary Regulation of the Manner of Payment of Pensions, the pension is reduced to certain categories of pensioners and applied to current and future pension beneficiaries, which means that it applies to all pensioners of a certain category, without making a difference based on when the person acquired the conditions for retirement, it is obvious that there is no violation of rights in terms of the Law on Prohibition of Discrimination; because in the described situation there was no unjustified distinction, i.e. unequal treatment of the complainant based on her personal characteristics – age.

During the year, citizens addressed the Commissioner with complaints in which they pointed out discrimination in the field of work and employment, which is the area with the largest number of complaints filed since the beginning of the work of the institution. When it comes to older people in this area, complaints are most often filed in the situation of termination of employment, but it is not uncommon for workers over 50 to be considered 'older'. Employers often lay off older workers, immediately before their acquiring the conditions for retirement, and older unemployed workers fail to get a job despite their work experience. Examples from the Commissioner's practice show that the consequence of the stereotype about older workers is the assessment of employers that older people are less able to work and 'less productive' - often alongside the employer's economic assessment that a 'younger' worker costs less, if we take into account past work, pension and health insurance and other liabilities. We should have in mind that financial and social security in older age is directly linked to current and past labor market participation. Decent work and fair earnings during the working life enable a dignified older age.

Opinion: The complaint was filed against the Ministry of Health due to its decision not to conclude agreements with employees in health care institutions on the extension of employment after the termination of employment of employees who have reached 65 years of age and acquired at least 15 years of insurance. The complainant considers that he has been discriminated against in relation to persons who have established an employment relationship with a primary or secondary school, so they can have a longer insurance period up to their 65th year of life.

After reviewing all relevant facts, the Commissioner found that there was **no difference or unequal treatment in any personal capacity** of the complainant, and therefore in this case there is no violation of rights under the Law on Prohibition of Discrimination, bearing in mind that some persons at the age of 65 have a longer or shorter insurance period, which is not related to any personal characteristics of the insured, but to the time period of payment of contributions to the pension and disability insurance fund, and that the employer did not express the need to conclude an extension of employment agreement, which refers to all persons employed in health care institutions, regardless of personal characteristics.

Opinion: The complaint against one hospital stated that an internal advertisement for specializations was published and that the selection of candidates was made on the basis of existing regulations which prescribe the criteria for referral to specialization, namely: average grade, grade from the subject – area – branch of medicine, length of study, length of service and work characteristics in the institution. With the amendments to the rulebook, the criterion ‘performance in the institution’ was replaced by the criterion ‘age’. The analysis of the prescribed criteria showed that the age of the candidates is the only criterion that does not refer to the professional abilities and achievements of the candidates, and during the procedure it was determined, considering the way of scoring, that the older candidates are obviously placed in an unequal position. **Setting criteria related to the candidate’s age is not justified, because age is not a real and decisive condition for referral to specialization**, considering both the nature and characteristics under which the specialist internship is acquired, and the conditions under which it is performed. Therefore, the opinion was given that by applying the criteria related to age, all older candidates were discriminated against on the basis of a personal characteristics - age, and the hospital was recommended to remove from the rulebook the criterion for referral to specialization related to the age of candidates,

to publish this on the bulletin board and to take care in the future not to violate the provisions of the Law on Prohibition of Discrimination.

In addition to the above, during 2016 one of the problems faced by women in general was especially pointed out, namely the way they are presented in some media in a disparaging way, and through their physical appearance, not expertise, as incompetent and inferior. The Commissioner pointed out the existence of this problem in the *Handbook for Journalists – Struggle for Equality*.²⁵² This attitude of a number of media is a challenge to the work of the Commissioner, because although in some segments there is a shift in reporting, a number of media are still not interested in the problem of discrimination, and texts and articles encourage further spread of stereotypes, prejudices and discriminatory attitudes. It was also emphasized that one of the goals and principles of regulating relations in the field of electronic communications is to ensure the availability of universal services to all citizens in the Republic of Serbia, while meeting the needs of specific social groups, including people with disabilities, the older and socially vulnerable users.

The Handbook for Journalists – The Struggle for Equality refers to the need for objective information, i.e. meeting the needs for informing all parts of society without discrimination, and taking special care of socially vulnerable groups, such as children, youth and older people.

During 2016, a large number of complaints were submitted to the Commissioner, in which several personal characteristics were stated. These data indicate an increased level of awareness among citizens that in some situations discrimination is based on several grounds. Most complaints indicated age, gender, disability, marital and family status, health status, membership of political, trade union and other organizations, and property status. The increase in the number of complaints does not mean that in all cases there is indeed multiple discrimination, given that complainants sometimes list several personal characteristics, especially in situations when they are not sure which of their personal characteristics was the basis for discrimination.

Opinion with recommendation: The complaint was filed in the name and with the consent of the Mayor of Smederevo, Dr. Jasna Avramović, owing to the statements made by Perica Đorđević, Councilor of the

252 *Handbook for Journalists – Struggle for Equality, Commissioner for the Protection of Equality*, Belgrade 2016, available on the website: ravnopravnost.gov.rs/wp-content/uploads/2017/01

Assembly of the City of Smederevo, at its session on December 24, 2015. According to the allegations from the complaint, the counselor stated on that occasion: *'It would be good for the mayor to be A. P., young and honorable, instead of a bloated and hysterical grandmother.'*

In the procedure, it was determined that the councilor insulted and belittled the mayor on the basis of her personal characteristics - gender and age. ***The councilor expressed his position through stereotypical and traditional gender roles, the prism of gender and age, according to which a woman, regardless of her expertise and professional achievements, can be described as a 'grandmother' or as 'hysterical'*** if her work and statements are not in accordance with the values of the other person. The Commissioner issued an opinion that the provisions of the law were violated, and the councilor was recommended to send a written apology within 15 days from the day of receiving the opinion with the recommendation, and to take care not to violate legal regulations on prohibition of discrimination.

This recommendation has not been followed.

During the year, the Commissioner also submitted the *Initiative for the amendment of the Criminal Code*, namely Article 179, which prescribes the criminal offense of sexual abuse against a helpless person. Namely, for the criminal offense of sexual abuse against an incapacitated person (Article 179, paragraph 1), a sentence of imprisonment of two to ten years is threatened for someone who commits rape or an act equal to it using mental illness, mental retardation, another mental disorder, weakness or any other condition of that person, due to which s/he is not capable of resisting. At the same time, the criminal offense of rape (Article 178, paragraph 1) is punishable by imprisonment from three to twelve years for whoever forces another person to commit rape or an act equivalent to it by using force or threatening to directly attack the life or body of that person or someone who that person cares about. The Commissioner submitted this initiative bearing in mind that in both cases the act of execution is the same – rape or an act equated with it, and that the difference appears only in terms of the personal characteristics of the passive subjects. In the first case it is a person who, due to their mental illness, mental development retardation, other mental disorders, weakness, or any other condition, is not capable of resisting which is, essentially, violent intercourse (absence of resistance to intercourse on the part of the passive subject because of the inability to resist, certainly does not imply absence of coercion during intercourse, i.e. violation of free will consent). Only the personal nature of the passive subject makes

the manner of executing the act different (in the first case, executing rape by exploiting weakness, in the second case, coercion).

In 2016, the cooperation with the Serbian Red Cross continued through the ‘The position of older people in rural areas’ study, with the financial support of the United Nations Population Fund (UNFPA). One of the key project activities was the jointly realized *The position of older people in rural areas* research study, which will be discussed in more detail below. The results of this research are important for setting guidelines and priorities in creating and conducting public policies in these social areas in the coming period.



Photo taken during the training of participants for research on the position of older people in rural areas, 2016

Within the cooperation with the Foundation for Open Society, and on the occasion of the International Day of Older People, the Commissioner regularly organizes a prize competition for the best literary work, artwork and photography, named *Bridge of Understanding – Intergenerational Solidarity*. The right to participate in the competition is enjoyed by students of 6th, 7th and 8th grade elementary schools from the Republic of Serbia, who through the appropriate form of artistic expression give their vision of intergenerational solidarity, thus contributing to raising awareness of the position of older people and the fact that age must not be an obstacle to a dignified and quality life. The event on the occasion of the International Day of Older People and the award ceremony are organized in cooperation with various institutions, such as the National Assembly and the Red Cross, while the concept of the event itself changes from year to year. Thus, in cooperation with the National Assembly of the Republic

of Serbia, the event was organized on several occasions within the ceremonial session of the Committee on the Rights of the Child, while the winners of the competition were awarded by the Speaker of the National Assembly, ministers and parliamentary committee chairmen.

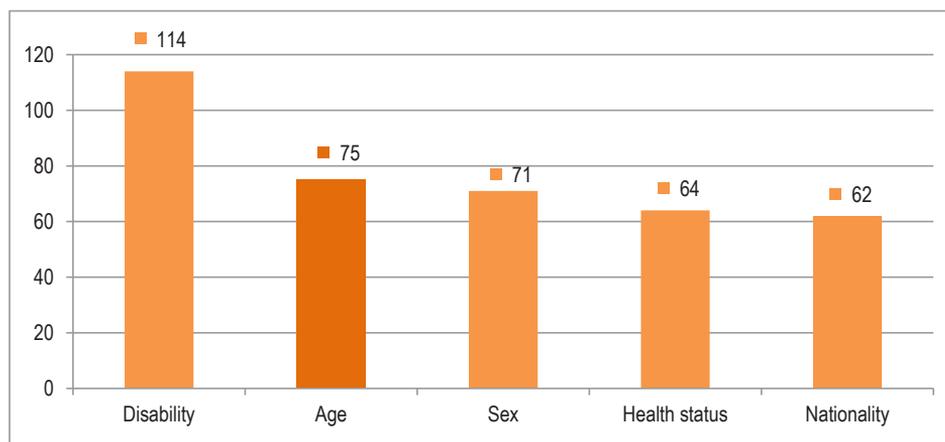
A conference entitled *Years are just a Number – Let's show intergenerational solidarity* was also held, at the Children's Cultural Center. The purpose of marking this day was to raise awareness of discrimination against older people, as well as the problems faced by this part of the population. The conference was covered by the media, and was attended by over 400 students from primary and secondary schools in the city of Belgrade and users of the services of the Gerontology Center Belgrade. After the conference, the play **Etiquette of Ageing** was performed.

A conference *Let's not close our eyes: Stop the abuse of older people* was organized by the Commissioner and the Red Cross in 2016, on the occasion of June 15, the International Day for the Elimination of Violence against Older People. In the same year, the publication *Collection of works of students* was published. It is a collection of works by students in the field of protection against discrimination, who with their essays participated in the Commissioner's competition within the project financed by the Open Society Foundation Serbia. The essays were created out of the wish and need not to talk about older people in Serbia only from the perspective of the years, and not only on their day, October 1, but to talk about their position from the angle of intergenerational solidarity.

3.1.4. Actions of the Commissioner in 2017

Discrimination based on age was also present during 2017, and in terms of the number of complaints, this basis was in second place for frequency, with the same number of complaints as in 2016 (75) and a share of 11.8% of the total number of complaints. Of the total number of complaints filed because of age discrimination, 33.3% of complaints were filed for discrimination against people over 65 years of age.

Graph 10: Frequency of complaints on the grounds of discrimination in 2017



Despite numerous efforts, stereotypes and prejudices related to age are still visible in practice, which is also evident in the complaints submitted to the Commissioner. An example is the complaint against the newspaper article 'Old Voters'.

Opinion with a recommendation: In the procedure regarding the complaint of the Gerontological Society of Serbia regarding the article entitled 'Old Voters', published in a daily newspaper, which, among other things, calls for the abolition of voting rights for people over 65, who are stated to be *'poor, miserable and dissatisfied'*, and always to vote for *'despotically oriented candidates'* – in order to prevent that, *'the right to vote for the older should be restricted'* – **the Commissioner was of the opinion that the article expressed attitudes that were disturbing and humiliating and insulting to older people's dignity**, i.e. that the provisions of the Law on Prohibition of Discrimination had been violated. The editor-in-chief of the daily was recommended to publish an apology to older people in that daily within 15 days of receiving this opinion, with the additional recommendation, as well as not to publish articles insulting the dignity of the older generation in the future, to contribute to changes in patterns, customs and practices that condition stereotypes, prejudices and discrimination against older people.

These recommendations have been followed.

During 2017, an increase in the number of complaints filed owing to multiple discrimination was noticed, and thus an increase in the number of opinions issued in cases of discrimination based on several personal characteristics. In most of these complaints, age and disability were cited as among the grounds for discrimination, in connection with inaccessibility.

Opinion with a recommendation: The complaint states that the entrance to the bank's branch is not accessible, not only for people with disabilities who use wheelchairs, but also for other people with limited mobility, older people, and for parents with children in wheelchairs. The bank stated, among other things, that the business premises were rented from the Public Company for Shelters, that the bank did not ask for consent for the installation of the ramp, and that it did not know who the owner was. During the procedure, it was determined that the entrance to the bank's branch space was not accessible and that the bank had not undertaken activities to ensure the availability of services, and ***that the failure to ensure accessibility is contrary to the law.*** The Commissioner issued an opinion and recommended that the bank take action to ensure the accessibility of its entrances and its services.

This recommendation has been followed.

During this year, the Commissioner received a complaint from a person stating that he had been informed by the branch of the Pension and Disability Insurance Fund that he had no right to submit a request for a family pension because he did not meet the requirements of Article 28a of the Law on Pension and Disability Insurance. The complainant stated that he and his wife had been living together for thirty years, 28 years of which were in an extramarital union and less than the last two years in a marital union registered in the municipality (the wife passed away three days before the end of two full years of marriage). Starting from the fact that the provision of Article 28a of the Law on Pension and Disability Insurance requires additional conditions for persons who have decided to marry insured persons who have reached 65 years of age, the Commissioner submitted a proposal to the Constitutional Court to assess the constitutionality of this provision, having in mind that the right to a survivor's pension is unjustifiably denied to certain persons on the basis of the personal characteristics of their spouse (the deceased insured person) – their age at the time of marriage. In this regard, the Commissioner pointed out that by imposing additional conditions for persons who have decided to marry insured persons who have reached 65 years of age – conditions which relate to the duration of the marital union, i.e. the condition of having to have a child with the insured

deceased person – these persons are placed in an unequal position only because they married a person who had reached the age of 65.

Deciding on the Commissioner's proposal, the Constitutional Court, by Decision No. Iuz-130/2017 of 19 June 2019, determined that the disputed provision of Article 28a of the Law on Pension and Disability Insurance, in the part that reads: „early old-age or disability pensions at the time of marriage reached the age referred to in Article 19, paragraph 1 of this Law ‘, is not in accordance with the Constitution, and that it ceases to be valid on the day of publication of the Constitutional Court Decision in the ‘Official Gazette of the Republic of Serbia’.

Bearing in mind that, in the previous period, there was a noticeable increase in the number of complaints due to age discrimination, the Commissioner, in cooperation with the Serbian Red Cross, conducted two surveys on the position of older people in the Republic of Serbia in 2017, that are discussed in detail later in this report. In the research *Ageing in Cities – Challenges of Modern Society*,²⁵³ the aim was to examine the needs of older people in urban areas, and offer recommendations for improving the quality of their lives, as well as to highlight and promote examples of good practice.

On the occasion of the International Day for the Elimination of Violence against Older People, the Commissioner issued a **Statement** in which she pointed out that age must not be an obstacle to a dignified and carefree life and that violence against older people is present in our society, although it usually remains hidden within the family.

In order to protect older people from abuse and violence, it is very important to constantly educate employees in the social and health care system, the police, and the judicial system. The key factor for the prevention of violence against older people, but also for the relationship of respect and understanding, should be the educational system where, among other things, the younger generation will be educated in the spirit of intergenerational solidarity and tolerance.

The **Position of older women in Serbia** study was conducted by the Commissioner with the support of the United Nations Agency for Gender Equality and Women's Empowerment – UN Women. This research indicates that older women point to the poor socio-economic situation as the biggest problem (54%),

253 *Ageing in cities – challenges of modern society*, Serbian Red Cross, 2018, available on the website: <https://www.redcross.org.rs/media/5214/starenje-u-gradovima-izazovi-savremenog-drustva-ebook.pdf>

and state that the availability and quality of health services are also a significant problem. As many as 86% of women believe that health workers treat them with less respect compared to other patients, due to age.



On the occasion of the European Day of Intergenerational Solidarity, the users of all homes and clubs of the Gerontology Center Belgrade presented a recognition to the Commissioner for her contribution to improving the living conditions of the older persons, and the sculpture 'Tree of Intergenerational Cooperation'.

The tree was created as part of a creative workshop at the Festival of Intergenerational Cooperation 'Okej', and is a symbol of different modes of cooperation and solidarity of young and older citizens.

Within the cooperation with the Red Cross of Serbia, the role and competencies of the Commissioner were presented at the forum *Decent Ageing* at the Autumn Health Festival, as well as at the conference *Social Inclusion of Older People – a factor in the development of society*. Also, the Commissioner has been supporting the competition for the Dragan Award for the best travelogue by an older person for several years, which is organized by Amity and the Penzin portal.



The Commissioner also presented her work at the Third Age Fair in Belgrade. At the stand, visitors had the opportunity to find out what discrimination is, and how to recognize and report it. On that occasion, the Office for the Health of Older People, the City Institute for Public Health

in Belgrade and the magazine „Penzija” ('The Retirement') awarded a status charter 'Friend of the Health of Older People' to the Commissioner for her contribution to combating discrimination against older people.



Talks were held with the Ambassador of the Kingdom of Belgium, Leo Daes, the founder and Director of the *Hospices of Hope* humanitarian organization, Graham Perols, and the Director of the Bel Hospice Palliative Care Center, Vera Madžgalj, with regard to solving the problems of

citizens and their families in need of palliative care. The development of social-health and other services from these two systems were also discussed. The Commissioner is an honorary member of the Bel Hospice Palliative Care Center.

On the occasion of marking October 1 – International Day of Older People, in 2017, the Commissioner announced a competition on the topic ‘Bridge of Understanding – Intergenerational Solidarity’, and awarded prizes for the best literary work, art and photography.

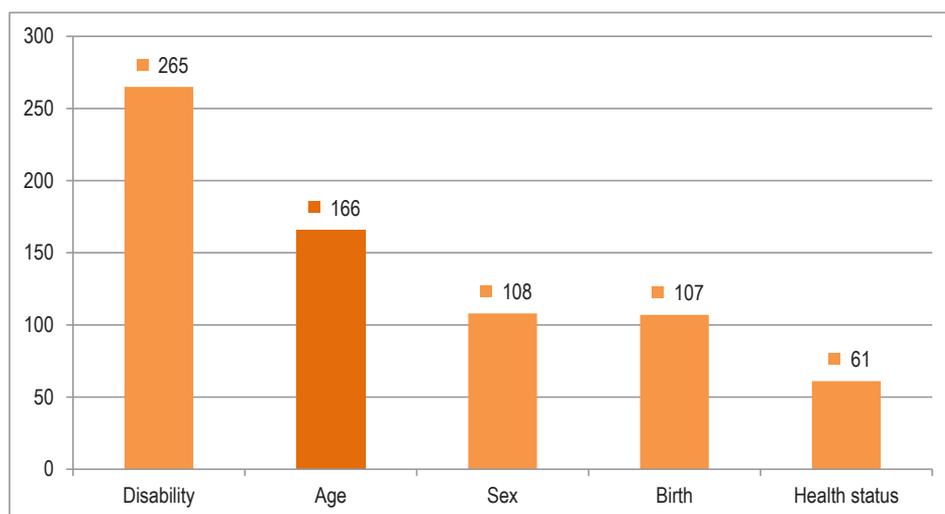


Ceremony marking the International Day of Older People, 2017

3.1.5. Actions of the Commissioner in 2018

During 2018, age as the basis of discrimination was in second place in terms of frequency, with 16.5% of the total number of submitted complaints, after complaints due to discrimination based on disability. Age as basis for discrimination is found in 166 complaints, and this number is more than twice the number of complaints filed in 2017. The increase in the number of complaints based on age was primarily influenced by the number of complaints filed due to discrimination against children with the application of the provisions of the Law on Financial Support to Families with Children. Of the total number of complaints filed on the basis of age, 7.8% of complaints were filed with regard to discrimination over the age of 65.

Graph 11: *Frequency of complaints on the grounds of discrimination in 2018*



Working on complaints and reviewing the situation by using available data, the unfavorable position of citizens older than 65 years is evident, and despite their numerous problems they still turn to the competent authorities less often. The problems faced by older persons include, in addition to the uncertain availability of health and social care services, a large number of physical, social and economic barriers, and ingrained prejudices and stereotypes, but also the lack of inclusive public policies involving all ages and groups in the planning and development of residential areas. During the year, there was a problem related to the expertise in the procedure of exercising the right to disability pension and the expertise in the assessment of working ability and possibility of employment or maintenance of employment, which is why the recommendation was sent to the Republic Pension and Disability Insurance Fund.

Recommendation of measures for achieving equality to the Republic Fund for Pension and Disability Insurance

The Commissioner has learned that there is a possibility that in practice there may be a case in which the RF PIO (National Fund for Retirement and Disability Insurance) expert body, in two different proceedings initiated at the request of the same person, i.e. the procedure for exercising rights in the pension and disability insurance system and the procedure for exercising rights under the Law on professional rehabilitation and employment of persons with disabilities, adopts a finding, assessment and opinion in accordance with which the same person is NOT eligible to exercise the right to a disability pension, but, at the same time, in the process of assessing working capacity, the same person is assessed as a person who can be employed under general or under special conditions.

In this way, the person is placed in a position in which she/he cannot be employed, but at the same time cannot exercise the right to a pension on the basis of loss of working ability. Therefore, the Commissioner has recommended that the RF PIO take all necessary measures in order to ensure coordination between the expert bodies.

The RF PIO has established close cooperation with the National Employment Service, which includes the exchange of information and additional control of solutions, and it is agreed to prepare proposals for amending the relevant bylaws and to hold a consultation of medical experts on this issue. It was specifically agreed that the fact of previous expertise must be indicated when submitting a request in these proceedings.

Citizens also addressed the Commissioner regarding discrimination in the procedure of work and employment, especially in relation to certain rights of 'older' workers.

Opinion with recommendation: In the complaints of several persons against the Acting Director of the General Hospital in Prijepolje, on grounds of age discrimination, it is stated that the complainants were assigned to lower positions because of the annexes to the employment contract, allegedly due to the reorganization procedure, and that the Acting Director said that one of the reasons was that, owing to age, they are not able to learn new electronic technologies nor operate digital databases that are being introduced into healthcare.

During the proceedings, it was established that the complainants, when signing the annex to the employment contract, were over 50 years old, while one complainant was 42 years old. The Commissioner gave the opinion that the Acting Director violated the provisions of the Law on Prohibition of Discrimination, and he was recommended to take all necessary measures within his competence in order to eliminate the consequences of discriminatory treatment, and to stop the violation of anti-discrimination regulations in the future.

The recommendation was not followed, so the public was informed in accordance with the law.

In dealing with complaints, it was noticed that health status, as one of the reasons for discrimination, most often occurs with multiple discrimination, in combination with disability, age and genetic characteristics discrimination. During 2018, one of the reasons for addressing the Commissioner was to point out the need to adopt standards of social and health care services, i.e. to improve palliative care. In this regard, the Commissioner sent a recommendation of measures to the Ministry of Labor, Employment, Veteran and Social Affairs, as well as the Ministry of Health, regarding improving social and health services, of special importance for older people and their quality of life.

Recommendation of measures for achieving equality of persons who need palliative care due to their specific social and health status

The Commissioner sent recommendations to the Ministry of Health and the Ministry of Labor, Employment, Veteran and Social Affairs, in order to install conditions for providing services to users who, due to their specific social and health status, need social care and constant health care or supervision, especially prescribing standards for provision of services in accordance with the provisions of Article 60, paragraph 3, of the Law on Social Protection.

The Ministry of Health was also recommended to take measures and pursue activities within its competence with the aim of further development and improvement of the system of palliative care of patients and providing support to their families throughout the Republic of Serbia, and especially to comprehensively review the current situation in the Republic of Serbia, and in accordance with their capabilities take measures and pursue activities so that patients and their families are adequately covered to the extent necessary by this type of support.

The Ministry of Labor, Employment, Veteran and Social Affairs informed the Commissioner that it had formed a Working Group to draft amendments to the Law on Social Protection, and that the problem pointed out by the Commissioner would be analyzed within this working group. The Ministry of Health did not inform the Commissioner about the activities undertaken.

In addition, the need to improve social and health care services was pointed out when giving an opinion on the Draft Law on Amendments to the Law on Social Protection, given that the Draft Law on Amendments to the Law on Social Protection provides for deleting the provision relating to this type of service. In addition to this recommendation of measures, the Commissioner also sent a recommendation of measures for achieving equality, which refers to snow clearance in all streets, especially in those where people with limited mobility, persons with disabilities and older persons live. In addition, during 2018, the Commissioner sent an initiative to the Ministry of Labor, Employment, Veteran and Social Affairs to amend the Law on Social Protection.

Initiative to amend the Law on Social Protection

The Commissioner sent an Initiative to the Ministry of Labor, Employment, Veteran and Social Affairs to relax the conditions for exercising the right of older persons to material support, bearing in mind that due to the prescribed restrictions on land area, a large number of citizens cannot exercise financial social assistance, or have difficulty exercising this right and need help. Older persons' households are particularly affected by this, as they have a larger land area than prescribed, and the land is mostly of poor structure and not suitable for cultivation, which is why they are without the possibility of receiving support.

The Ministry of Labor, Employment, Veteran and Social Affairs informed the Commissioner that it had formed a Working Group to draft amendments to the Law on Social Protection, and that the problem pointed out by the Commissioner would be analyzed within the work of this Working Group.

Also, the Commissioner sent an ***Initiative*** to the National Health Insurance Fund ***to change the List of Aids***, by harmonizing it with Article 59 of the Rulebook on medical-technical aids provided from the funds of compulsory health insurance. Namely, Article 59 of the mentioned Rulebook prescribes that

an insured person who has mutual permanent hearing loss over 40 decibels, i.e. 65 db in at least two examined frequencies of the speech area (1000-4000), is entitled to an appropriate hearing aid (amplifier), if it achieves a satisfactory level of speech communication and auditory rehabilitation. On the other hand, the List of Aids (Table 1) under item number 5 – Hearing aids under code 192 - narrows the circle of persons who are allowed to exercise the right to a hearing aid if they have permanent mutual hearing loss over 40 db – which includes at least two examined speech frequencies 1000 - 4000 Hz - if the device is necessary for performing occupational activities on the basis of which the person is health insured, i.e. excludes persons who need this device but who do not perform occupational activities on the basis of which they are health insured. Amendments to the Rulebook and the List as its integral part were adopted and harmonization was performed, but the existing restriction was not abolished; only the provision of the Rulebook covering the narrower circle of persons was changed.

Regarding the proceedings on numerous complaints submitted due to the inaccessibility of certain facilities designated for polling stations, a proposal was made to conduct mediation with representatives of the Center for Independent Living of Persons with Disabilities, and the City Election Commission, Vračar and Savski Venac. Namely, the Center for Independent Living of Persons with Disabilities submitted a complaint to the Commissioner for the Protection of Equality due to the inaccessibility of certain facilities that were designated for polling stations in the last city elections. After that, a proposal for mediation was accepted, which proved to be a good and efficient way of resolving disputes, and an Agreement on Understanding was reached regarding ensuring accessibility of both polling stations and adapted election material, which is a precondition for independent and equal participation in political and public life.

In 2018, the European Commission adopted Recommendations on Standards for Equality Bodies to ensure the independence and improve the efficiency of these bodies. This Recommendation sets standards relating to the mandate of equality institutions, their resources and corresponding powers. National equality bodies are a central element of the institutional system for the protection of equality, public institutions established throughout Europe in accordance with EU legislation to promote equality and combat discrimination.

Vera Jurova, European Commissioner for Justice, Consumers and Gender Equality, said on that occasion that discrimination has no place in the European Union, which is why it is necessary to ensure the independence of these bodies, because they represent the guardians of justice and equal opportunities for all citizens. According to her, equality and the principle of non-discrimination are key values of the European Union and are vital for the development of any society.

The Commissioner's research *The attitude of representatives of public authorities towards discrimination in Serbia*, from 2018, includes contributions from representatives of the judiciary, executive and legislative authorities, and the results of this research showed, among other things, that the largest number of public authorities believe that people with physical disabilities and intellectual disabilities are most discriminated against, then the poor, then older persons, people of Roma ethnicity, then other social groups.



During 2018, the Commissioner again supported the competition for the best travelogues by an older person, the Dragan Award, which is being organized for the fourth year in a row by the Power of Friendship Association – AMITY. The goal of this competition is to promote active ageing and to create a space for exchanging experiences,

knowledge, beauty and challenges of ageing and wisdom of older persons. The awards are given in various categories, such as Women's Travel Story, Story of Traveling in Serbia and Travel Song.



During the year, the Tenth Jubilee International Gerontology Congress was held, which gathered more than 200 experts from Serbia, Southeast European countries, the European Union and the United States, as well as equality institutions and ombudsmen from Southeast Europe. In the ceremonial part of the Congress, the President of

the Committee for Human and Minority Rights and Gender Equality, Meho Omerović, the President of the Gerontological Society of Serbia, Dragana Dinić, the representative of the UN Population Fund in Serbia, Marija Raković, and the President of the International Network for the Protection of Elder Abuse, Susan Somers, spoke. In the plenary part, a special panel was dedicated to the role of independent institutions in the protection of older persons, in which, in addition to Commissioner Janković, the Ombudsman, Lora Vidović, the Protector of Human Rights and Freedoms of Montenegro, Šučko Baković, the Human Rights Ombudsman of Bosnia and Herzegovina, Ljubinko Mitrović, and the Gender Equality Ombudsman of the Republic of Croatia, Višnja Ljubičić, participated. Also, the Commissioner was presented with the 'Petar Manojlović' annual award for the contribution to the improvement of the position of older

persons in Serbia, which is awarded by the Gerontological Society of Serbia. Susan Somers, President of the International Network for the Protection of Elder Abuse, discussed global trends in the field of protection of the rights of older persons, as well as the need for a new, special United Nations convention for the protection of older persons.

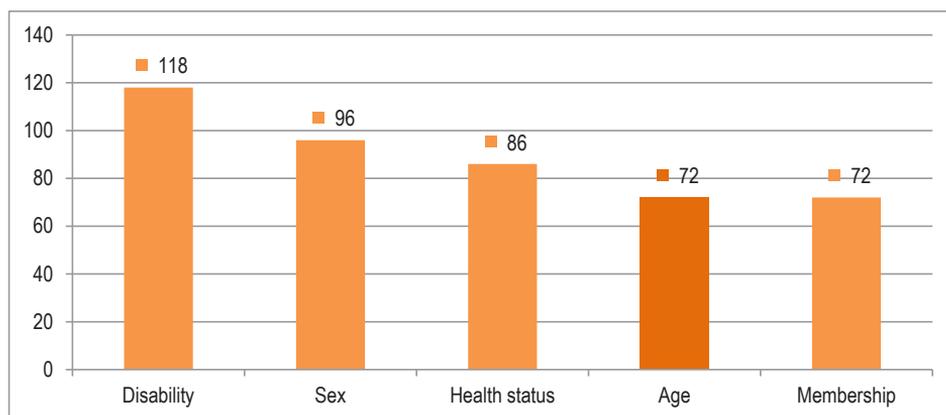


The award competition *Bridge of Understanding – Intergenerational Solidarity* was held in 2018, and the awards were given to the participants at the ceremony held on the occasion of marking October 1 – International Day of Older Persons.

3.1.6. Actions of the Commissioner in 2019

In 2019, age was in fourth place in terms of the frequency of number of complaints, which makes 9.9% of the total number of submitted complaints (72). The number of complaints addressed to the Commissioner due to age discrimination in 2019 was less than the number of complaints filed in 2018, but almost identical to the number of complaints filed on this basis in 2017. The increase in the number of complaints in 2018 was influenced by the large number of complaints filed due to discrimination against children regarding the application of the provisions of the Law on Financial Support to Families with Children. In 2019, the largest number of complaints (43%) related to discrimination against persons over 65 years of age. Older persons continued to address the Commissioner mostly in person, while complaints from civil society organizations on their behalf are rare.

Graph 12: Frequency of complaints on the grounds of discrimination in 2019



The complaints mainly point out that the inaccessibility of public facilities and areas, as well as services, is a major obstacle to the equal inclusion of people over the age of 65, and people with reduced mobility, as well as people with disabilities.

Opinion with recommendation: In the complaint procedure stating that unobstructed access to the building in which the museum exhibit is located was not provided, it was established that the museum, as a legal entity that uses and manages cultural property, did not provide accessibility of cultural property to all persons with reduced mobility, which violated the provisions of the Law on Prohibition of Discrimination. Therefore, the museum was recommended to take measures in order to ensure accessibility, as well as not to violate anti-discrimination regulations in the future.

The museum informed the Commissioner that a project is underway which envisages the reconstruction of the hall and the 'functional reorganization' of the entrance space, and that the realization of the project will take place in the next two years.

Regarding the accessibility of public facilities and areas, in addition to dealing with complaints, the Commissioner sent a large number of recommendations for measures to achieve equality during the year, stating that the inaccessibility of facilities often leads to the complete impossibility of providing certain services, which further complicates life for older persons.

Recommendation of measures for achieving equality to the Republic Election Commission

Acting on the citizens' complaints, it was noticed that in the previous election procedures, there were polling stations that were not accessible to persons with disabilities and other persons who had difficulty moving on the day of the elections. Namely, polling stations were located in buildings with physical barriers (on a higher floor without an elevator, with heavy entrance doors, stairs, etc.) as well as in buildings to which access is extremely difficult (e.g. extremely steep and high doorsteps, narrow passages, unsecured parking space for people with disabilities, etc.). In accordance with the law, the National Election Commission determines polling stations on the proposal of local self-governments and is competent to prescribe more detailed rules on the work of the polling station committee, as well as more detailed rules regarding polling stations. Therefore, the Commissioner recommended that when adopting instructions for conducting elections, the National Election Commission especially point out the need to propose polling stations that are accessible, and that local self-governments are obliged to propose facilities that meet these standards.

Acting on the recommendation of measures, the National Election Commission undertook measures and activities in order to improve the accessibility of the election process for persons with disabilities, and informed the Commissioner that, among other things, it passed the Decision on assessing the accessibility of polling stations in the Republic of Serbia, which includes collecting data on the accessibility of facilities where polling stations are located, analyzing the collected data and determining or proposing measures for improvement.

During 2019, the Commissioner sent several (169) recommendations of measures for achieving equality to the centers for social work regarding the increase in the number of initiated proceedings for deprivation of legal capacity. In addition, it has been noticed in practice that often older users are completely excluded from the procedure related to the exercise and protection of their rights. In one specific case, the Center for Social Work appointed a temporary guardian for an older beneficiary and initiated a procedure for depriving her of legal capacity without informing and involving the beneficiary. On that occasion, her needs and interests were neglected only because she was an older person with a deteriorating health condition, which did not take into account that she was capable of 'normal' reasoning and able to take care of herself and protect herself and her rights and interests. In addition, the reason for this recommen-

dition was the fact that even when these persons address the Commissioner, very often in the further course of the procedure they withdraw the complaint or do not decide to initiate the procedure even after they are welcomed into the Commissioner's Reception Office.

Recommendation of measures for achieving equality to the centers for social work

The Commissioner recommended to all centers for social work, when making a plan for providing social protection services for older users, and especially when assessing the need to appoint a temporary guardian and initiate proceedings to deprive these persons of legal capacity, ***their decisions should not be based on prejudices and stereotypes about their capabilities and ability to protect and represent their rights and interests, given their age and health, but on a focused, balanced and impartial assessment of the circumstances of the case and full application of the principles of least restrictive intervention and environment, as well as respect for the personality and dignity*** of older users, in order to achieve or maintain their optimal level of psychophysical and social functioning. In addition, the centers were recommended to inform all employees about this recommendation of measures.

Three centers for social work (Kovin, Tutin and Valjevo) did not inform the Commissioner about acting on the recommendation, while other centers took measures.

Opinion with recommendation: The complaint against the Center for Social Work states, inter alia, that the complainant is an older person, without close relatives, who is accommodated in a private home for older persons; and that the Center for Social Work has appointed a temporary guardian for her but she was not informed about the effect of the decision, nor was a decision delivered to her; that she submitted a request to be allowed to tour the apartment in which she lived until she was placed in a home, but the Center for Social Work prevented her from doing so.

From the presented evidence, it was concluded that the Center for Social Work made decisions based on stereotypes and prejudices towards the ward as an older person, who is also in poor health. Of particular concern is the allegation in the decision to appoint a temporary guardian that the complainant *'is unable to protect her rights and interests'*, i.e.

that she is *'incapable of expressing her will'*, bearing in mind that, in the opinion of the neuropsychiatric expert, this meant *'moral and abstract judgment, capable of reasoning in the essential matters of its existence.'* The Commissioner gave the opinion that the provisions of the law had been violated and recommended that the center take all necessary measures to eliminate the consequences of discriminatory treatment of the complainant, and to allow her to visit the apartment where she lived until she was placed in a nursing home, as well as not to make decisions that violate anti-discrimination regulations in the future.

The Center for Social Work informed the Commissioner that the user of the home was enabled to visit the apartment in which she lived until she was accommodated in the home, and to take the personal belongings she wanted from it.

Discrimination on the basis of age also occurs in cases of exercising other rights and services. Thus, an insurance company refused to provide travel insurance services to the complainant owing to her age. The statement on the complaint indicates that insurance companies have not only the right but also the legal obligation to identify, measure and assess the risks to which they are exposed in their business and to manage these risks by applying a qualitative and quantitative management method, and to establish procedures for identifying, assessing and measuring risks, as well as managing them. In this regard, the Commissioner pointed out that it is indisputable that this insurance company, like all other insurance companies, is authorized to determine the conditions of insurance by which it regulates its business, but that all acts of insurance companies must be harmonized with the Constitution and legal regulations, both those in the field of insurance and other regulations of the Republic of Serbia, including regulations prohibiting discrimination. In this particular case, it is obvious that persons over the age of 80, who want to be insured during their travel and stay abroad, are prevented from doing so, since this insurance company does not provide insurance services for persons over the age of 80 during travel and stay abroad. The Commissioner was of the opinion that by refusing to provide the complainant with insurance services during travel and stay abroad, this insurance company violated the provisions of the Law on Prohibition of Discrimination, and recommended to harmonize the General Conditions for Insurance of Persons during Travel and Stay Abroad, by prescribing the possibility of insurance for persons over 80 years of age. The Insurance Company informed the Commissioner that it had acted on the recommendation and amended the General Conditions for Insurance of Persons during Travel and Stay Abroad.

Having in mind that the Commissioner's practice has shown that some advertisements supported patterns of behavior based on the idea of gender subordination or superiority, and that advertisements in which older persons are mostly portrayed as helpless, sad, sick and without capacity for quality and meaningful life, in 2019, the Commissioner also sent a recommendation of measures to marketing agencies.

Recommendation of measures for achieving equality to marketing agencies

The Commissioner, in the proceedings on citizens' complaints, noticed that certain marketing agencies, when providing services of creating advertising content for clients, produce content that supports prejudices and stereotypes or that insults the dignity of a group of people based on their personal characteristics. ***Some advertisements supported patterns of behavior based on the idea of gender subordination or superiority, or stereotypical gender roles, and it is not uncommon for advertisements to appear in which older persons are mostly portrayed as helpless, sad, sick and without capacity for quality and meaningful life.***

The Commissioner pointed out that advertisements are one of the most widespread forms of media products, that they shape the behavior of society and individuals and inevitably influence the behavior of the customer/consumer. It is not uncommon for women to appear in some commercials as housewives, or as the only parent who knows how to change a diaper, iron clothes, or prepare lunch; or that a woman is scantily clad with lascivious messages and ambiguous texts that contain sexual connotations. On the other hand, men are mostly portrayed as successful businessmen, athletes, car owners, etc. In this way, mostly stereotypical images of women and men are created, and instead of influencing the disintegration of stereotypes, they support and encourage action in accordance with prejudices, customs and social patterns of behavior based on gender stereotypical roles.

Considering all the circumstances, the Commissioner recommended that marketing agencies, when creating advertising content, take care that such content does not support prejudices and stereotypes or insults the dignity of a person or group of persons on the basis of some of their personal characteristics.

In 2019, the Law on Health Care, the Law on Health Insurance, the Law on Planning and Construction, the Law on the Central Population Register,

the Law on Pension and Disability Insurance, etc. were also adopted, having a direct impact on the lives of older persons. During 2019, the Commissioner also sent the *Initiative to submit amendments to Article 65, item 7 of the Draft Law on Health Care* with regard to amendments and clarifications of the said Article, in order to prevent discrimination against children, older persons, and persons with impaired health and mental disability, having in mind that this provision prescribes an exception for persons placed in social protection institutions in terms of the scope of primary health care, i.e. that the prescribed provision reduces the scope of primary health care for persons placed in social protection institutions.

Opinion with a recommendation: The complaint states that the patient has hepatitis C and that the Fund Commission did not approve her treatment with drugs from DAA therapy, due to the fact that she does not meet a single criterion, which is a previous failure of PEG-INF therapy, which is not possible in her case because it is contraindicated.

In the procedure, it was determined that the provisions of the Law on Prohibition of Discrimination were violated and the National Health Insurance Fund was recommended that DAA therapy be introduced into the treatment as soon as possible, as well as to harmonize the criteria for approving the use of DAA therapy drugs either by changing the List of Drugs that are prescribed and issued at the expense of the funds of compulsory health insurance, or by giving the commission instructions for application and interpretation of the prescribed criteria, so as not to exclude patients who cannot use other therapy in the treatment of hepatitis C.

The National Health Insurance Fund stated that in cooperation with the competent institutions it will carry out activities aimed at improving the rights of all insured persons to new drugs, i.e. continue activities to implement the Commissioner's recommendation regarding the right to drugs for hepatitis C patients who have a contraindication to therapy, based on the opinions of the professionals, and in accordance with the available financial resources.

The Commissioner also sent an *Initiative to the Ministry of Health to amend Article 30* of the Decree on the plan of health institution networks, which prescribes indication areas for which extended rehabilitation is provided in hospital institutions specialized in rehabilitation, so that kidney diseases are added to the said article. Namely, the Commissioner was addressed by the Association of Dialysis Patients of the Military Medical Academy, regarding the amendments to the Rulebook on Medical Rehabilitation in Inpatient Health Institutions

Specializing in Rehabilitation,²⁵⁴ stating that the provision of Article 2 should be supplemented with a provision that reads: ‘rehabilitation of patients on regular hemodialysis weekly that have dialysis three times a week’. In this regard, the Commissioner addressed the National Health Insurance Fund, which replied that there is no legal basis for amending the Rulebook, or the List of indications for the use of extended rehabilitation in inpatient rehabilitation institutions, because the Decree on the network of health institutions²⁵⁵ does not provide kidney disease as an indication area for prolonged rehabilitation in hospitals specializing in rehabilitation. Having in mind the above, the Commissioner sent the initiative, and the Ministry of Health forwarded the initiative to the Republic Expert Commission for Medical Rehabilitation for consideration and expert opinion.

We remind you that for years the Commissioner, in her regular annual reports, has recommended the provision of more efficient therapies, drugs, materials and new generation aids at the expense of the National Health Insurance Fund, especially for people with disabilities, older persons, people on dialysis, people who suffer from rare diseases, hepatitis, melanoma, etc., as well as the need to take preventive measures, screening examinations and pay special attention to raising awareness and information about health risks and reproductive health, especially children, youth and older persons, while ensuring greater availability of psychological support.

The Commissioner also submitted to the National Health Insurance Fund the *Initiative to amend the Rulebook on medical-technical aids provided from the funds of compulsory health insurance*²⁵⁶ by expanding the types of medical-technical aids provided to insured persons from the funds of compulsory health insurance, i.e. increasing the number and types of eye aids listed in the Aid List.

During this year, the Commissioner was addressed by citizens regarding termination of employment, exercise of the right to severance pay and exercise of rights in the field of retirement and disability insurance.

254 ‘Official Gazette of RS’, issues 75/16 and 39/18.

255 ‘Official Gazette of RS’, issues 42/6, 119/07, 84/08, 71/09, 85/09, 24/10, 6/12, 37/12, 8/14, 92/15, 111/17, 114/17-correction, 13/18 and 15/18-correction

256 ‘Official Gazette of RS’, issues 52/12, 62/12-correction, 1/13-correction., 112/14, 114/14-correction, 18/15, 19/17, 29/17-correction, 2/19 and 16/19.

Opinion: The complainant stated that the institution in which she was employed made a decision which in a general way determined the possibility of an agreed termination of employment for employees for an indefinite period of time in 2018, with the payment of incentive compensation. This decision explicitly stipulates that this possibility is not provided to employees whose employment is terminated in 2018 by force of law, i.e. when they reach the age of 65 and have at least 15 years of insurance experience. In August 2018, the applicant submitted a request to the employer for the payment of incentive compensation, which was not decided on, while in September 2018, the employer issued a decision stating that her employment was terminated due to retirement, recognizing the right to severance pay due to retirement.

After analyzing the decision, the Commissioner stated that the employer aimed to offer employees the possibility of termination of employment for an indefinite period of time, with the payment of incentive compensation, and that such conduct of the employer is one of the ways to terminate employment, in terms of Labor Law. ***The right of employees to the payment of incentive compensation in cases when they do not meet the condition for retirement by force of law is a protection measure that should provide the employee with security during the termination of employment during a certain period of time.*** With the termination of employment by force of law and the acquisition of the right to a pension, the goal and purpose of the established right to incentive compensation is exhausted, because the conditions have been met for a person to exercise the right to a pension. This position was also taken by the Constitutional Court in its decision I Uz-293/2016 of 25 July 2017, on the occasion of a similar legal situation. In accordance with Article 36, paragraph 2 of the Law on Prohibition of Discrimination, the procedure was suspended

In addition to dealing with complaints, the Commissioner continued to carry out other activities to promote equality and protect against discrimination. Thus, at the end of the year, the ***Special Report on Discrimination in the Field of Labor and Employment*** was submitted to the National Assembly, stating, among other things, that complaints submitted to the Commissioner indicate that in the field of labor, and especially employment, otherwise vulnerable groups become even more vulnerable, that women are in a worse position on the labor market than men, that women are the social group most discriminated against and at the same time the most numerous on the labor market, and that there are not rare cases of multiple discrimination against women based on gender and marital and family status, and people with disabilities or so-called older workers due to age and health.

The Commissioner carried out other activities during the year. For example, a seminar was held in Berlin dedicated to institutional capacity building entitled *Combating Ageism and Age Discrimination*, organized by the European Equality Body Network (EQUINET) and the European AGE Platform, and hosted by the German Federal Anti-Discrimination Agency. The aim of this seminar was to help equality bodies and civil society organizations strengthen their own capacities, to strengthen cooperation between equality bodies and non-governmental organizations, and to jointly discuss issues related to equal treatment of older persons. At this seminar, the Commissioner moderated a panel in which good practices in the prevention of discrimination against older persons were presented.

Within her activities, the Commissioner constantly points out the need to preserve a healthy life through active and healthy ageing, which refers to the promotion of healthy lifestyles throughout life, and includes both the styles of consumption and nutrition and the levels of physical and social activity. Population ageing affects all spheres of society and takes place in the context of climate change and accelerated digitalization. The Commissioner regularly points out the need to protect the environment and involve all generations, including, of course, older persons, in activities that contribute to a healthy environment as a priority of overall importance for society. The fact is that health, environment and social conditions are complex areas that are in constant interaction, and that they include, among other things: preservation and protection of health; diversity and quality of ecosystems; natural beauty and spatial values; cultural heritage; conservation of nature and natural resources, as well as prevention of environmental risks. A healthy environment is crucial for the development and stability of every society and individuals in all generations, which of course also applies to older persons. Older persons could have the role of guardians and innovators together with young people, in preserving and improving a healthy environment, given that they have 'old' knowledge that can be used with the situation being modified in accordance with modern needs. The need to preserve a healthy environment and develop ecology as a particularly important social area seems like an imperative for progress today, and encourages the awareness of older persons about the importance of preserving the environment in which we all want to live. The activism of older persons on this issue is useful and motivating for all generations. Such attitudes are embodied through the United Nations *Sustainable Development Goals 2030*, which refer to future social and economic development in accordance with the principles of sustainability.



Members of the association The Third Age Movement in environmental action

Also, through the current *Green Paper on Ageing* of the European Commission (adoption is expected during 2021), two policy concepts are underlined that can enable successful ageing of societies, namely healthy and active ageing and lifelong learning. The accelerated development of technology, primarily digitalization and robotics, represents a great civilizational progress, because new knowledge greatly facilitates our daily life and work, and at the same time poses challenges in terms of equal inclusion of all generations, especially older ones, in the use of new technologies for general benefit. Older persons often have inaccessible or inadequately accessible new channels of communication, which leaves them without timely and complete information on all social flows. So the principle of lifelong learning, with tailored programs, especially when it comes to digital skills training, is a way to greater social inclusion of older persons; and the transfer of knowledge between generations is crucial for the mental and emotional stability of the individual. The digital involvement of older persons has great potential for the transgenerational use of the knowledge and experience of all generations, and thus an impact on the development of the economy.

During 2019, the Commissioner, in cooperation with the Center for Support and Inclusion Help Net, and with the support of the Višegrad Fund, implemented the project 'Improvement of Intergenerational dialogue', in partnership with the NGO '90 decibels' from Hungary, 'European Group for Territorial Cooperation TRITIA' from Poland, as well as the Valašské Meziříčí local government from the Czech Republic. The aim of this project was to encourage mutual cooperation, understanding and coexistence between generations, i.e. strengthening the



intergenerational solidarity being reached by the changing relations between generations, searching for new forms of exchange of knowledge, skills and experiences, and sharing responsibilities. All this was realized through this project, in the course of debates in 10 cities in the Republic of Serbia. In this way, the target groups (young and older persons) were reached; and in the final report from this project, a cross-section of the realized forums was presented, with an analysis of the audience's reaction to the topics, and conclusions and recommendations for improving

intergenerational dialogues, encouraging solidarity and improving services of social protection.

For many years, the Commissioner, in partnership with the Open Society Foundation Serbia, has been implementing the 'Trial Simulation (Moot Court)' program in the field of protection against discrimination. This is the National Competition in Trial Simulation 'Condemn Discrimination', intended for undergraduate and master's students of law at accredited faculties in Serbia. The judges in the trial simulations are reputable lawyers, judges and legal experts. In addition to the winners, every year the best speakers and winners in the written part of the competition are announced. At the competition held in 2019, the topic of the given case referred to hate speech against several vulnerable social groups, including older persons.

At the tribune of the New Trade Union of Social Protection of Serbia, dedicated to the application of the regulations and recommendations on prevention of discrimination and furtherance of the rights of older persons, held within the manifestation 'Days of Social Protection' in Apatin, it was concluded that the results of several surveys on the position of older persons, as well as the practice of this institution, indicate that a large number of older persons are at risk of exclusion and discrimination, owing to various socio-economic barriers and limited access to public spaces and services in the community, but also to ingrained prejudices and stereotypes. Relationship with older persons and creating an environment where they can exercise all their rights in full are crucial not only for the equality of older persons, but also for the whole society and future generations.

In the House of the National Assembly, in cooperation with the Commissioner and the National Assembly, on the occasion of October 1, the International Day of Older Persons, the exhibition *Bridge of Understanding – Intergenerational Solidarity* was opened. This exhibition presents literary and artistic works, as well as photographs of primary school students from all over Serbia, and gives awards to the best students. In addition to Commissioner Brankica Janković, the awards were presented to the best students by the Speaker of the National Assembly Maja Gojković, the Speaker of the Committee on Human and Minority Rights and Gender Equality, Jasmina Karanac, and the State Secretary at the Ministry of Education, Science and Technological Development, Anamarija Viček.



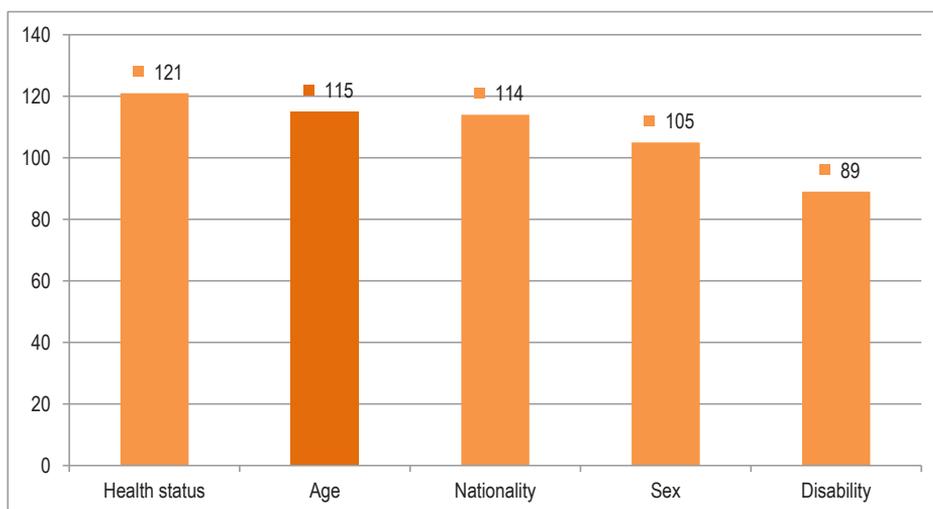
At the conference held on the occasion of the presentation of the publications *Ageing and Digital Inclusion* and *Guide to the use of e-services* (which is intended for older persons and gives a detailed description of procedures for using e-Government portal services and several popular e-banking applications in Serbia) The Institute of Social Sciences, with the support of the United Nations Population Fund (UNFPA), concluded, among other things, that the growing trend of switching to e-services poses a risk of exclusion and discrimination, if we take into account research data that shows that 43% of older persons never used Internet and only 9% of older persons in rural areas have a smartphone, and that the vast majority of those on the Internet do not use digital services. The use of digital services must be optional and functionally adapted to older persons, because otherwise a large number of our fellow citizens will be discriminated against, i.e. excluded from social flows.

As part of the Days of Older Persons event traditionally held for many years in Zvezdara, one of Belgrade's municipalities, a panel discussion was organized on the topic of 'Perspectives of the Third Age', where the Commissioner opened the topic of older persons' perspectives, and ways of realization and empowerment in finding meaning and value in the third age, when people often face a loss of meaning in life. It was emphasized at the tribune that everyone should find a motive on their own, but also that volunteering is one of the better ways to get active, and an example of good practice is the volunteer center in the municipality of Zvezdara.

3.1.7. Legal actions of the Commissioner in 2020

For years, age has been one of the most common bases for discrimination, according to the frequency of it being mentioned in complaints received by the Commissioner. Compared to 2019, the number of complaints filed for age discrimination has increased significantly in 2020, as was expected given the COVID-19 epidemic and its impact on the population in different age categories. Age was the second most frequent reason for filing a complaints, with 115 complaints received (14.8%). In this regard, in 2020, the largest number of complaints was filed for discrimination against persons over 65, followed by complaints for age-based discrimination against persons between 18 and 65, and finally, complaints filed for discrimination against children.

Graph 13: Frequency of complaints for discrimination in 2020



The year was marked by several events that had a direct effect on citizens addressing the Commissioner, primarily regarding the situation caused by the coronavirus. In addition, 2020 was the year of the parliamentary and local elections, in Serbia, which influenced, among other things, the fact that the Commissioner for Equality Protection, as an independent body, could not be elected for six months. The newly constituted National Assembly had the procedure for the election of the Commissioner conducted after the six months-break, starting from the expiration date of the previous mandate. The National Assembly re-elected Brankica Janković as the Commissioner for the Protection of Equality, for a second five-year mandate, at the session held on November 26, 2020. The previous mandate of the Commissioner had ended on May 27, 2020.

Then the COVID-19 epidemic was declared in March, during which, especially during the declared state of emergency, a large number of citizens addressed the Commissioner asking for protection, sometimes only for information, support and help, mostly by phone or email. Most demands received in that period were related to exercising rights in the field of health and social care. Among other things, the intensity of demands, indicated the special additional vulnerability of otherwise vulnerable groups in society, and the need for their better protection. The COVID-19 epidemic has disproportionately affected older persons, people with disabilities, the poorer sections of society, residents of informal settlements, users residing in social care institutions, people with chronic health problems, but also young people, women, employment, education, etc. In addition, the introduction of measures such as the movement ban, the risk of infection, the transfer of an increased number of activities to being handled online, etc., also affected the said groups' access to certain rights and the exercise of the right to services, judicial protection, etc.

For the first time since the institution of the Commissioner had been established, health status was noted as the most common reason for complaints, mentioned in over 15% of the total number of submitted complaints. As in previous years, this reason is often stated together with some other personal trait, most often disability, age, etc. Age is the second most frequent ground for allegations in complaints, while the largest number of complaints was in relation to proceedings before public authorities.

The current situation resulting from the 2020 global the COVID-19 pandemic, pointed to the need for a balance between protecting public health, and respecting human rights and minimizing economic and social disorders in all countries affected by the health crisis. At the beginning of the year, as the virus began spreading rapidly, epidemics were declared in many countries, followed by a global pandemic. Consequently, numerous measures were taken, such as closing the borders, quarantine, movement bans, closing educational and cultural institutions, delaying or canceling various gatherings, trips, cultural, sports and other events, etc. Measures taken in the fight against the spread of the virus have also affected the realization of some of the basic human rights, resulting in questioning the proportion and validity of the set restrictions and their impact on public health.

The COVID-19 pandemic confirmed the need to pay special attention in emergency situations when people's lives and health are endangered, to create support measures for vulnerable social groups, to establish procedures and rules for such situations, to encourage volunteerism and social responsibility. Thus, during 2020, numerous publications, reports and research suggested to the appropriate segments in charge of the health crisis how to provide a satisfactory response to future similar situations, as has been discussed in

more detail in previous parts of this report. In her recommendations, the Commissioner fully complied with all international standards relating to the necessity and proportionality of the adopted restrictions, including positive measures for the protection of particularly vulnerable populations, set out in the above-mentioned subsequently published reports.

Following the adoption of the Decision on declaring a state of emergency,²⁵⁷ the Commissioner intensified the monitoring of the field of protection of equality, sending recommendations for measures and initiatives to the Government and the line ministries. The Commissioner pointed out at various problems of the most vulnerable groups of citizens and proposed concrete solutions for their overcoming, the examples of which are listed in further text.

During the state of emergency caused by the Covid-19 pandemic, the Commissioner sent **312 recommendations and 12 initiatives** to public authorities, in order to review the situation and act to improve the position of certain groups of the population that are particularly vulnerable in a pandemic. The following are some examples of these acts.

At the meeting of the European Network of Equality Bodies, which referred to the actions of equality bodies during the crisis caused by the Covid-19 pandemic, the recommendations of measures taken by the Commissioner for Protection of Equality of the Republic of Serbia were cited as examples of good practice to protect human rights and reduce the negative effects of the pandemic on particularly vulnerable groups.

During the state of emergency, the Commissioner volunteered every Friday at the Serbian Red Cross Info-Line to support older persons in isolation.

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Commissioner as a volunteer of the Serbian Red Cross with the President of the Red Cross prof. Dr Dragan Radovanović

As the pandemic showed the entire world's vulnerability, , interconnectedness, and dependence on each other, it was clear that the moment for maximum solidarity had come, where everyone should show full tolerance, understanding, mutual respect, support, empathy and willingness to help others. At the same time, the fear of the disease manifested itself, also causing the appearance of stigmatization. of certainpatients.

Already in the first days of the health crisis caused by the coronavirus epidemic, numerous bodies and organizations around the world paid special attention to the position of vulnerable groups of the population in emergency situations. older persons were recognized as one of the most endangered groups of the population in the existing emergency conditions , and were restricted or banned from moving in most world countries due to their vulnerability and susceptibility to infection.

At the very beginning of the declared epidemic, comments about older persons made in public spaces, especially on social networks, were often negative and full of prejudice about their lives being less valuable and that the danger to health of older persons that the coronavirus presented, was not the reason for society's great concern.

WARNING: At the very beginning of the state of emergency, the Commissioner reacted with a warning, on the occasion of addressing citizens about the frequent cases of inadmissible insulting speech and stigmatization of people with COVID-19, people at higher risk of illness such as older persons and citizens of the Republic of Serbia returning from abroad, especially present on social networks. The warning stresses that stigmatization of patients based on their health condition, especially in the conditions of the state of emergency declared to suppress the spread of this virus, is inadmissible, that it creates confusion and increases fear.

The measure of banning the movement of persons over the age of 65, introduced during the state of emergency, provoked a number of complaints against the actions of public authorities. Namely, the actions of public authorities and introduced measures, as pointed out by citizens in their complaints, made it increasingly difficult to tolerate isolation due to the duration time of the introduced restraint measures, and the permission of movement in the early morning hours once a week was inadequate and was affecting their mental and physical health. On that occasion, the Commissioner submitted several initiatives and recommendations for measures, where she pointed out to the need to review the movement restriction measure, especially in terms of duration, time deadlines and frequency, in accordance with the daily analyses of the epidemiological situation, suggesting that the measures should be adjusted to real circumstances, taking into account the health risks for the population, especially for older persons as a vulnerable social group, and compliance with international and domestic standards in the protection of human rights.

Recommendation to the Government for measures for achieving equality

The Commissioner also recommended measures to the Government to improve the functioning of various support measures during the state of emergency and the introduction of a movement ban, where in addition to simplifying procedures for issuing movement permits, ***it was recommended to review measures within the total ban for older persons who were having more and more difficulties tolerating isolation. It was stated that the permission to move in the early morning hours once a week was inadequate and affected their mental and physical health, and that when introducing, adapting or reviewing the already introduced measures, everything should be taken into account, including other public health risks, especially those faced by older persons as a vulnerable social group.*** The same recommendation for measures recommended how to improve the work and functioning of helplines for older persons and of

other lines established to offer various types of support and assistance (such as oncology patients who do not know who to contact regarding receiving therapy during self-isolation). It also recommended to pay special attention to the capacities of safe houses and to provide support to all persons needing this type of accommodation due to the possibility of an increased rate of violence provoked by the state of emergency, and to instruct all institutions when accommodating people in shelters for the homeless and for adults in crisis, to send instructions on how to deal with the circumstances of the state of emergency, in order to ensure timely protection.



Considering the fact that older persons are less likely to use modern forms of electronic communication, the Commissioner underlined that, in addition to the possibility of submitting requests for movement of persons during the ban on movement through the e-government portal, it was necessary for citizens to be able to ***give their requests directly to their local self-government units***, particularly since electronic media were not available to everyone. At the same time, the Commissioner emphasized the importance of the good functioning of the telephone lines created within the local self-government units to help older persons and the need for these lines to work during the ban, i.e. to be available during the ban. It was also necessary for local self-government units to adopt new competencies regarding the issuance of movement permits, and to make their services available to citizens in an adequate manner adapted to the new circumstances.

Recommendation for measures for achieving equality given to the municipality of Batočina and to the Emergency Situations Headquarters

During the state of emergency due to the coronavirus pandemic, the citizens turned to the Commissioner because the call center and the volunteer service of that municipality did not work on Sundays and older persons were not able to receive basic food supplies nor medicines and hygiene products. These allegations were confirmed by an insight into the Conclusion of the Emergency Situations Headquarters of the Municipality of Batočina.

The Commissioner stated that the proper functioning of services, especially telephone services helping older persons, was extremely important, and that there were no obstacles for these services to work on Saturdays and Sundays, given that the Government of the Republic of Serbia had provided the possibility to obtain a movement permit during the period of movement

ban, i.e. during the weekend. In this regard, the Commissioner sent a recommendation to the Municipality of Batočina, and to the Emergency Situations Headquarters of the Municipality of Batočina, suggesting taking all possible measures to ensure the unhindered operation of its services, and to ensure that the municipal call center and the voluntary service for basic food supplies, medicines and hygiene for older persons were adjusted to the new circumstances including during the ban on movement.



Regarding cases of violation of the ban on movement during the state of emergency and imposition of fines on older persons, the Commissioner addressed the Ministry of Internal Affairs with an ***initiative to issue instructions on the actions of members of the Interior Ministry during the control of compliance with the ban on movement and imposition of fines.*** The Commissioner recommended to the Ministry to clearly instruct the manner of behavior towards persons over 65 years of age who, due to the nature of their health condition, were not able to understand the importance of this measure and the obligation to respect it, and suggested that, if a person over 65 years of age found walking outside the building of their permanent or temporary residence is found undoubtedly (determined on the basis of external characteristics and behavior) disoriented in space, time or in relation to people, instead of imposing a fine, they should provide such older person the necessary protection through the Center for Social Work.

The Commissioner also sent a recommendation to the Ministry of the Internal Affairs to take measures within its competence to enable those owners of motor vehicles older than 65 and 70, respectively, who have no descendants, to extend registration of motor vehicles through other persons, as referred to in the Order on Restriction and Prohibition of Movement,

Recommendation for measures for achieving equality given to the 'JP Elektroprivreda Srbije', the Electric Company of Serbia Public Enterprise

During the state of emergency implemented due to the coronavirus pandemic, the Commissioner was addressed by a person over 65 years of age, whose household was disconnected from the electricity distribution network, before the Decision on declaring a state of emergency came into force. Having in mind the above, the Commissioner sent a recommendation for measures to the Electric Company of Serbia to

consider the possibilities and take appropriate measures in order to enable persons over 65 or 70 years of age, who are prohibited from moving in accordance with the Order on Restriction and Prohibition of Movement on the territory of the Republic of Serbia, to be supplied with electricity until the end of the state of emergency and the ban on movement, and to consider the possibilities to and take measures for the supply of electricity to socially vulnerable citizens (the poorest citizens, residents of informal settlements, members of the Roma ethnic minority who do belong to the poorest and most marginalized groups of the population, and others).

During the state of emergency, older persons also addressed the Commissioner regarding the impossibility of exercising various rights, primarily due to the introduced movement ban. Thus, the citizen addressed the Commissioner in his own name and in the name of his wife (both over 70 years old) regarding the delay in receiving their pension. Namely, after the statement on the manner of receiving the pension needed by the bank in order to adjust the delivery of pensions to citizens older than 65 restricted or prohibited from moving, the bank failed to provide the complainant with a pension, and his wife was not provided with the second half of the monthly pension, while the offered bank phone numbers did not work. The Commissioner informed the complaining citizen about the possibility of disbursing funds at the bank's premises to a proxy on the basis of a one-time power of attorney authorizing this person to withdraw funds. The power of attorney would be a one-time only, and did not have to be notarized, but would be handed over to the bank by an authorized person presenting his and her personal IDs given to them by the person who gave the power of attorney. After receiving the power of attorney, the bank would check the data stated in the power of attorney by phone and, after obtaining the consent, make the payment of funds. The power of attorney could be given in the form prescribed by the National Bank of Serbia, and other relevant information, available on the official website of that bank. The Commissioner also informed the complainant about all available information and services offered by the municipality in which he resides, about voluntary service and similar activities that would be helpful to these older persons.

Furthermore, citizens and associations addressed the Commissioner pointing out the big problem that older persons who use the services of informal carers faced in the pandemic, because home care assistants did not provide their service in full, i.e. did not enter the homes of users fearing the risk of infection, while there was no inclusion of new users and the institutions for accommodation of adults and the older would not accept new users. As a consequence a number of older persons found themselves living without the support they needed,

and the problem was further complicated in the cases of an older person with dementia or an older person who had just been discharged from the hospital for home treatment. This situation also revealed the need to provide support to people caring for their older parents or other older persons, for which they needed appropriate knowledge, practical advice and guidance.



Due to the necessity of continuity in providing services to older persons in the conditions of the COVID-19 epidemic, the Commissioner sent a recommendation to the Ministry of Labor, Employment, Veteran and Social Affairs to take all necessary measures within its competence so as to resolve situations for people who needed support, but, due to the infection of informal caregivers or for other reasons, had found themselves without adequate care and assistance, and to instruct all social protection institutions that provide older-age housing services and Centers for Social Work on how to act in such situations.

Recommendation for measures for achieving equality submitted to the Government

Having in mind the importance of providing health care and other indispensable services continuously during the state of emergency, the Commissioner pointed out to the problems faced by people with disabilities, people suffering from rare diseases, people who are in the terminal phase of a disease who use palliative care service at home, and persons suffering from dementia, who use the services of mobile teams or informal caregivers with whom they do not live in the same household, had to face after the adoption of the lockdown or movement restriction for all citizens. The Commissioner recommended that the Government ***put persons like personal assistants and carers, but also informal carers, and relatives or friends who do not live in the same household with them, on the list of people that Ministry of Internal Affairs could issue permits to move, and provide them with services in the evening***, because assistants or caregivers were not available to all persons throughout the day.

As concerns calls asking for help in relation to older family members who resided in remote places and who needed help, the Commissioner provided information on the submitted Initiative to the Government regarding permission to move for informal caregivers and regarding providing home care services during emergencies. That is, the Commissioner proposed the ways to address the movement of personal assistants, informal carers, relatives or friends who do not live in a joint household, but who needed to provide assistance and support services to people with disabilities, citizens in the terminal phase of

the disease, users of palliative care at home, people who suffer from dementia and others. Following the submitted initiative, on April 5, 2020, on the official website of the Ministry of Labor, Employment, Veteran and Social Affairs, a notice was published to issue a license to move during curfew, stating that the Ministry, authorized by the Prime Minister during the state of emergency and in cooperation with the Ministry of Internal Affairs, could control and issue permits for movement during curfew. Citizens who needed a permit to move during curfew were instructed to contact the local self-government with their request and submit the necessary documents. Thus this issue was resolved shortly after being identified.

The Constitutional Court issued the decision no. IUo - 45/2020 dated 28 Oct 2020 which determined that **certain articles of the Decree** on Measures during the State of Emergency and the Decree on Misdemeanor for Violation of the Order of the Minister of Internal Affairs on Restriction and Prohibition of Movement of Persons on the Territory of RS during its validity **were not in accordance with the Constitution** and with the ratified international treaties. However, in the section on the issue of constitutionality and legality of certain provisions of these acts regarding the **prohibition of movement** of persons over 65 and 70 years old, persons accommodated in asylum centers, and the prohibition of movement for all persons during Easter holidays, the **Constitutional Court suspended the proceedings**.

In the reasoning of the decision, the Constitutional Court stated the following:

'Prescribed measures prohibiting the movement of certain categories of persons do not constitute deprivation of liberty neither according to their purpose or according to their content. Namely, the purpose of these measures was not to deprive the persons concerned of their liberty for a certain period of time, but in specific circumstances, especially vulnerable persons, such as older persons, to additionally and effectively protect themselves from the possibility of contracting dangerous infectious diseases.'...

... 'As for the allegations of certain initiatives that the disputed measure of prohibition of movement discriminated against this category of the population in relation to persons under 65 years of age, the Constitutional Court states that a special regime of prohibition of discrimination established by Article 202, paragraph 2 applies to derogatory measures, and not to Article 21 of the Constitution, to which the submitters of initiatives refer '...

In some studies that monitored the effects of the pandemic, it was found and practice has shown that, the public's needs for various health services were not met, especially during the state of emergency, most often due to unavailability of services or unavailability of doctors. Access to health care for citizens who seek health protection for conditions non-related to the treatment

of or suppression of COVID-19 infection was partially restored after the end of the state of emergency, primarily due to the start of work of private practices, which citizens could address as needed.

Providing access to regular health services and therapies, examinations and psychological support during crises, including affordable health facilities, and clear and efficient procedures for providing health care services in crises, are just some of the challenges posed by the COVID-19 epidemic. A special challenge was the position of persons who were in hospital or rehabilitation during the state of emergency, but also persons in institutional accommodation, such as persons with disabilities or older persons and other persons in social protection institutions. A large number of healthcare systems in the world have faced these problems. Unhindered access and continuity of the exercise of the right to health care should be ensured in crisis situations to the maximum extent possible.

Recommendation for measures for achieving equality given to the Ministry of Health

The Commissioner recommended to the Ministry of Health ***to take measures so that older persons could get the help they need in all local self-government units*** on the territory of the Republic of Serbia by calling the appropriate phone number, information about which should be available on the ministry's website: *Covid-19.rs*

Local self-government units provided telephone lines, and there were also telephone numbers available on the website of the Ministry of Health.



The Commissioner also pointed out to the problems faced by people on dialysis, as one of the most vulnerable groups of chronic patients, who in regular circumstances go for treatment every other day or three times a week depending on their needs, and to the fact that increasing the interval between two dialysis puts the lives of the sick at risk. Therefore, the Government was ***encouraged to draw the attention of all health care institutions to the need to shorten the waiting time for COVID-19 test results for dialysis patients*** in order to enable conditions for the smooth running of regular therapies, and thus prevent endangering their health. Rapid tests were performed for people on dialysis, and treatments were performed regularly.

In regular annual reports and in recommendations of measures sent to local self-government units, the Commissioner stressed **the need to increase the number and diversity of services in the community, exacerbated by the crisis caused by the coronavirus.**

The situation caused by the COVID-19 disease also revealed the special importance of the issue of mental health. In situations of uncertainty and incapacity, with risks related to access to adequate, complete and timely information about coronavirus, the threat it poses, and prevention and protection measures in appropriate formats, but also risks in other areas such as access risks and sources of income, changes in patterns of behavior, longer stay at home, work from home or loss of work and basic sources of income of family members, with limited movement and gatherings, were gaining in importance and greatly increased the need for psychological help and support to overcome depression, anxiety and other problems caused by worry, social isolation, loneliness, separation from loved ones, domestic violence, abuse, etc.

Of no less importance, especially in crisis situations, is the continuous provision of social protection services. During the year, in addition to complaints related to restrictions on movement and other problems during the state of emergency, the Commissioner was addressed by older persons, often stating that they needed help at home, that they had no one to turn to, that their children were not around, or did not have time for them or they are already burdened enough, that they felt neglected, etc.



In order to ensure regularity and continuity in the provision of services during the state of emergency, the Commissioner recommended to all local self-government units the ***measures to ensure regular provision of home help to all beneficiaries who exercised this right before the declaration of emergency, and to simplify and speed up procedures for at-home assistance during the state of emergency***, i.e. to adjust the procedures to the new circumstances and to the introduced measures of preventing the spread of infectious disease COVID-19, so that this service is available to all persons who need it, and who, because of their age, chronic illness, disability, etc. cannot meet the basic necessities of life. Most local self-governments have accepted and acted on this recommendation.

During the year, an additional challenge caused by the COVID-19 epidemic, was in how to organize work in health and social protection systems, but also in other public service systems such as education. The implementation of the Law on the Method of Determining the Maximum Number of Employees in the Public Sector and the long-term ban on employment proved to be a big

problem at a time when sectors such as health, social protection or education had to suffer the greatest blows during the COVID-19 epidemic. It has proven to be extremely important to take into account the human resources in these sectors, vital for citizens, which employ more women, and help them with their continuous education, which must include special programs to raise knowledge and skills on how to act in disasters and various types of crisis situations such as epidemiological ones, i.e. the spread of an infectious disease. Health and social care should always be given special consideration in terms of staffing in relation to other public services.

In regular annual reports, the Commissioner pointed to **the insufficient number of employees in public services** (in health, education, social care for children, work inspection, and other) and to the fact that, understaffed, these very important public systems cannot respond to the set tasks without compromising both the labor rights of their employees, and the beneficiaries' rights.

In an earlier initiative to repeal the Law on Determining the Maximum Number of Employees in the Public Sector, the Commissioner stated that the structure of employees in the public sector has been disrupted, and that there is a serious shortage of employees in key areas such as social and health care. Given that predominantly women work in these sectors, this law, among other things, has adverse effects on both women and youth employment.

The law has ceased to be in force, but the Law on the Budget System envisages further control of employment in services dealing with users of budget funds by the end of 2020.

According to available data from various surveys and reports, older women in Serbia are at a disadvantage compared to older men, and compared to women and men from other age groups. The problems they face are numerous: socio-economic status and exposure to poverty, lack of income to meet basic living needs, increased medical treatment costs, inadequate access to public transport, unequal access to health care and social and health care services, social exclusion and isolation, insufficient political participation, etc.²⁵⁸ Older women are more exposed to both violence and abuse. The conditions caused by the COVID-19 epidemic, along with the increased level of stress, general insecurity and the focus of institutions (primarily the police and the judiciary) on fighting the pandemic, contribute to creating conditions for an increased

258 *The position and participation of older women in political and public life in Serbia*, Citizens' Association The Power of Friendship – Amity and the Association of Citizens FemPlatz, Belgrade and Pancevo, October 2020, available on the website: http://femplatz.org/library/publications/2020-12_Polozaj_i_ucesce_starijih_zena.pdf?fbclid=IwAR1QQJmfug4cvo-8cyTQnz9E9UVkV8wcW0KPME05Cng8gF6DbVar1fvoKnp0

risk of violence.. Violence support services, of which there are very few, are mostly run by NGOs in Serbia, with limited budgets, the 2020 report said.²⁵⁹ Police protocols do not require cooperation with special support services or routine referral of victims, which results in insufficient use of existing civil sector expertise. There is no integrated system for collecting and monitoring cases of violence nor classifying them according to the type of violence and the relationship between the perpetrator and the victim, and the Action Plan for the National program for protection and promotion of sexual and reproductive health has yet to be adopted, the report said.



Considering the complexity of the problem of violence against women and of domestic violence, the Commissioner sent an ***initiative to the Government to amend the Decree on measures during a state of emergency***, so as to make an exception to the measure of prohibition or restriction of movement, and which would ***enable victims of domestic and partner violence to leave the apartment, room and building*** in residential buildings and household property (garden) at the time of exposure to violence.

In this initiative, it was pointed out that the recommendation for measures from April 14, 2020, among other things, suggested to the Government that it was necessary to pay special attention to the capacities of safe houses and provide support to all persons in need of this type of accommodation, additionally complicated if it was necessary to provide a room for self-isolation within a safe house.

This report already listed, in an earlier part of the text, the number of older persons at risk of poverty or social exclusion. Poor citizens are one of the more often discriminated groups. This year's practice has shown that complaints against age-based discrimination are mostly submitted by individuals in the field of social protection and those in proceedings before public authorities. Citizens most often addressed the Commissioner regarding the exercise of their right to one-time assistance, social benefits, or the impossibility of exercising other rights.

Recommendation for measures for achieving equality given to local self-government units

Considering the situation of all persons who found themselves in a particularly difficult economic situation during the state of emergency,

²⁵⁹ *Report for 2020*, European Commission, page 41

the Commissioner also recommended measures to all local self-government units ***to include all persons from their territory who are in need of social protection services and assistance programs***, without excluding persons who belong to the group of so-called legally invisible persons, i.e. persons who do not have a regulated legal status in Serbia. The aggravating circumstances of a pandemic being declared, and the introduction of protection measures to prevent the spread of the virus, further complicated the existence for members of this population, which is why they were in a situation where they needed help and support. It was recommended to provide assistance based on the records of local authorities and institutions to persons who are not registered because they do not have an ID card, do not have a registered address of residence in the place where they live, do not have citizenship, are legally invisible persons, foreigners whose stay is unregulated, persons who do not have financial social assistance, excluded from the allocation of humanitarian aid, emphasizing the need to provide social protection and humanitarian assistance services to all vulnerable categories.



As members of the Roma national minority living in unhygienic and informal settlements not having adequate access to drinking water and communal infrastructure (sewerage system, electricity supply, etc.) are at a higher risk of possible virus infection, ***the Commissioner recommended measures to the Government to improve the position of Roma in Roma settlements***, where it was recommended to envisage, as one of the urgent measures, mandatory full access to clean water at the local level (by installing cisterns, plastic tanks, etc.), and that city/municipal authorities should include in their work coordinators for Roma issues, and ensure continuous work of health mediators, which should be one of the priorities in the new situation as part of measures to combat the spread of the virus.

The adoption of the Program of Economic Measures to Support the Serbian Economy Affected by the Epidemic and the Adoption of Concrete Measures showed that the Republic of Serbia, despite the negative effects of the COVID-19 pandemic on the economy, managed to save a large number of jobs and minimize the effect of the pandemic on the economic situation, primarily that of employees. It was necessary, however, to consider the possibility of mitigating the negative effects of the COVID-19 pandemic by creating special measures that would be aimed at all citizens. Therefore, the Commissioner recommended to the Government, when creating measures to reduce the negative effects of the pandemic, to certainly take into account the fact that the consequences and measures taken to combat the spread of COVID-19 did not equally affect all categories of the population. The proposed economic measures did not

equally cover the employed and the unemployed, those working in the informal economy (especially Roma), farmers, independent artists, etc., and also parents, especially those with more than two children, single parents, but also families in which one or both parents are unemployed or informally employed in relation to families where both parents work.



Also, the Commissioner submitted *an initiative to amend the Decree on establishing a temporary register and the method of payment of one-time financial assistance to all adult citizens of the Republic of Serbia in order to reduce the negative effects caused by the SARS-CoV-2 virus pandemic*²⁶⁰ proposing, inter alia, that the measures include covering those persons deprived of legal capacity who have reached the age of 18 who had not been covered by the measure because their identity card, as was the case for a large number of citizens, had expired, and they were not able to extend it in a state of emergency, while one of the conditions for the payment of a one-time financial aid was possessing a valid ID card.



During the COVID-19 pandemic, special attention was paid to the position of endangered groups of the population, and older persons were recognized as one of the most endangered groups, around whom restrictive measures, including restricted or prohibited movement, were implemented, as they were at a higher risk of infection. Thus, on the eve of declaring the state of emergency, the *Order on the prohibition of visits and restriction of movement in facilities for the housing for older persons* was issued²⁶¹, prohibiting visits, and users from leaving the housing institutions. Following the end of the state of emergency, this order was changed several times, and some restrictions were eased. In 2021, the ban on the exit of users from social care institutions housing older persons is still in force. Given the higher risk to the health for older persons, and understanding the epidemiological measures taken, it is necessary to keep in mind other health risks such as increased depression, anxiety and cognitive impairment/dementia in older persons caused by the long-term isolation and loneliness they faced in one year of forbidden movement. At the same time, it is necessary to keep in mind the fact that vaccination in social protection institutions for the housing of older persons began at the end of 2020, and that mass immunization is underway in the Republic of Serbia, which included a large number of citizens. On that occasion, the Commissioner sent a recommendation to the ministries in charge of social and health care for *measures to achieve equality by reviewing the situation and all possible consequences in mutual cooperation and cooperation with experts/professionals from relevant fields and to comply with appropriate measures of protection against the spread of COVID-19 in*

260 'Official Gazette of RS', number 60/20

261 'Official Gazette of RS', issue number 28/20, 66/20, 87/20 and 7/21

circumstances of mass immunization, consider changing the regime of banning visits and restricting movement in institutions for older persons.

The Ministry in charge of social protection responded that the Minister had issued a Recommendation on the procedure of social protection institutions for older-age housing, and social protection organizations, to provide home accommodation services during visits, with the aim of balancing the risk of coronavirus spread and the benefits families and others have on the mental health and quality of life of home care users.

However, citizens continued to appeal to the Commissioner and point out that, due to the prescribed epidemiological measures, they had not seen their parents for more than a year, that the visit regime is the same as the last summer, and that it is only a formality, and that such persons are often immobile, have various diseases or disabilities and that direct contact with relatives is of particular importance. Considering the overall situation, the Commissioner repeated her *recommendation to older persons homes to introduce measures to enable visits to clients, in the most appropriate way, in future situations, especially measures concerning the manner in which the older persons homes conduct visits to clients who have advanced health problems*, stressing the need for an individual approach to each user in the provision of services, and the need for full responsibility of the management of older age housing institutions in terms of management and organization of work. Namely, in the institutions for older age housing, it is necessary to behave in the best interest of the users in all situations, which, as it turned out, was not always the case. The recommendation of the Ministry on the manner of conduct older persons homes during visits to users implies an overall review of the situation by the responsible management, in terms of spatial conditions, work structure, user groups and the like, and balancing the risk of spreading the infection with the health benefits of the visits, taking into account the differences of each institution individually.



Before the declaration of the epidemic and the state of emergency, at the beginning of the year, the *Invisible Women* Conference was held in Belgrade, dedicated to promotion of equality for older women, organized by the Serbian Red Cross and Humanas network, jointly with the Cabinet of Minister-without-portfolio Slavica Djukić Dejanović and the Commissioner for the Protection of Equality. It was

concluded at the Conference that older women are often discriminated against in various areas, both because of their age and because of their gender, disabili-

ity and health condition. After presenting several typical cases of discrimination against older women, the Commissioner stated that the 21st century values youth, beauty and speed, while at the same time the traditional gender role of women has strengthened, leading to their neglect, discrimination and social exclusion in older age, which is why the society has to change their attitude towards older people to enable them to be equal, active members of the community. At the end of the year, a large number of gatherings were held online, where the topic was, among other, the position of older persons during the year.



At the end of the year, the Commissioner met with the President of the National Assembly of the Republic of Serbia, Ivica Dačić. The meeting discussed respect for diversity and the importance of equality as the foundation of any democratic society, and the support of Parliament in achieving full equality for all Serbian citizens. Supporting the further work of the Commissioner and the institution, the Speaker of the Assembly said that Serbia is firmly committed to democracy and respect for human and minority rights,

and that, in that sense, the National Assembly will continue to be an ally of the institution that contributed to our society's significant steps towards equality of all Serbia's citizens. They also talked about the organization of other types of cooperation, such as public hearings, dialogue, etc. The Commissioner announced that, in 2021, a special report on the position of older persons in Serbia will be submitted to MPs, given that the Commissioner's practice and numerous research projects and reports show that this social group also finds it harder to exercise certain rights, and that it is exposed to discrimination and neglect, that it deserves special attention of the public, and that it is necessary for measures and activities to be improved in order to improve their position.

Due to the situation caused by the COVID-19 virus and the state of emergency imposed, resulting in introducing online classes during 2020, the annual *Bridge of Understanding – Intergenerational Solidarity* competition was not held.



Mihajlo Milivojević VIII-4, Kraljevo, 2018.

3.1.8. Recommendations from the Commissioner's regular annual reports

In her regular annual reports, the Commissioner gives recommendations for future action to all public authorities based on the insights gained from all the complaint procedures, and from other relevant available data concerning problems in achieving equality. Some of the given recommendations have a general character, which is why, in some cases, a longer period of time is needed in order for them to be implemented. This is why some recommendations are repeated in regular annual reports.

Based on the situation regarding age-based discrimination, the following recommendations have been given in the regular annual reports of the Commissioner:

- Start drafting strategic documents the validity of which has expired or is about to expire, primarily referring to the adoption of a strategy for improving the position of persons with disabilities, an aging population strategy, a strategy for the development of adult education, and a strategy that will improve mental health in Serbia. New strategic documents should be based

on the evaluation of previous valid strategies and should take into account the current situation and needs of the social groups they are designed for.

- It is necessary to strengthen all (quantitative and qualitative) capacities of social work centers in order to be able to respond in a timely manner to all tasks in the field of social and family law protection and provide quality needs mapping, recognition of social exclusion and timely activation of all forms of support and assistance.
- Intensify work on improving architectural and information accessibility and application of universal design in all areas, with the aim of enabling unimpeded access to public facilities and areas, transportation, information, communications and services for people with disabilities, people with reduced mobility, older persons and children. Equal opportunities need to be provided for access to emergency services, information services, SOS hotlines and public telephone directories.
- Intensify work on improving the situation of older persons, especially in rural and inaccessible areas. It is necessary to increase the availability of health and social care services for older persons (home treatment and care, strengthening patronage services for home visits and helping older persons, further development and improvement of the system, telephone counseling, etc., and introduction of mobile and other innovative services to meet specific needs of older persons, such as a helpline, informal carers, occasional and temporary housing services, etc.). It is also necessary to better connect money benefits with services, and to improve transportation services, a pre-requisite for better access to services and prevention of social exclusion.
- Take measures and activities to provide conditions for the provision of services to users who, due to their specific social and health status, need both social care and permanent health care by prescribing standards for the provision of these services. Raise awareness of these rights and services, simplify procedures for exercising them, improve the use of information technology for assistance, provide accessible and affordable access to palliative care under the right to health care without discrimination. Work on improving the position of informal carers by improving the system of formal support for those who need help, by considering the needs of informal carers themselves, by introducing different types of support services, etc.
- Continue work on providing more efficient therapies, drugs, materials and aids of the new generation at the expense of the Republic Health Insurance Fund, especially for people with disabilities, older persons, people on dialysis, suffering from rare diseases, hepatitis, melanoma, people living with HIV/AIDS, etc. Take preventive protection measures, screening examinations and pay special attention to raising awareness and information about health risks and reproductive health, especially of children and young people, but also older persons. Ensure greater availability of psychological support.

- Improve the functioning of public services in the field of health, education, social protection, social care for children, science, culture, inspection work, etc., especially in terms of the number of employees and take measures to restore responsibility of the heads of public services in managing and functioning of these services, so as to enable the realization of all citizens' rights in full and within a reasonable time.
- Improve the exercise of the rights of persons with disabilities to access polling stations and election materials. Improve the regulations governing the issue of deprivation of legal capacity and guardianship over adults, while enabling independent decision-making and promotion of ability.
- Continuously take measures to encourage the employment of women and the development of women's entrepreneurship, to protect women from discrimination in the labor market with special attention to achieving equality in access to jobs, equal conditions for advancement and achieving equal earnings.
- Prescribe and ensure the inclusion and encouragement of equal representation of women and men in all spheres of social life, especially in decision-making and in performing public functions at all levels, and conducting gender-balanced personnel policy and gender-sensitive statistics, in accordance with international standards and the Law on the prohibition of discrimination.
- Work on improving the coordinated and efficient operation of all institutions of the system in providing protection from domestic violence and other forms of gender-based violence while developing support services for victims of violence and children who witness violence. Continue with permanent year-round activities to raise awareness of the recognition of violence and obligation to report violence, especially among employees in the health and social care system. Introduce the obligation to keep gender-sensitive statistics related to reports of violence and processed cases, with an emphasis on particularly vulnerable groups such as girls, older women, women with disabilities, Roma women, etc.
- Implement programs for children in order to nurture values that promote a culture of tolerance, understanding and respect for diversity, gender equality, intergenerational solidarity and non-discrimination. Introduce health and education on reproductive and sexual health in school programs and encourage the adoption of the values of equality and tolerance through civic education by eliminating numerous ingrained stereotypes and prejudice about various social groups and social phenomena.
- Pay special attention to responsible reporting, which must not be characterized by hate speech, sensationalism, sexism, misogyny, discriminatory attitudes and offensive reporting, most often aimed at women and members of the LGBT population. Encourage the integration of topics that develop

a culture of tolerance, understanding and respect for diversity, intergenerational solidarity, mutual respect, gender equality and non-discrimination in the media and on social networks.

- Continuously work on education of employees in state administration and local self-governments, employees in the system of education, employment, health and social protection, holders of judicial functions, police officers, employees in inspection services, journalists, etc., so as to get them acquainted with the concept of discrimination, its forms, and mechanisms of protection against it.
- Establish and operationalize a single, centralized and standardized system for collecting and analyzing relevant data that monitor the occurrence of discrimination and the effectiveness of the system of protection against discrimination.



Having in mind that 2020 was marked by the current situation caused by the COVID-19 pandemic, a year that unequivocally showed the need to establish a balance between protecting the health of the population, on the one hand, and respecting human rights and minimizing the impact caused by the health crisis, on the other, the Commissioner has considered the key problems that arose in 2020, based on the insight into all available data relevant to the situation regarding the achievement of equality, made the following recommendations:

1. Crisis situations:

- Establish clear, precise and applicable procedures for dealing with all phases of crisis events, based on quality and disaggregated population data, after analyzing the responses that competent authorities at all levels made to the crisis caused by the SARS2-COVID19 virus;
- Involve experts from various fields, representatives of vulnerable social groups such as older persons, people with disabilities, Roma, etc., or their organizations and institutions for the protection of human rights in the process of developing procedures for dealing with crisis situations;
- Improve access to adequate, comprehensive and timely information on crisis events, and ways to overcome them;
- Work on the overall improvement of the health and social protection system, but also other public services in the field of education, social care for children, culture, science, inspection affairs, etc., so that in all situations including crisis, they could fully respond to the needs of citizens and ensure the exercise of the envisaged rights continuously and in full;
- Ensure greater availability of psychological support and mental health care, especially in crisis situations;
- Take measures to promote volunteerism and encourage volunteer work of all generations, while facilitating procedures for the organization of volunteer services and encouraging social responsibility not only in crisis situations, but also in regular daily activities.

2. Normative and strategic framework:

- Amend, i.e. supplement or adopt regulations, harmonized with international standards in relevant areas (such as regulations related to legal capacity, social protection, financial support for families with children, enactment of regulations on gender equality, same-sex unions, etc.), with the aim to improve the position and achieve equality of all social groups;
- Improve labor regulations in terms of more detailed regulation of work from home, flexible working hours and other provisions in order to enable decent work, reduce job insecurity, enable improvement of workers' position and ensure consistent application of all regulations, harmonization of work and parenthood, etc. Encourage social dialogue of all partners;
- In order to achieve full compliance with the *acquis communautaire* and overcome the problems identified in the previous application of the law, amend the Law on Prohibition of Discrimination and prescribe adequate solutions to establish and operationalize a single, centralized and standardized system for collecting and analyzing relevant data in order to monitor discrimination and the effectiveness of the system of protection

against discrimination, while providing the necessary budget funds for its implementation;

- Develop strategic documents and action plans the validity of which has expired or is about to expire (such as strategies for prevention and protection against discrimination, development of social protection, prevention and protection of children from violence, development of adult education, socially responsible businesses, aging strategies, action plan for implementation of Resolution 1325 UN Security Council - Women, Peace and Security, etc.), to ensure continuity in the implementation of measures and activities;
- Continuous strengthening of the capacities of local self-governments, with additional education of employees in all local level systems on adopted regulations and strategic documents, their goals and ways of implementing planned activities, especially those related to areas of immediate interest to citizens at the local self-government level (like active employment policies, improving the position of persons with disabilities, development of social protection services, development of digital skills, etc.), in order to achieve the best results in relation to the specifics of local self-government;
- Regularly review and evaluate the envisaged measures and activities, and, in addition to the achieved results, consider the need for changing measures in accordance with the current situation, especially at the level of local self-governments.

3. Mitigating the effects of social exclusion and poverty:

- Implement measures and activities aimed at reducing social exclusion and poverty, reducing disparities between urban and rural areas and promoting equality of citizens, especially vulnerable social groups;
- Continue to implement active employment policy measures in relation to the observed effects of the results achieved so far, create new measures and mechanisms of active employment policy that achieve the best effects on employment of hard-to-employ persons in the labor market, especially taking into account gender, age, health and social condition and other characteristics of unemployed persons;
- Create public policies that reduce job insecurity and the participation of non-standard forms of work and ensure equality in employment without giving preference on any grounds;
- Improve the efficiency of material-financial support to the individual and the family in order to overcome social and life difficulties, with better targeting of users;
- Improve measures to support families with children and population policy measures, with special emphasis on services and measures to reconcile work and parenthood.

4. Promoting equality and preventing violence:

- Implement programs and encourage the integration of topics in the public and media space (including social networks) in order to promote a culture of mutual respect and non-discrimination, tolerance, understanding and respect for diversity, gender equality, and intergenerational solidarity;
- Continuously implement educational programs for recognizing and responding to discrimination for all actors, including employees in public authorities and all areas of social life. Work on involving all social actors in the recognition and prevention of hate speech in public space. Improve the efficiency of sanctioning hate speech;
- Proceed with the ratification of Convention No. 190 of the International Labor Organization concerning the Prohibition of Violence and Harassment at Work;
- Work on improving the coordinated and efficient operation of all institutions of the system in providing protection against violence, with further development of support services for victims and children who witness violence. Compile gender-sensitive statistical reports related to reports of violence and processed cases, with an emphasis on particularly vulnerable groups such as girls, older women, women with disabilities, Roma and Roma women, LGBTI, etc.;
- Intensify activities to raise awareness of the general public, especially children and youth, and older persons about the recognition of violence and its forms.

RECOMMENDATIONS FOR CERTAIN PERSONAL CHARACTERISTICS:

5. Health condition:

- Improve the availability of health care services throughout the territory to all users, especially people with disabilities, older persons, citizens from rural areas, Roma and other groups who have difficult access (mobile teams, organized transport, patronage service, specialist examinations, etc.). Pay special attention to the availability of healthcare in crisis situations in terms of appropriate scope, content and quality;
- Continue work on providing more efficient therapies, drugs, materials and aids of the new generation at the expense of the Republic Health Insurance Fund;
- Take preventive protection measures and screening examinations, work on raising awareness and informing of health risks and reproductive health of all generations;

- Provide conditions for simultaneous and combined provision of intersectoral health and social care services. Improve access to palliative care;
- Implement programs on sexual and reproductive health in the education system and encourage the creation of educational media content on this topic;
- Improve the level of citizens' knowledge on their rights and services and simplify the procedures for the exercise thereof, and on how to use available information technologies for assistance.

6. Age:

- Intensify work on improving the position of older persons, especially in rural and less accessible areas, increase the availability of health and social care services (home treatment and care, increase patronage services providing home visits and help to older persons, telephone counseling, etc., and improve mobile and innovative services responding to the needs of older persons, such as tele-assistance, occasional and temporary accommodation services, etc.);
- Create systemic support measures for informal care and care for family members (flexible working hours, work from home, paid leave, etc.), while developing community support services (such as daily accommodation, mutual aid and support groups, information delivery service, education of informal carers, etc.). Strengthen mechanisms for controlling the provision of services;
- Take measures to prevent social exclusion of older persons by improving transportation services, implementing tailored digital skills programs, encouraging active aging while promoting healthy lifestyles, intergenerational solidarity and involving older persons in various activities at the local level;
- Improve the normative framework for the protection of the rights of the child by harmonizing it with the Convention on the Rights of the Child, in particular with regard to the definition and prohibition of corporal punishment, with harmonization of the General Protocol for the Protection of Children from Abuse and Neglect;
- Improve access to education to vulnerable groups of children with a special focus on the organization of teaching in crisis situations. Pay special attention to children with disabilities, Roma children and 'street children', in order to provide better support and improve inclusive education, provide a personal companion and pedagogical assistant to the required extent;
- Promote equal opportunities in access to higher education by introducing and/or improving special measures and programs, and supplementing the standards for accreditation of higher education institutions, especially in terms of accessibility of space, provision of assistive technologies and appropriate student support services;

- Create public policies for young people with their participation, which achieve the best effects, greater involvement, improvement of their position with incentives to continue their life and career in Serbia. Establish a special committee for young people or delegate issues related to the improvement of the position of young people within the existing committees of the National Assembly.

7. National affiliation and ethnic origin:

- Take the necessary measures to ensure that the composition of state bodies, local self-government bodies and other public authorities corresponds to the national composition of the population in their area, by increasing the number of employed persons belonging to national minorities and by increasing their education and training;
- Promote national, ethnic, religious, cultural and other diversity and inter-cultural dialogue, mutual respect, mutual understanding and cooperation;
- Proceed with the development and adoption of an action plan for the social inclusion of Roma men and women, while establishing a legal basis for local Roma coordinators and regular measurement of the achieved results and effects of the introduced measures;
- Ensure the continuity of work for health mediators and pedagogical assistants;
- Actively work on improving the position of Roma, especially Roma women and children, by strengthening capacities primarily at the local level, achieving inter-departmental cooperation of various actors, and by establishing integrated services in terms of providing personal documents, access to adequate housing, health, education and social care services, and employment;
- Encourage introduction of measures to increase the coverage of Roma children in preschool, secondary and higher education, reduce dropouts in the education system, and prevent segregation in the educational process;
- Influence the reduction of social distance towards members of the Roma community by publicly promoting examples of good practice.

8. Gender and marital and family status:

- Continuously undertake activities aimed at eliminating stereotypical gender roles and achieving full gender equality in all areas, take measures to protect women from discrimination and comprehensive protection against violence;
- Normalize and ensure the inclusion and encouragement of equal representation of women and men in all spheres of social life, especially in decision-making and public office at all levels, and the conduct of gen-

der-balanced personnel policy and gender-sensitive statistics, in accordance with the international standards;

- Actively encourage the employment of women and the development of women’s entrepreneurship, achieving equality in access to jobs, equal pay, and conditions for advancement, especially given the smaller number of women in management positions in the public and private sectors and insufficient participation of women from vulnerable groups. Regularly analyze the results and efficiency of the undertaken measures at the level of local employment action plans and local action plans for the promotion of gender equality;
- Continue to intensify inspections in the workplace and in the employment process, with regard to the violation of equal opportunities for employment or the enjoyment of all rights in the field of labor under equal conditions;
- Improve the control of media content and ensure compliance with regulations and media codes, especially in the part related to the prohibition of hate speech, sexism, misogyny, discriminatory attitudes and offensive reporting. Encourage and create content aimed at understanding and improving the position of vulnerable groups, and at breaking down all prejudice most often aimed at women, members of the LGBTI population, older persons and others.

9. Persons with disabilities:

- Intensify work on improving architectural and information accessibility, i.e. applying universal design in all areas, with the aim of enabling unimpeded access to public facilities and areas, transport, information, communications and services for people with disabilities, people with reduced mobility, older persons and children, with further work on increasing the number of accessible media content. Improve the exercise of the rights of persons with disabilities to accessible polling stations and election materials, and equal opportunities for access to emergency services, SOS lines, etc.;
- Improve support for an independent living for persons with disabilities in the least restrictive environment by providing adequate support and development of necessary services continuously at the local level. Promote and encourage the application of modern assistive technological achievements;
- Continue activities and further develop inclusive education and measures to encourage the employment of persons with disabilities, while undertaking activities to change the medical approach in considering the capacity of persons with disabilities;
- Continue the process of de-institutionalization while developing support services and ensuring continuous support. Ensure the consent of users for housing in health and social care institutions;

- Improve regulations governing the issue of deprivation of legal capacity and guardianship of adults while enabling the independent decision-making and promotion of the ability of persons with disabilities, enact regulations relating to the employment of persons with disabilities in work centers.



Angelina Stojanović, Lebane, 2017

3.2. SURVEYS CONDUCTED BY THE COMMISSIONER

One of the regular activities of the Commissioner is conducting various public opinion surveys with the aim of providing a comprehensive insight into the state of implementation and protection of equality among all social groups.

Thus, the *Attitude of Citizens towards Discrimination in Serbia* survey, which has been conducted six times to date, continues to be regularly conducted. This research should primarily serve the Commissioner as a source of information for the purpose of analyzing previous activities in the field of prevention of discrimination, and in defining new activities aimed at improving the position of certain vulnerable groups. In addition, this report should be taken into account when drafting the new Strategy for Prevention and Protection against Discrimination and the Action Plan that will define the measures and activities necessary for the realization of the set strategic goals, all in order to improve the position of vulnerable groups. It is especially important to focus activities

on reducing social distancing for members of different groups, because, without that, no mechanism of protection against discrimination can lead to a dignified and equal life for all citizens in Serbia. It is especially important to point out that the last two surveys (conducted in 2016 and 2019) have been based on the same questionnaires, providing insight into changes in citizens' attitudes towards discrimination in the past three years, and presenting relevant conclusions regarding their attitudes towards discrimination.

In the *Citizens' attitudes towards discrimination in Serbia* public opinion poll conducted in 2013, a large number of respondents stated that society should pay attention to poor people (76%), people with disabilities (72%), violence against women (71%), older persons (68%) and gender equality (53%). In relation to previous research and in the answers to the question: 'Which groups are most discriminated against in Serbia?', a certain difference can be noticed. Namely, according to the respondents, women now come first in terms of exposure to discrimination (42% of respondents), while Roma are listed second (41.5%), followed by people with disabilities (28.4%), poor people (27%) and older persons (24.5%).

According to *The attitude of citizens towards discrimination in Serbia* public opinion poll conducted in 2016, the third group in terms of exposure to discrimination consists of women and older persons. It is interesting to note that, although it was assessed that they are significantly exposed to discrimination, there is no great social distance towards these groups. According to the results of this survey, citizens also believe that the media pay the most attention to the equality of members of the LGBT population, and that they pay almost no attention to the poor and older persons, and that society should pay more attention to equality of people with disabilities (66%), poor people (67%), and older persons (56%). Although the survey sample is not large enough to allow analysis at the level of groups that are at increased risk of discrimination, it shows reduced trust among rural residents and among older persons in institutions. Social isolation certainly contributes to the reduction of trust in these groups and indicates the need to focus measures on their empowerment and the setting up services for information and assistance to citizens throughout the Republic of Serbia.

The same survey²⁶² conducted in 2019 was done using the same sample methodology as the survey from 2016, in order to gain a better insight into the changes in attitudes of citizens towards discrimination in the past three

262 *The Citizens' Attitudes Towards Discrimination in Serbia* survey, Commissioner for the Protection of Equality, 2019, available on the website: <http://ravnopravnost.gov.rs/izv%20b-5st%20b0%20d1%98-%20be-istr%20b0ziv%20b0nju-%20d1%98%20b0vn%20beg-mnj%20b5nj%20b0-%20bedn%20bes-gr%20b0d%20b0n%20b0-i-gr%20b0d%20b0nki-pr%20b5m%20b0-diskrimin%20b0ci-cir/>

years, such as the social distance from members of different groups. Among other things of relevance for the work of the Commissioner is the insight into the citizens' perception of the role of various actors in encouraging and combating discrimination. Citizens recognize the importance of the problem of discrimination in society to a greater extent than in 2016, and there is a slight increase in the number of people who believe that discrimination is illegal. Four fifths of the respondents are of the opinion that discrimination must not exist regardless of the group of citizens in question, and more than before, citizens support the introduction of special (affirmative) measures.

According to this survey, only 5% of surveyed citizens believe that discrimination is not present in Serbia. One fifth of the respondents believe that discrimination is fully present in Serbia, and half that it is mostly present.

When asked whether discrimination has decreased or increased in Serbia in the past three years, a quarter of respondents stated that discrimination in their opinion has increased, while 11% stated that it has decreased. In this survey, the number of those who believe that discrimination has decreased – has increased compared to three years ago, when such an attitude was expressed by 8.4% of respondents. Among those who believe that discrimination has decreased, most respondents are over 70 years old (20%). Also, the opinion that discrimination is the same as in the period of three years ago (48%), is the least represented among the respondents aged 70 and over. Although all age groups perceive discrimination as fully present, this attitude is still the least present among those aged 15 to 19 (9%).

Based on the answers to the question on how certain groups are placed in an unequal position in relation to other citizens (the answers being: a lot, quite, yes and no, a little, not at all and I do not know), the survey showed that the respondents believe that the groups most discriminated against are the poor (27%), Roma (25%), people with intellectual disabilities and mental disabilities (24%), followed by older persons and members of the LGBT population (21% each).

When asked if any of their relatives have been discriminated against in the last year, out of 13% of respondents who answered positively to this question, the least represented are those aged 70 and over (5%), and the most represented are those aged 15 to 19 years (19%).

According to the results of the *Labor Discrimination Survey*²⁶³ from 2019, an integral part of the *Special Report of the Commissioner on Discrimination in the Field of Labor and Employment*, the most common personal trait in their

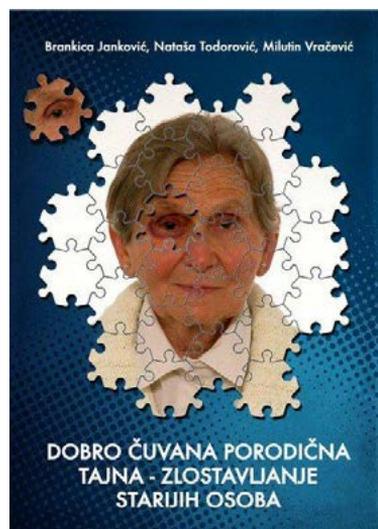
263 *Labor Discrimination Survey*, Commissioner for the Protection of Equality, 2019, available at: <http://ravnopravnost-5bcf.kxcdn.com/wp-content/uploads/2020/01/diskriminacija-na-trzistu-rada-FINAL.pdf>

personal experience of discrimination for all labor market actors is membership in political, trade union and other organizations, followed by age, which 33% of employers, 46% of the unemployed and 45% of employees consider a frequent basis for discrimination in the labor market.

In addition to the above, the Commissioner also conducts survey projects related to the position of certain social groups. When it comes to older persons, several surveys were conducted, the results of which are presented in more detail below, while the *The position of older persons in Serbia – social context* survey conducted in late 2020, is given in full, including data review and survey results.

All human research and surveys conducted by the Commissioner are available on the website: <http://ravnopravnost.gov.rs/izvestaji-i-publikacije/istrazivanja/>

3.2.1. A well-kept family secret: elder abuse



A 2015 survey titled *A well-kept family secret: elder abuse*²⁶⁴ conducted by the Serbian Red Cross in joint cooperation with the Commissioner and with the support of the United Nations Population Fund (UNFPA), showed that 19.8% of older persons had experienced some form of abuse or neglect compared to 11% of older persons who participated in the survey the previous year. The published survey results revealed that elder abuse is often preceded by discrimination caused by prejudice, stereotypes and ideas about the unproductiveness of older persons, and by the image that older persons are passive recipients of help and a burden on society. The survey showed that the greatest risk was that from financial abuse of older persons, and that 11.5% of respondents

reported at least one of the listed forms of financial abuse, that as many as 13.5% of older persons state that they do not fully decide how they spend their money, and 54% of older persons state that they support other members of the household. A special risk factor for abuse is in the attitude of older persons in Serbia that others have greater needs than them, so that, when they do not have control over their own income, they do not perceive it as financial violence. When it comes to neglect, according to the results of the survey, it can be

264 *A well-kept family secret: elder abuse*, Brankica Janković, Nataša Todorović, Milutin Vračević, Serbian Red Cross, Belgrade, 2015, available on the website: http://www.redcross.org.rs/slika_4096_Dobro%20cuvana%20porodicna%20tajna%20e-knjiga.pdf

concluded that it is more common among older persons with limited functional ability. Abuse and forms of violence against older persons are, above all, a form of human rights violation, and absence of respect, about which very little has been said so far, has mostly been a taboo topic. The attitude towards domestic violence has changed over time, shifting from a previous point of view that it is primarily part of the private sphere, toward being considered today a problem of much wider social significance that should be treated and included in various public policies. There is not enough data on the phenomenon of violence against older persons in the world, or in Serbia. Data from the World Health Organization show that 4% to 6% of older persons suffer some form of abuse in their home, but it is assumed that this number is much higher, as a large number of cases have never been documented nor registered, because older persons do not report violence out of fear, shame and stigma. The scarcity of information on violence against older persons indicates that it still remains a taboo not only in Serbia but throughout Europe.

This survey was conducted in order to determine how frequent the abuse of older persons in the Republic of Serbia is, and the frequency of different types of abuse: physical, mental, financial, sexual abuse and neglect. The intention was, above all, to provide visibility and solutions that will enable older persons to live with dignity, without fear and shame, in a safe and secure environment.



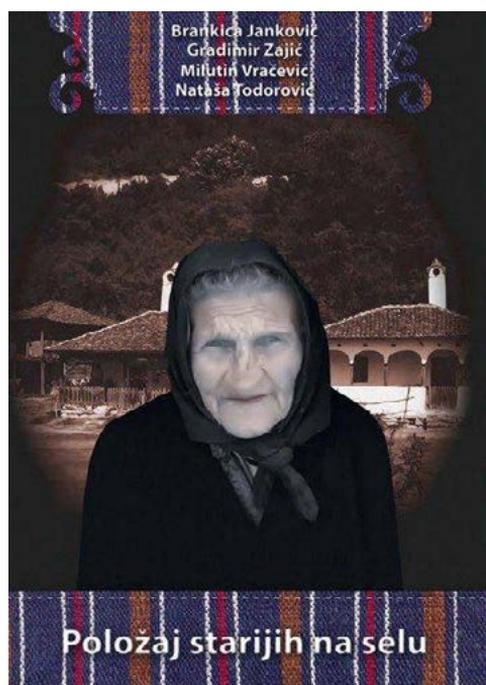
The recommendations given in this survey were:

- Improve the normative framework with amendments to the laws regulating legal protection against violence in order to eliminate shortcomings and obstacles to the effective and efficient protection of older persons;*
- Consider the need to amend the Criminal Code and define a specific criminal offense of neglect and abuse of older persons or as a qualified form of the criminal offense of domestic violence;*
- Improvement of family law protection, especially in terms of determining and implementing temporary measures to provide emergency protection to older persons, and specifying the principle of urgency;*
- Efficient work of courts, and consistent policy of punishment with the imposition of adequate sanctions according to the gravity of the committed crime;*
- Evaluate the National Aging Strategy 2006-2015, in order to determine the achieved effects and problems;*
- Start drafting a new National Strategy on Aging with a clear and detailed action plan, precisely defined activities, tasks and their bearers, and clearly defined budget lines;*

- *Improve the General Protocol on the conduct and cooperation of institutions, bodies and organizations in situations of violence against women in families and in partnerships;*
- *Better coordination of all services in charge of resolving cases of violence against older persons is needed, especially at the level of the local self-government units;*
- *Standardize the keeping of records of all competent services and bodies, and keep a single database on violence against older persons, in such a way to be age and gender sensitive in order to better monitor the risks that aging brings, and to monitor the success of interventions;*
- *Mandatory continuous education of professionals from various sectors, social workers, health workers, police, prosecutors, judiciary and professionals from the financial sector on how to deal with cases of violence against older persons;*
- *Provide continuous internal evaluation of the quality of services provided by professionals in order to improve the quality and availability of the work of professionals and its adaptation to the needs of older users;*
- *Working with perpetrators of domestic violence is an important step in the prevention of violence, which is why, in addition to the measures and procedures provided by the Law on Execution of Criminal Sanctions, it is necessary for the examples of good practice of Centers for Social Work working with perpetrators to expand to other institutions;*
- *Provide education for informal carers and community support and respite services;*
- *Promote SOS line services at the local level helping older persons who have been victims of abuse;*
- *Develop psychological-social assistance services intended for older victims of abuse in accordance with their specific needs;*
- *Provide free legal and social assistance to older victims of abuse;*
- *Recognizing the role of the civil sector in the prevention of elder abuse and their role in developing support and protection services;*
- *Informing older persons about their rights, and making available information on institutions, services and organizations dealing with protection against abuse and violence, and information on the work of independent bodies;*
- *Sensitization and work with the media on professional and ethically appropriate reporting on the problems of older persons, and above all on the problems of abuse and human rights violations;*
- *Continuously implement public awareness campaigns on the problem of abuse of older persons, while simultaneously spreading a positive image of aging, of older persons and their contribution to society;*

- Introduce appropriate curricula and contents related to older age and aging, and also the topic of intergenerational solidarity;
- In order to develop better intergenerational solidarity, it is necessary to educate and inform older persons in their community clubs and other places where they gather, about the relationship with young people, and the importance of understanding the whole life cycle and adequate acceptance of the aging process;
- Promoting the active role of older persons through self-motivation and self-organization into self-help groups, as a platform that enables solidarity and generational support;
- Include the academic sector and surveyers from various fields so as to deepen the knowledge that would enable a better understanding of the problem of violence against older persons and thus improve providing protection (clarification of various forms of abuse, circumstances under which they occur and characteristics related to victims and perpetrators of elder abuse, etc.).

3.2.2. The position of older persons in the countryside



A survey under the name of *The position of older persons in rural areas in Serbia*²⁶⁵ was conducted by the Serbian Red Cross and the Commissioner for the Protection of Equality, with the support of the United Nations Population Fund (UNFPA), in the period August-November 2016. This survey allowed insight into the challenges faced by older persons in rural areas, their families, but also local communities caused by the reduced population density in the countryside. Survey data have made it possible to identify challenges and create recommendations that should contribute to the promotion of equality, improve the quality of life in older age, and ensure the dignity of older people living in rural areas.

265 *The position of older persons in rural areas in Serbia*, Brankica Janković, Gradimir Zajić, Milutin Vračević and Nataša Todorović, Serbian Red Cross, Belgrade, 2016, available on the website: <http://ravnopravnost.gov.rs/wp-content/uploads/2019/12/polozaj-starijih-na-selu-web.pdf>

Reduced access to health and social care services, reduced interest among professional service providers in working in rural areas, a reduced number of informal support networks, frequent migration to urban areas, and insufficient information on services and rights, have all been identified as key challenges faced in the fight to achieve equal treatment of older population in Serbia, in addition to frequent non-recognition of mental illness (depression, dementia). Moreover, the inefficiency of transport services in areas with low population density, and limited access to transport vehicles adapted to the needs of older persons, represent an additional challenge. Last but not least, there is the issue of aging in one's own home, which, in such conditions, leads to social isolation, as there are few and poor social and cultural activities, or learning opportunities, and there is a lack of equipment that would facilitate independent living of older persons in rural areas.

The results of the survey showed that the social profile of older persons in the countryside is heterogeneous, layered and diverse. Changes in the structure of the family and household have changed the traditional family roles. The 'white plague' (ever lower birth rates) and frequent migrations to urban areas reduce the chance of being supported by one's own family in older age. Among the participants in the survey, 34% live in single households, while in 63% of households there are no members under 65 years of age.

Older people living in rural areas are in poor health and face numerous obstacles in getting health care. The results of the survey showed that health care is only partially implemented, that 43% of older persons needed a doctor but did not go to the doctor they needed. Almost half of older persons living in rural areas (44%) have difficulty walking, and 3% are permanently in bed or in a wheelchair.

The subjective feeling of life of older persons in the rural areas is dull. One in four think they live badly or very badly, and the majority (54%) feel they live neither good nor bad. Older people in the countryside are at greater risk of social exclusion than of losing their functional capacity to take care of themselves. For the most part, they are outside the institutional system of services for help and support for older persons, and they only get informal services, help and support. The expectations of older persons in rural areas from the state are not unrealistic and are based on their position and living conditions.

The largest number of respondents estimate that they have never been exposed to discrimination (56.4%), a fifth said sometimes (19.6%), 11% very rarely, and only 7.3% of respondents stated that they are often exposed to discrimination. 86% of respondents expressed a positive attitude towards gender equality, 8.9% were undecided, and 3.8% had a negative attitude.



The following recommendations resulted from this survey:

1. Social cohesion and social inclusion:

- *Actively work on achieving balanced economic and social development aimed at reducing disparities between regions, cities and villages, with infrastructure development planned based on realistic expectations, and, above all, a good network of local roads as a key prerequisite for providing equal opportunities for older people in rural areas;*
- *Provide an appropriate model of transport services that will enable the connection for more remote, less populated areas;*
- *Ensure greater participation of older people in social life, especially those at risk of poverty or social marginalization;*
- *Actively work on encouraging intergenerational solidarity and creating a more favorable environment in which solidarity contributes to social development;*
- *Affirm examples of good practice in the civil sector in their support for older persons in rural areas (e.g. the village trips, food on wheels - cooked meals for older persons, delivery of food and medicine, etc.).*

2. Social and health care and security:

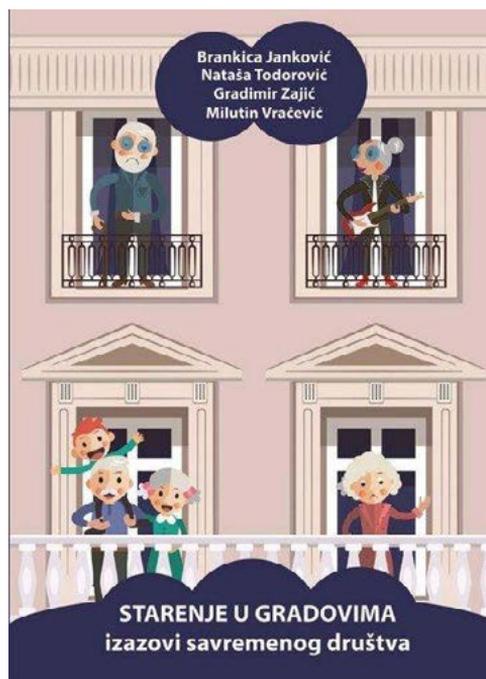
- *Define and implement sustainable material-financial assistance that would provide a minimum social security for older persons in the countryside who have no income, or whose income is insufficient to meet subsistence needs (such as the lowest amounts of agricultural pensions);*
- *Strengthen the capacity of social work centers to respond to all entrusted tasks, and to be able to provide quality mapping of the needs of older people in the countryside using all existing capacities (e.g. local offices, local communities, etc.);*
- *Increase the availability and diversity of social care services in rural areas by introducing mobile services and other innovative services that respond to specific needs in a given context (e.g. rural host, informal carers, tele-assistance, occasional and temporary accommodation services, ie care for lonely older persons from remote and hard-to-reach villages in the winter months, etc.);*
- *Better linking of money benefits to services, and providing more efficient control of how services are provided by strengthening and improving the organizational capacity of inspection services;*
- *To improve the amount of information that older persons residing in the countryside get on all their rights and services, primarily concerning social and health care, but also to simplify the procedures for their exercise with better use of new information technologies;*

- *Encourage the formal employment of all rural workers in agriculture, especially women, given their high participation and capacity in this industry;*
- *Increase the availability of rural health care services, in particular by strengthening this care in the areas of home treatment and care, palliative care, strengthening patronage services for visiting and helping older persons, and innovative solutions that will use widespread and accessible communication technologies (e.g. counseling through telephone, Internet, radio and television);*
- *Increase the frequency and coverage of preventive health check-ups by state health insurance and provide a better distribution of funds allocated for health care of older population so as to reduce health risks associated with older age and improve the general health of the population.*

3. Security:

- *Improve mechanisms for the timely recognition of all forms of violence against older persons and the provision of adequate protection, taking into account all specifics related to them (e.g. negative stereotypes, fear, shame, discrimination, difficult recognition, etc.);*
- *Establish good coordination of all responsible actors, at the national and local level for mapping the security risks to which older persons may be particularly exposed, and then planning and organizing an effective response, adapted to the needs of older persons, both in terms of preventive action and emergency intervention, especially in emergency situations (distribution of food, medicines, medical assistance, etc.);*
- *Before assessing possible security risks, and during emergency (crisis) situations (e.g. floods, weather disasters, earthquakes, etc.), in certain cases it is necessary to evacuate older persons. It is necessary to pay special attention to the necessity of urgent action, reduced mobility and ability of self-protection of older persons, and other specifics in a given situation (e.g. disposal of livestock, animal feed, agricultural machinery, etc.);*
- *More effective protection of the property of older persons in the countryside, taking into account the exposure to security risks, such as theft, to find adequate solutions in the conditions of reduced public service infrastructure.*

3.2.3. Aging in Cities – Challenges of Modern Society



The *Aging in Cities – Challenges of Modern Society*²⁶⁶ survey was conducted jointly by the Serbian Red Cross and the Commissioner, with the support of the United Nations Population Fund (UNFPA), as a continuation of a cooperation started in 2015 when the survey *A well-kept family secret - abuse of older persons: position of older persons in rural areas in the Republic of Serbia* survey was conducted in 2016. The aim of the new survey, conducted in September and October 2017, was to examine the needs of older persons in urban areas in the Republic of Serbia, to determine the availability of services, primarily health and social care, and other public services, including transport, and then to offer recommendations for improving their quality of life, and to

highlight and promote examples of good practice.

The results of the survey indicate that a large number of physical, social and economic barriers, ingrained prejudice and stereotypes, but also lack of inclusive public policies that would include representatives of all age groups in urban planning and development, make it difficult for older people to fully enjoy their rights.

The results of the survey showed that the greatest need older persons in cities have is for care services in their own homes, and then also for greater availability of health services and public transport services.

27% have a current need for support, and one third (33%) of older persons in 2017 had a need for care in their home. About a quarter of respondents (23%) stated that they turn to institutional help and support, while a majority relies on family help and support – within the family (43%) and from relatives (10%). When it comes to the availability of services to older persons, there is a relatively

266 *Aging in Cities – Challenges of Modern Society*, Brankica Janković, Gradimir Zajić, Milutin Vračević and Nataša Todorović, Serbian Red Cross, Belgrade, 2018, available on the website: <https://www.redcross.org.rs/sr/resursi/%C5%A1tampane-publikacije/starenje-u-gradovima-izazovi-savremenog-dru%C5%A1tva/>

good level of knowledge on existing institutions for help and support, with a higher level of knowledge on health services than on social protection services.

Further results of the survey show that public space and facilities (post offices, banks, centers for social work, etc.) are completely inaccessible for 16% of respondents. 17% are unable to use public transport in the cities they live in. In cities where it exists, public transport is unavailable for 22% of older persons.

The highest number of older persons (46%) rate their health as 'neither good nor bad', and the number of older persons who rate their health as bad is 30%. 36% of older persons have difficulty walking. Most respondents have had a chronic illness for a long time (76%), and for more than half (55%) chronic illnesses are a hindrance to performing their daily activities. One quarter needed a doctor, but did not go to one.

Every tenth respondent has an income below the absolute poverty line, and 8% of older persons in urban areas are on the 'poverty line' of absolute poverty. One fifth have a strong feeling of subjective poverty (21%), and almost half of the surveyed (46%) assessed that it is difficult or very difficult to live and 'make ends meet' with their total income.

One third of respondents (33%) believe that discrimination based on age is frequent and that some citizens cannot exercise their rights just because of age. When asked about their personal experience with age discrimination, 9% of older persons stated that they were often discriminated against because of their age, and 23% of them that they were sometimes discriminated against. Respondents were dissatisfied with the attitude towards older persons, mostly in municipal services (21%), in health care institutions (19%) and in other institutions in their city (15%).

When it comes to expectations from the state, the majority of respondents believe that more attention should be paid to care for older persons, through assistance and services (20%), and ensuring better health care for older persons (13%).

The survey findings lead to the conclusion that it is necessary to invest in urban infrastructure, without architectural barriers, to enable free and safe movement of pedestrians, to make greater investments in affordable public transport, encourage social engagement of older persons through work, education, volunteering, arts and recreation, to have balanced development networks of primary health care institutions, provide information to older persons about changes in the system of health and other services intended for them, organize training for informal carers, promote healthy living habits and combat age discrimination. The Sustainable Development Goals (SDGs), adopted by the

United Nations member states in 2015, defined, among other things, the concept of inclusive urbanization. This means that older people should be part of the urban planning and decision-making process including elements such as safe and affordable public transport, but also safe, inclusive, physically accessible public spaces, such as parks and other green spaces.



The following recommendations emerged from this survey:

In the field of social and health care:

- *Work on preventing chronically non-communicable diseases in cities, by raising the awareness of all citizens about the importance of practicing healthy lifestyles, and access to a healthy diet and physical activity;*
- *To regularly conduct public campaigns on the importance of healthy aging and organize activities on common green areas so as to enable the practice of healthy lifestyles and education and intergenerational encounters;*
- *Adequate and timely information on changes in the health system and services intended for older persons;*
- *Evenly developed network of primary health care institutions, better designed services that cover a wider range of needs in accordance with the needs of older people living in the city, a combination of health and social services;*
- *Establish a consistent and effective long-term care system;*
- *In Belgrade, there is the Institute for Gerontology and Palliative Care, an important institution in providing services and counseling work with 65+ people. It is recommended that similar institutions be developed in other major cities;*
- *Educate a larger number of different profiles of caregivers, because the service of home care assistants is not enough to meet the needs of older persons, bearing in mind that services range from nursing services to bedridden patients, to paying bills and reading books;*
- *Develop a training service for informal carers, develop day care centers for informal carers and support the development of self-help groups for informal carers;*
- *Continue with further deinstitutionalization of social protection services (day care centers, clubs) that have proven to be important for the quality of life of older women and men living in urban areas.*

For public space and green areas:

- *Traffic signals must be safe and adapted for older persons (duration of pedestrian traffic lights should be long enough for older persons to cross the street or there should be pedestrian islands between wide boulevards),*

lying policemen and pedestrian crossings should be placed near important institutions, sidewalks should be flat, wide and well-maintained, without holes and not slippery, which would reduce the risk of falls and injuries, especially for older persons, but also members of other generations;

- *Find adequate architectural solutions and remove physical barriers that make it difficult for older people, with reduced mobility, to move and live in the city, provide tastefully designed, maintained and safe green and public areas that encourage physical activity, social interactions and prevent social isolation;*
- *Enhance the work of communal services in providing public and green spaces, especially during extreme climate conditions;*
- *Adoption of measures, economic incentives, implementation of media campaigns and increased implementation of regulations in order to reduce the use of motor vehicles and reduce the driving speed, and the construction of bicycle paths, as an alternative to motor vehicles.*

For public transport:

- *Increasing investment in public transport to make it adequate, accessible, safe and available, especially to older persons and women;*
- *Educating public transport drivers about older persons who have mobility difficulties and have difficulty moving, and who use public transport, harmonization of some transport lines with the work of specialists from health centers;*
- *The use of public transport in campaigns to promote healthy lifestyles and prevent chronic non-communicable diseases, but also to promote intergenerational solidarity and the fight against ageism and discrimination.*

Housing:

- *Develop adaptation services for the space (apartment or house) where the older person lives, in order to ensure safety and security in their own apartment and reduce the risk of falls and enable aging in their own home;*
- *Promote a greater role for the building manager, as a responsible person who can alert and identify some risks related to older persons (poverty, abuse, loneliness, exclusion, physical and mental illness) and contact the competent institutions. Promote good-neighborly help, especially in high-rise buildings, where neighbors can help older persons who have problems walking and who are chronically ill.*

Social inclusion of older persons:

- *Promoting and encouraging volunteer work, both of older persons themselves, which promotes healthy and active aging, and volunteer work of young people, which develops solidarity and human values among people of different generations;*
- *Create opportunities and a platform for social engagement of older people in cities through work, education, arts and recreation;*
- *Promote the digital inclusion of older people, as part of a human right that enables older women and men to receive guaranteed services;*
- *Promote a positive image of aging and older age at the local and national level, an important activity in the fight against ageism and age discrimination, which are negative factors that slow down the development of society.*

For cities in Serbia:

- *To include local self-governments in the Republic of Serbia in the “Cities and Communities Adapted to Older Persons’ project’ promoted by the World Health Organization, as the first big step towards inclusive cities adapted to its inhabitants and the first example of such local self-government project in Serbia.*

3.2.4. The Position of Older Women in Serbia



The *Position of Older Women in Serbia*²⁶⁷ survey was conducted in October 2017 with the support of the United Nations Agency for Gender Equality and Women’s Empowerment – UN Women. The purpose of this survey is to gain a better insight into the position of older women in the Republic of Serbia and provide more detailed information on their position in the following areas: health, socio-economic status, formal and informal work, use of social protection services, security and violence, education and training, community

²⁶⁷ *The Position of Older Women in Serbia*, Belgrade, 2019, available on the website: <http://ravnopravnost.gov.rs/wp-content/uploads/2019/08/Polozaj-starijih-zena-u-Srbiji-10.4.2019.-digitalna-verzija.pdf>

living and social relations, use of transportation and movement, participation in legal affairs.

The analysis of the survey results showed that 21% of older women rate their health as good or very good. A relatively large number of respondents see their health condition as satisfactory (37.9%), while 41.1% of older women see their health condition as poor or very poor. The largest number of respondents state that they have chronic diseases and conditions that cause pain (45.5%), followed by difficulties in performing physical activities (31%).

Within the focus groups held as part of the survey, the participants listed several problems they face when exercising their right to health care - such as discrimination in the use of emergency services, long waits for specialist services, rudeness and disrespect from specialist doctors, referrals from state health institutions to private practice in which the same doctors work, and high prices of medicines.

The analysis showed that, in marital unions, in 71.3% of cases the husband is the owner of the real estate in which they live, and the wife in 14.5%. Ownership of real estate is also related to the structure of the household, so a woman is most often the owner of real estate if she lives alone (69.7%), while in other situations real estate is more often owned by her husband.

As the most common source of income, older women state an older-age pension (57.3%), followed by their late spouse's pension (29%), 3.9% of women had no personal income, and 1.1% used financial social assistance. The analysis showed that 17.2% of women estimate that their monthly income is sufficient to meet their needs, and 45.6% of women state that they still lack a lot of funds to meet their needs. A quarter of older women state that they manage to pay regular monthly expenses without problems (25.5%), 44% state that they have certain difficulties, and 30.5% that they have great difficulties to pay monthly expenses. More than half of the women who participated in the survey were dissatisfied with their economic position (54.4%).

According to the results of the survey, women aged 65 to 69 (17.9%) were most often working, while no women older than 79 worked. The share in paid and unpaid work is the highest among women with higher education (17.6%), and it decreases with the level of education, and with the size of the household, so women from large households stated more often that they worked. According to the statements of the respondents, women aged 65 to 69 are the most interested in engaging in work (24.4%), while women aged 80 to 84 also state this. Women who graduated from college are the most interested in engaging in work (29.8%). In the last six months, 19.5% of older women were involved in agricultural production. 88.3% of women did housework and spent an average

of 21 hours a week doing housework. Based on this, we can conclude that older women spend an amount of time on household chores that is equivalent to working part-time. However, the largest number of women think that the amount of work at home is fine (62%), while 28.2% of respondents think that they have more work than they would like.

Although 58.9% of older women see their health condition as satisfactory or good, only 38.6% of them state that they can perform daily activities without hindrance. In other words, two thirds of older women (61.4%) are limited by their health condition to a greater or lesser extent in performing daily activities. Older women most often have difficulty doing housework and gardening (45%), then grocery shopping (33.4%), and slightly less than a fifth also need support in maintaining personal hygiene, dressing and moving around their home (17.5%). 12.5% of older women need support in using transport.

4.5% of older women use social protection services. The use of social protection services is related to the independence of the beneficiaries, so the services are most often used by older women who state that they have significantly limited ability to perform daily activities (8.8%), slightly less women who have a slightly limited ability to perform daily activities (5.3%), while among women who are independent 0.6% use some of the social protection services.

When the exposure to violence was examined, the analysis of the results showed that 14% of older women experienced some form of violence, of which 4.9% stated that they were exposed to multiple acts of violence, and 7.2% of women were neglected. Among the respondents, 8.6% stated that they had been exposed to some form of financial violence (theft, fraud, coercion), while 91.1% of older women stated that they had not had such an experience. In addition, 4.1% of older women reported being exposed to physical violence. In the place where older women live, they most often feel safe or very safe (59.9%), while 23.3% stated that they feel either insecure or very insecure.

Only 4.1% of older women participated in organized activities aimed at acquiring new knowledge, while 14.5% of women were interested in such activities. The results of the survey showed that this type of activity primarily included women with a university degree (11.9%), women who live alone and who have never married (12.5%). 16.8% of older women were involved in community activities, such as visiting a theater, concert, exhibition or other cultural event, which decreases with age. Women living in the city are more involved in cultural activities (21%) than women living in the countryside (6.7%).

The results of the conducted survey showed that 40.8% of older women do not have any problems when using public services, and 27.9% have significant difficulties or are completely unable to go to the post office, the bank, the doctor's

and the like. Difficulties in using public services and public transportation are growing over the years. Women aged 80 to 84 (61.5%) and 85 and older (50%) have the most difficulties in accessing public transport. In addition, the percentage of women living in rural areas who cannot use public transport even though they need it is higher (37.1%), compared to older women living in cities (22.4%). The largest number of respondents believe that society does not pay enough attention to the position of older women (80.2%).



The survey resulted in the following recommendations:

1. In the field of socio-economic position:

- *Perform a detailed analysis of the cost structure of older persons' households;*
- *Enable the harmonization of pensions with the real cost of living of older persons;*
- *Consider the possibilities for increasing the coverage of older persons with the right to financial social assistance;*
- *Introduce additional measures of material support to older persons in poor socio-economic situation;*
- *Continuously carry out activities for all age groups to raise awareness of the principles of gender equality.*

2. In the field of health care:

- *Review the coverage of costs of health services from the budget of the Republic of Serbia in the direction of enabling an increase in their volume for older persons;*
- *Enable greater availability of specialist health services by reducing the waiting time for specialist examinations, enabling the prescription of drugs that have lower prices, more efficient sanctioning of the practice of state health center doctors referring patients to expensive services in the private health system;*
- *Organize a larger range of services that would be provided at home and in the field, especially in rural areas;*
- *Organize activities to encourage recreational activities and regular check-ups for disease prevention;*
- *Inform patients about and simplify procedures for reporting discrimination in health care.*

3. In the field of social protection:

- - *Enable an increase in the coverage of existing support services, continuously inform older persons about the opportunities available to them and the procedures for their realization;*
- - *Encourage further development of various support services for older persons within the social protection system;*
- - *Promote the role of civil society organizations, especially those involved in the implementation of various community support services.*

4. In the field of participation in cultural and other activities in the community:

- *Ensure the accessibility of facilities where public services are provided, public spaces and especially public transport adapted to the needs of older persons;*
- *Provide more effective information to older women on opportunities to participate in existing community activities, encourage the development of new programs to ensure greater involvement of older women in activities that encourage their personal development and active aging;*
- *Influence the development of voluntary support for older women, especially those living in rural areas;*
- *Encourage computer literacy of older women.*



Mina Jecić, Požarevac, 2017.

3.2.5. The position of Older Persons in Serbia – social context, data review and survey results

3.2.5.1. Introduction

All relevant indicators - quantitative and qualitative, which take into account the aging population, migration, longer life expectancy, mobility and declining population trends across Europe, indicate the need for society to adapt to these circumstances. It is necessary to act quickly and effectively, with an inclusive approach in the implementation of a range of activities on the broadest social level. Statistical forecasts, both regionally and globally, predict that in 2080 in the European Union (EU) alone, older people will make up over 28% of the population, while it is estimated that by 2040 older people will make up between 23.6% and 25.2% of the population in the Republic of Serbia.

Demographic data in the previous two decades in the Republic of Serbia indicate a pronounced demographic aging of the population - falling birth rate, high mortality, negative natural increase, negative migration balance, low fertility, depopulation and intensive aging of the population, with 'feminization' of aging, increasing dependence of older persons, and the rapid decline of the rural population.

Having in mind the mentioned statistical data, in the past period, numerous surveys were conducted and numerous reports on the position of older persons were made. Their results show the unfavorable position of older persons, difficult exercise of certain rights, increased need for various services and support services for everyday life, exposure to discrimination and neglect, especially against women, neglect of the specifics of certain age groups of older persons who represent the most heterogeneous social group. However, when reviewing the situation and future trends in terms of improving the position of older generations, there was no more intensive involvement of older persons in these processes, as active factors in an inclusive approach to creating measures and activities aimed at improving their position, given that survey has been conducted so far to a lesser extent relied on how older people see their own position and opportunities to meet their needs. As older people are often isolated and do not have the opportunity to talk about their experiences, which are invaluable for finding adequate solutions, survey on perceptions and attitudes of older people seems to be an inevitable step in formulating public policies, which should be included in the new strategic document that would comprehensively address aging policies. The survey on the position of older persons in the Republic of Serbia was conducted with the support of the United Nations Population Fund, and its results will be part of a broader document within a special report on

the position of older persons to be prepared by the Commissioner for Equality of the Republic of Serbia.

Within this survey, which in a way represents a certain supplement to previously conducted survey, especially on the position of older persons in rural and urban areas, conducted by the Commissioner for Protection of Equality and the Serbian Red Cross, and supported by the United Nations Population Fund in Serbia, the circumstances in which older persons live were looked into, their needs, the limitations and problems they face in exercising their rights, and realizing their full potential. The survey helped get a clearer picture of the opportunities available to us, and especially how older persons themselves see what policymakers need to do, in order to enable a dignified older age, enjoy all human rights and freedoms and respond adequately to their needs, respect the potentials and thus improve the position of both older persons and all other social groups that will also grow older. The ultimate goal is certainly to create a society for all generations and a better quality of life for all its members.

3.2.5.2. Reports and survey projects

The demographic situation in the world and its implications for the position of individuals, but also for society as a whole, have been dealt with by various bodies and organizations of civil society around the world, and among the most important are those survey projects and reports conducted by the United Nations and the European Union, bearing in mind that they have a general character, but also that they are largely related to the situation and the need for action in the Republic of Serbia. An overview of the reviewed reports and survey projects is provided in Annex 1 of this text, and below is a brief overview of the conclusions and recommendations arising from them, divided into 1) a part related to reports and survey projects of international and foreign bodies and organizations and 2) a part that refers to survey projects and reports made by Serbian institutions and organizations.

Reports and public opinion research projects conducted by the United Nations, the European Union and other bodies and organizations

At the United Nations level, several public opinion research projects have been conducted and a number of reports have been published (listed in Annex 1 of this document). What can be deduced as a conclusion from these texts, primarily refers to:

- challenges in monitoring the implementation of the Madrid Action Plan, including: lack of available data in many countries, especially by year; the

impossibility of conducting comparative analysis between countries in certain regions, due to the lack of agreed indicators at the regional level; difficulties in collecting contributions from all relevant actors in countries where there are no coordination units for aging; lack of capacity and limited national institutional framework in some countries and regions to be involved in the process of reviewing the implementation of this document at the national level;

- the chances for improving the implementation of the Madrid Action Plan on Aging, which are seen primarily through the implementation of long-term care, bearing in mind that only 5.6% of countries in the world have legislation covering long-term care for all who need it, and it can be an important source of job creation in the future. It is necessary to create fiscal space for investment in service policies and quality infrastructure, which is essential for eliminating major shortcomings in the coverage of long-term care services and the deficit of decent work in this area;
- the need to build an inclusive society in every sense, national plans and sustainable development strategies should have priorities related to aging, and special attention should be paid to the position of older women, who are in an unequal position in relation to men, and who will in the future, in line with demographic trends, be more and more;
- the need to pay special attention to the heterogeneity of this population and many factors that contribute to the specific and increased vulnerability of its members, such as older persons in rural areas, people with disabilities, etc., especially taking into account the protection of human rights and the position of this population in crisis and/or emergency situations, such as the Covid 19 virus pandemic, whereas older persons are at greater risk of serious illness and death from Covid 19;
- the future of work, and the benefits that older people should benefit from, changes in relation to new employment trends, promotes greater and longer effective inclusion of older people in the labor market through flexible work arrangements, increased opportunities for partial retirement and adapting jobs to different needs of older persons, especially persons with disabilities, while providing access to lifelong learning;
- the fact that older people are particularly vulnerable to economic insecurity and poverty because the social protection system does not have sufficient coverage and adequate benefits, and personal property and savings are usually not enough to guarantee adequate security for life, making aging a significant, additional risk of poverty;
- the challenge in terms of coverage and adequacy of pension benefits;
- needed to ensure a fair approach to human aging based on human rights, taking into account gender differences between men and women, mentioning

- the existence of risks and vulnerabilities of older women, paying particular attention to the prevalence and risk of elder abuse;
- the need to increase access to ICT while promoting digital literacy of older persons;
 - strengthening health policies and programs for the prevention, detection, diagnosis, treatment and care of non-communicable diseases, including Alzheimer's disease and dementia.

Given that the Republic of Serbia is in the process of European integration, the assessment of the situation in all areas is sublimated in the progress reports, which are prepared every year by the European Commission. In this regard, some parts of these reports were presented, in order to better understand the situation, overcome the shortcomings and problems that need to be solved. These reports, with an emphasis on the latest, the *2020 Report*,²⁶⁸ state that, in the area of social inclusion and social protection, in 2018, it was considered that 7.1% of the population lived in absolute poverty (7.2% in 2017). According to the Income and Living Conditions Survey (SILK), conducted for the sixth time in 2018, the at-risk-of-poverty rate was 24.3% (EU-28 17.1%), and the at-risk-of-poverty rate or social exclusion rate was 34.3% (EU-28 21.8%). As in previous years, there is more poverty in rural than in urban areas (10.4% vs. 4.8%). About 10% of employed people are at risk of poverty, which means that they cannot meet their basic needs, despite their work. About 58.4% of the population is subjectively poor, i.e. when asked about the household's ability to 'make ends meet', it answers with 'difficulties' and 'great difficulties', which puts Serbia at the very bottom of the list of European countries conducting the SILK survey.

This report also states that the new Social Protection Strategy in Serbia for 2019-2025 has not been adopted yet, nor has the new Law on Social Cards and amendments to the Law on Social Protection. The coverage and adequacy of cash benefits to meet basic needs are insufficient to cover them. In addition, the quality and coverage of services needs to be improved, and supervisory and regulatory mechanisms, monitoring and evaluation need to be strengthened. No progress has been made in social protection services at the local level or in the deinstitutionalisation process. The system of earmarked transfers introduced in 2016 is still not applied systematically and transparently. Budget allocations are now available on an annual basis, but without multi-annual commitments that would allow for the continuity of service delivery at the local level and an evidence-based prioritization and monitoring system.

This report also reiterates the recommendations given in the previous one, which refer to the need to ensure the application of social protection regulations

268 *2020 Report*, European Commission, available on the website: <http://europa.rs/godisnji-iz-vestaj-o-srbiji-2020/>

on the entire territory of the country evenly, and recommendations related to gender equality, prevention of discrimination on any grounds, fight against violence and etc.

At the level of the European Union, several reports and survey projects have been done (list in Annex 1 of this report), in which, in short, the following is indicated:

- the level of life satisfaction and happiness in the candidate countries is still low compared to the EU member states, 62% of respondents in Serbia express concern about income insecurity in older age;
- an increasing number (and share) of older people live alone (especially older women) and constitute a particularly vulnerable group in society, at increased risk of poverty, social exclusion or isolation;
- decision-makers have two main concerns in this area: the level of pension expenditures - which are expected to increase both in absolute terms and as a share of gross domestic product; pension adequacy - that is, how current and future pensions can help prevent older-age poverty and maintain the income of older people during retirement. An appropriate policy package needs to be adopted, including adequate health care, taking into account life expectancy and the challenges it poses, as well as gender differences in life expectancy and income disparities between men and women;
- the decreasing number of able-bodied population and the increasing number of older persons in society, condition the need to encourage older persons to remain part of the labor force for as long as possible. For Serbia, it is estimated that the labor force percentage will decrease by 20% by 2050;
- Serbia does not have a comprehensive long-term care policy that would meet the needs of aging population, the coverage of services is extremely low (in 2016 only 0.5% of older persons were covered by public institutional care, 1% were covered by day care and home care services, and about 7% received cash compensation for care and assistance), the funds allocated are insufficient (in 2017, only 0.45% of GDP was spent on all long-term care services and benefits for older persons), and older persons mostly rely on informal care, either by family members or by lower-skilled workers through private arrangements, which is an additional problem because such care is mainly provided by women, which further burdens their current and subsequent position;
- older age has particularly negative connotations and 'older people' are often seen as having no value for society, which is a paradigm that needs to be changed, especially taking into account the position of older women.

Reports and public opinion research projects conducted by Serbian institutions and organizations

In the past few years, the survey work of various organizations regarding aging and the position of older persons, and the implications of the demographic situation in the Republic of Serbia on various segments of social life, has been relatively intensified. This is also the case in several reports of state bodies, such as the *Second National Report on Social Inclusion and Poverty Reduction in the Republic of Serbia for the Period 2011-2014*²⁶⁹ and the *Third National Report on Social Inclusion and Poverty Reduction in the Republic of Serbia for the period 2014-2017*,²⁷⁰ where it was pointed out that employment is difficult for people older than 50, that the lack and difficult access to health and social protection services contributes to the exclusion and discrimination of particularly vulnerable categories of older persons in rural areas, and that both older persons and children are socially excluded. It was also stated that no significant progress has been made in the development of social protection services provided by local self-government units. The accommodation service is the most represented social protection service, while non-institutional services in the mandate of local self-governments are insufficiently and unevenly developed. Among the services, the most widespread are daily services in the community, namely home help for older persons and adults (in 122 local self-governments) and day care centers for children with disabilities (in 68 municipalities and cities). These two services include over 17 thousand users. The coverage of older persons with home help services (1.1% of the total population 65+) is low, even compared to European countries that rely heavily on a similar model of long-term care in terms of the relationship between cash benefits and services, and accessibility is particularly insufficient in rural areas. Apart from these two, all other services are provided in a small number of municipalities and cities.

The position of older persons in our society has been dealt with by civil society organizations, whose goals are especially aimed at improving the quality of life of older persons, including the highest organizations members of the Humanas network (consisting of 16 civil society organizations), the Serbian Red Cross, the Commissioner for the Protection of Equality and the Cabinet of the Minister without Portfolio in charge of Demography in the Government of the Republic of Serbia.

269 *Second National Report on Social Inclusion and Poverty Reduction in the Republic of Serbia for the Period 2011-2014*, October 2014, available on the website: <http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2015/07/Pregled-2.-nac.-izvestaja-CIR.pdf>

270 *Third National Report on Social Inclusion and Poverty Reduction in the Republic of Serbia for the Period 2014-2017*, Belgrade, November 2018, available on the website: <http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2018/11/Treci-nacionalni-izvestaj-o-socijalnom-ukljucivanju-i-sm njenju-siromastva-nacrt.pdf>

The main conclusions and recommendations that follow from all survey projects (listed in Annex 1), indicate:

- the position of older persons in Serbia, which is relatively unfavorable compared to older persons living in the European Union (in the age group over 65, 8% of men and 17% of women are not covered by any form of pension),²⁷¹ which is why it is necessary to improve the institutional mechanisms for monitoring the living conditions of older persons, monitoring the implementation of policies and measures and assessing their effects. Older persons face a number of economic, social and health challenges, and discrimination and various prejudices, isolation, and in many cases violence, abuse and neglect;
- the need to adopt a national strategic document on aging in order to establish and coordinate measures and activities to improve their economic status and access to human rights. In particular, it is necessary to actively combat ageism and negative, discriminatory stereotypes and prejudices;
- the need to provide material security in older age, bearing in mind that a large number of older people from various studies point to the lack of financial resources to meet basic living needs, while eliminating differences in pensions between the sexes while creating a model to address the risk of poverty among older women with low pensions living alone;
- taking action to combat all forms of violence and economic abuse (almost 20% of older people have experienced some form of abuse or neglect, and 11.5% of respondents from the survey reported at least one form of financial abuse, and it is known that older people do not report violence due to fear, shame and stigma. A special risk of abuse is the attitude of older persons that others have greater needs than them and that they do not perceive the fact that they do not have their own income as financial violence),²⁷²
- improving the portfolio of social protection services for older persons, long-term and palliative care, with the provision of systemic support for family caregivers (work from home, several days of paid leave, harmonization of duties at work and in the family, use of paid leave in case of emergency, flexible working hours), and the development of community support services (caregiver education, information services, day care centers);
- the need to analyze the coverage of costs of health services from the budget of the Republic of Serbia in the direction of enabling an increase in their volume for older persons, enabling greater availability of specialist health

271 *Initiative for Social Inclusion of Older Persons – Successes and Lessons Learned*, Serbian Red Cross, 2019, available on the website: <https://www.redcross.org.rs/media/5817/socijalna-inkluzija-srb.pdf>

272 *A Well-kept Family Secret: Elder Abuse*, Serbian Red Cross, Belgrade, 2015, available on the website: http://www.redcross.org.rs/slika_4096_Dobro%20cuvana%20porodicna%20tajna%20e-knjiga.pdf

services by reducing the waiting time for specialist examinations, enabling prescribing of drugs with lower prices, more efficient sanctioning of the practice of state health centers' doctors referring the patients to expensive private health system services, organizing a larger range of services to be provided at home and in the field, especially in rural areas;

- the development of palliative medicine aimed at a comprehensive patient care at the end of life, while providing an approach that improves the quality of life of patients and their families. Providing appropriate health services and increasing their availability, balanced development of the network of health care institutions of primary health care, ensuring that older persons are informed about changes in the system of health and other services;
- encouraging intergenerational solidarity and the exchange of knowledge, experiences and support as part of all public policies, including those dealing with health, social protection, financial security, education, the labor market and employment, or the development of a specific strategy to create appropriate programs, especially in local communities followed by a campaign to promote intergenerational solidarity;
- the need to pay special attention to certain categories of older persons, who are not a homogeneous group, taking into account primarily the needs of older women who are particularly vulnerable and have a longer life expectancy, Roma men and women, older persons in residential institutions and the like. Continuously carry out activities to raise awareness of the principles of gender equality, at all ages;
- various challenges faced by older people in rural and urban areas. Challenges of the rural population include a reduced access to health and social care services, lack of transport, reduced interest of professional service providers in working in rural areas, reduction of informal support networks but also strengthening the capacity of informal carers, insufficient information, frequent failure to recognize illness (34% of all participants in the survey belong to single households, and in 63% of households there are no children under 65 years of age).²⁷³ It is necessary for the urban population to invest in urban infrastructure without architectural barriers, invest in affordable public transport, encourage social engagement of older persons, evenly develop the network of primary health care centers, provide information, organize training for informal carers, promote healthy living habits and fight against age discrimination;
- the need to provide adequate infrastructure, without architectural barriers, in particular to ensure the accessibility facilities providing public services,

273 *The Position of Older Persons in Rural Areas*, Serbian Red Cross, Belgrade, 2016, available on the website: <http://ravnopravnost.gov.rs/wp-content/uploads/2019/12/polozaj-starijih-na-selu-web.pdf>

- public spaces and public transport tailored to the needs of older persons in both urban and rural areas;
- supporting initiatives that emphasize the preservation and development of the capacity of older people, the inclusion of older people in all aspects of everyday life, and the development of local policies to meet aging. Encouraging social engagement of older persons through work, education, volunteering, arts and recreation, while promoting the role and capacity use of civil society organizations, especially those involved in the implementation of various community support services;
 - ensuring digital literacy of older persons (43% of respondents to the Red Cross survey²⁷⁴ do not use the Internet, and that 57% of those who use it do not use e-services) and ensuring that online services are tailored to the needs and capabilities of older persons.

3.2.5.3. *Survey results*

The survey on the position of older persons in the Republic of Serbia was conducted with the support of the United Nations Population Fund.

One of the goals of conducting this survey and drafting the document is to help decision makers and interested social actors to more easily understand the comprehensive picture of the position of older persons in both urban and rural areas in the Republic of Serbia and the potential adoption of a new strategic document that is considered necessary by the professional public. It is very important to point out that the decision makers surveyed have expressed their readiness to create it in interviews within the qualitative part of the survey. This survey is a form of a supplement to the previously conducted survey on the position of older persons, separately in the rural areas and in the cities, in accordance with the framework set by the United Nations Population Fund.

In this document, after analyzing the results of the entire survey and reviewing all included reports and survey projects, recommendations are given that should be taken into account when creating specific measures and activities within the future strategic document.

Survey methodology

In order to better and more realistically understand the position of older persons, two methods were used in the survey – quantitative and qualitative.

274 *Aging and Digital Inclusion*, Serbian Red Cross and Institute of Social Sciences, Belgrade, 2019, available on the website: <https://www.redcross.org.rs/media/6183/starenje-i-digitalna-ukljucenost-web.pdf>

The quantitative part of the survey was conducted with the help of a pre-prepared questionnaire, using the 'face to face' method, on a representative sample of 1,077 citizens over 65, with the aim of looking at how older people perceive their position in nine key areas and what ways and measures they see as appropriate to improve one's position.

The questionnaire included the following thematic units / questions:

- 1) Services for older persons;
- 2) Position of older persons in inaccessible areas and the possibility of improving their position;
- 3) Access to justice;
- 4) Availability of healthcare and quality of health services;
- 5) Access to culture and cultural contents;
- 6) Discrimination and possibilities for its reduction;
- 7) Social participation and opportunities for digital communication;
- 8) Media image of older persons and the possibility for its improvement;
- 9) Violence against older persons.

Within the qualitative method, it was planned to organize four focus groups. However, due to the epidemic, and especially the high risk for persons in institutional older-age housing, no focus group was held with older users of social protection services, who were supposed to talk about their experiences, the services they use and how the services should be upgraded or replaced. Therefore, three focus groups were organized, whose participants consisted in: members of the academic community, older persons from a typical rural area, and civil society organizations dealing with the position of older persons.

In addition to focus groups, several structured interviews were conducted with experts and decision makers in this area.

In focus group discussions and interviews, questions were raised regarding:

- 1) opportunities for policy makers to improve the position of older persons;
- 2) examples of good practice that support older persons and their needs;
- 3) seeing trends and financial sustainability of individual solutions;
- 4) review of the previous strategic document and its evaluation;
- 5) key issues that should be part of the new strategic document.

The results of the survey have been divided into two parts, according to the methodology used. The first part deals with the results of the quantitative part of the survey, while the second part of the survey deals with the results of focus

groups and interviews held with experts and decision makers. Conclusions and recommendations have been based on both parts of the survey.

Results of the quantitative part of the survey

The survey was conducted on the territory of the Republic of Serbia (excluding the territory of Kosovo and Metohija) using a pre-prepared questionnaire on a random, representative sample of 1,077 citizens over the age of 65, during November 2020. Data was collected using the face-to-face method.

Sample structure:

- Gender: women 59%, men 41%
- Age: 65-69 years 41%; 70-79 years 42%; older than 80 years 17%
- Education completed: primary school and lower - 30% of respondents; secondary education - 49%; higher education - 21%
- Type of settlement: city 58%, rural area 42%
- Type of household: 30% live alone, 38% live with a partner, 32% live in a community with a family.
- Level of total monthly income: without income - 3% of respondents, up to 20,000 dinars - 24%, 20-40,000 dinars - 38%, 40-60,000 dinars - 15%, 60-100,000 dinars - 8% and over 100,000 dinars - 3%, while 10% of respondents did not want to answer. (for reference: 10000 RSD=100 USD)

The questionnaire contained 41 questions, taking 20-30 minutes to complete. The questionnaire covers the following areas of social life: services for older persons, the position of older persons in extremely underdeveloped areas, access to justice, access to health care, access to cultural content, how to reduce discrimination against older persons, social participation – digital literacy and inclusion, media image of older persons, and the best way to reduce and provide protection and assistance from violence, abuse and neglect. The answers to these areas are given individually below.

The analysis of the collected data was performed by crossing data in relation to gender, age, type of household, type of settlement in which older persons live and level of education. Regarding the variable *education*, it was noticed that there are large discrepancies in the level of education and the type of settlement (city, rural area), reflected in the overall score of educational levels. Thus, out of 30% of respondents with primary school and/or less education, 68% are from rural areas while only 32% are from the city. Of the 21% of respondents with a higher level of education, only 23% are from rural areas while 77% are from urban areas. The level of education is somewhat expected to be higher

on average in the city than in the countryside, so, when looking at the results by type of settlement, these differences collectively affected the answers given.

Regarding the monthly personal income, the questions were not intersected with this variable for several reasons. Namely, 13% of respondents did not want to answer the question or have no personal income. Also, based on the obtained estimates, it can be concluded that some respondents did not understand the question well, and that they mixed up their personal with the total household income.

Services for older persons

Do you use a support service?

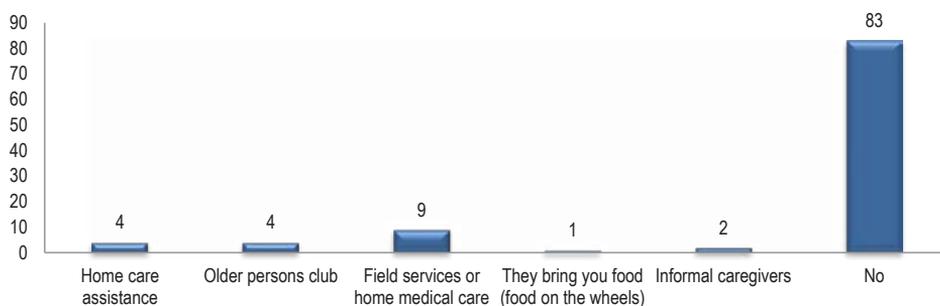
When we asked older persons if they use a support service, we obtained data that as many as 83% of respondents do not use these services. 9% of respondents state that they use the field service or home medical care services, whereas almost a fifth of those over 80 use these services. 4% of respondents over the age of 65 use home help services or a club for older or for retired persons.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Help around the house (Home care assistant)	4	3	4	1	3	11	8	1	2	3	4	5	2	7
Club for older and retired persons	4	4	5	5	3	5	3	5	5	4	5	2	5	8
Field service or home medical care	9	10	8	5	7	23	12	9	5	6	13	17	6	5
They bring you food (Food on wheels)	1	0	1	0	1	2	2	1	0	0	2	3	0	0
Informal carers	2	3	1	0	2	7	4	1	1	1	3	5	1	1
No	83	83	83	90	87	57	74	86	88	86	79	74	89	83

It follows from the answer to this question that the services are used by a total of 17% of respondents, which is not a small percentage, especially given the data from the aforementioned reports and surveys (the part on Social Protection), which speak of an extremely low coverage of support services for older persons. However, if the total number of older people who stated that they do use services available to them (17%) is compared to only 6% of respondents who said they did not need particular help or support, meaning that there are 94% of respondents who feel that they do need help, then it is easy to conclude that the support needs among the older population in Serbia far surpass the existing service coverage.

The field service or home medical care is the most frequently used service among the respondents. Significant data referring to the age group of service users – 23% of people over 80 use the services of field services or home medical care, which is also true for 13% of older people living in rural areas, as opposed to only 6% of older people living in the city who use this service. This service is also used by the largest percentage of respondents with primary school or lower level of education (17%), which coincides with the fact that this service is used by a larger number of respondents from rural areas, which is dominant when it comes to this level of education (almost half of the respondents from rural areas – 48% have primary school or lower level of education).

No correlation was noticed between using other types of services and their place of residence, i.e. rural vs urban area, indicating a relatively even (un)availability of other services to older people living both in rural and urban areas.



Only 2% of respondents answered that they use the service of informal carers. However, when asked who they rely on when they need help, 76% of the total number of respondents answered that they rely on family, 30% that they rely on neighbors and friends, and 26% that they rely on relatives, which leads to the issue of recognizing the very concept of informal carers and/or observing this type of assistance in another way in relation to organized services. The percentage of informal support the older people receive, as appearing in the survey results, indicates not only the large scope of this type of support for older persons in Serbia, but also the burden of it imposed on informal caregivers and providers of other similar services ('middle' generation, especially women, resulting from traditional gender roles in Serbia, which further complicates their position and perspectives).

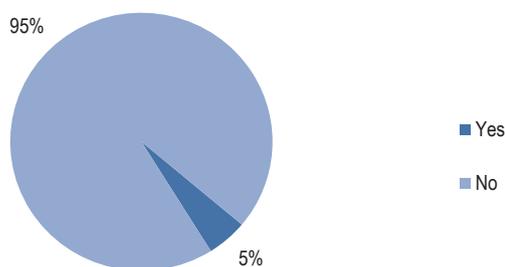
Do you need any of the existing community services right now?

The next thing we asked the respondents was whether they need any of the existing services in the community at the moment. Only 5% of respondents answer that they do need such a service. Among them, as many as a fifth are older than 80.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes*	5	5	5	2	5	20	10	4	2	4	6	10	4	2
No	95	95	95	98	95	80	90	96	98	96	94	90	96	98

Only respondents who answered the previous question with No

When answering this question, as before, there was no difference between the respondents in relation to the type of settlement they live in (city or rural area), i.e. all expressed almost equal need for services (4% in the city, or 6% in rural area). There is also no difference in the percentage of respondents who expressed a need for existing services in relation to gender (5%). The greatest need for services, in addition to those over 80, is expressed by those who live alone (10%), and, in the same percentage, by those who only have primary school or lower level of education.



Respondents who answered that they needed some of the existing services in their community most often mentioned home help services and the grocery and medicine delivery. These data correlate with the data obtained from the previous question, which refers to the fact that, out of 17% of respondents who do use services, 4% use home help services and only 1% use food delivery services. The expressed need for such services by the respondents who are not included in the services indicates the need to increase the scope of providing primarily for these services, for which the respondents expressed the greatest need.

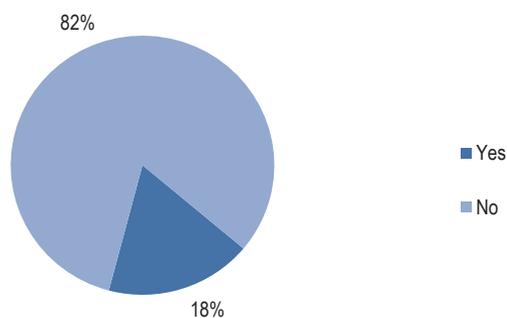
Do you think that it is necessary to introduce a new special service for older persons in order to make your life better and simpler?

When we asked citizens over the age of 65 if they think it is necessary to introduce a special service for older persons in order for their lives to be better, slightly less than a fifth (18%) answered in the affirmative. In this question as well, we noticed that people over the age of 80 mostly answered that it is necessary to introduce a new service for older persons, 28% of them. A quarter of respondents who answered 'YES' live alone.

Also, looking at the level of education, a slightly higher need for new services for older persons is expressed by the respondents with lower level of education – 22% of respondents with primary school or less education, and 19% of persons with secondary education, compared to 12% of respondents with college/university. This data may indicate that those respondents with a lower level of education find it more difficult to access existing services due to being less informed on how to get them, and/or because of less resources at their disposal, so they are not able to get appropriate services for themselves, unlike those respondents who have higher degrees of education.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes*	18	19	18	14	18	28	26	15	15	17	20	22	19	12
No	82	81	82	86	82	72	74	85	85	83	80	78	81	88

Although 83% of respondents answered that they do not use services (first question) and 95% of respondents that they do not even need services (second question), the fact that 18% of respondents believe that new services should be introduced indicates insufficient and inadequate recognition of personal needs and opportunities, which may further indicate the need for individual empowerment and work on personal development and responsibility in the aging process. Also, it is necessary to look at these data from the point of view of experts and experiences of civil society organizations.



Respondents who answered that it was necessary to introduce new special services for older persons most often cite the following services: mobile teams that would help older persons in remote places, young volunteers who would socialize with older persons, organizing doctor visits, financial assistance to older persons, organizing more social events for older persons...

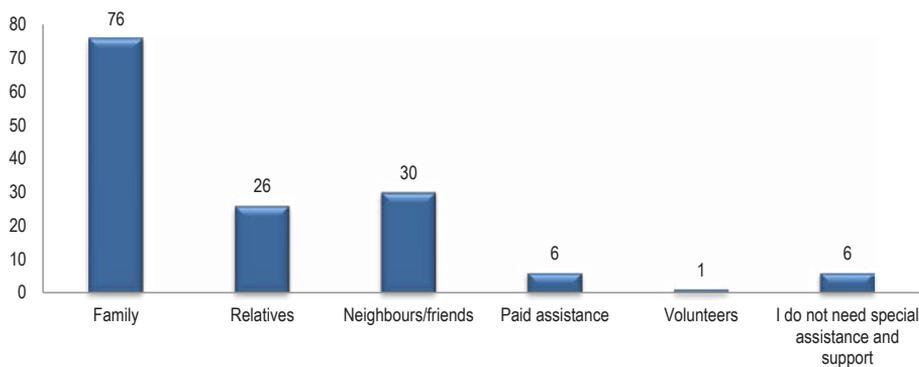
The data on services that older people most often state as necessary indicate that such activities should be encouraged, especially bearing in mind that the expressed needs, in addition to mobile teams, are necessary not only for older persons in remote places but also for those with limited mobility, who have chronic diseases. etc., included the need to encourage intergenerational cooperation and socializing, and through volunteer services.

If you need support, who do you rely on? (it is possible to check multiple answers)

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Family	76	79	74	79	74	72	54	78	94	76	75	66	82	75
Relatives	26	25	26	21	30	25	30	28	19	26	25	33	23	21
Neighbors/ friends	30	29	30	32	28	31	40	31	19	24	38	45	23	25
Paid helpers	6	6	7	3	6	15	12	4	4	5	8	12	2	8
Volunteers	1	1	0	0	1	2	2	0	0	0	1	0	1	1
I do not need particular help and support	6	5	7	8	6	5	9	7	4	8	4	7	7	4

Three-quarters of respondents over the age of 65 answer that they rely mostly on their family when they need support. After that, the most common answers are that they rely on: neighbors-friends (30%), relatives (26%) and paid helpers (6%). Slightly more than half of the respondents who live alone state that they rely on their family, while as many as 94% of the respondents who live with their family rely on the family. Only 1% of respondents state that they rely on volunteers when they need support. 6% of respondents state that they do not need help.

There is a significantly higher share of respondents who rely on their family, relatives or neighbors/friends, compared to those who rely on paid helpers. As expected, the highest percentage of respondents who rely on paid helpers is found in groups older than 80 years (15%) and those living alone (12%). These data may indicate that, taking into account the perspective of accelerated demographic changes, especially the increase in average life expectancy, special attention should be paid to this particular age group, the group of 'older' older persons and to the fact of their loneliness.



If necessary, would you accept the service of a home for older persons (an institutional form of care)?

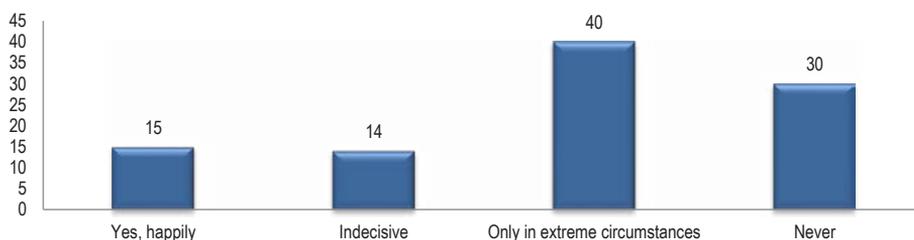
The next question we asked the respondents was whether they would accept the services of a home for older persons if necessary. Two-fifths of respondents stated that they would accept the services of a home for older persons only in case of extreme emergency, and slightly less than a third of the surveyed citizens said that they would never accept the services of a home for older persons. As many as half of the respondents living in the community with family state that they would only go to a home for older persons in case of emergency. Only 15% of older persons state that they would be very happy to accept this service. Of these, a quarter of respondents living alone state that they would be very happy to accept the services of a home for older persons.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, I would be glad to	15	12	18	12	17	18	25	13	9	17	13	17	15	15
Undecided	14	16	13	11	14	23	15	20	8	14	15	14	14	17
Only in case of extreme emergency	40	40	40	45	38	33	33	38	48	43	36	38	38	45
Never	30	32	29	32	30	26	27	29	35	26	36	31	33	23

The answers of the respondents where 70% would not accept going to a home for older persons, or would go to a home only in case of an emergency (with 14% undecided), indicate that older persons are not ready for such big life changes, especially those living in rural areas (36% in rural areas compared to 26% of respondents in urban areas).

This indicates the need to further increase the existing scope of all other types of services enabling independent living in one's own home and familiar environment.

However, the fact that 15% of those who would very much like to go to a home for older persons, and 14% undecided ones, undecided indicate the need to simultaneously increase the capacity for homes for the older, and the need to organize educational and promotional activities to eliminate stereotypes about life in homes for older persons, and to create alternative forms of housing similar to dormitories.



The position of older persons in extremely underdeveloped areas

In your opinion, is it possible to change the demographics in underdeveloped areas where mostly older people live?

We asked older persons who participated in the survey whether, in their opinion, it was possible to change the demographic picture in underdeveloped areas, where mostly older residents live. Slightly less than half of the respondents answered that it would be very difficult (45%), while a fifth are convinced that the demographics in these areas can certainly change. 15% of citizens state that it is impossible to fix the situation.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, it certainly is	19	16	21	17	19	25	26	17	15	22	15	14	18	28
Very hard	45	46	44	48	42	44	36	51	44	45	44	39	46	49
It is impossible to improve the situation	15	12	16	10	17	20	18	12	14	10	21	25	12	5
No, unless some big change happens	22	25	19	26	23	11	20	20	27	23	20	21	24	18

Although not a small percentage of older persons believe that it is impossible to improve the situation by looking at the demographic picture in underdeveloped areas, a larger percentage of respondents believe that this is possible, regardless of whether or not it is necessary to make extraordinary efforts or changes (85%).

Among those who think the situation is impossible to fix are mostly women, people over the age of 80, those living alone, those living in rural areas, and those with a lower level of education. These categories are precisely the categories of older persons who are in a less favorable position, and the answers they gave are also expected. These answers imply, in addition to the answers to other questions where these same categories also stand out, that it is necessary to pay attention to the heterogeneity of older population, and not only to single households, and target certain measures in relation to factors that aggravate their situation.



In your opinion, what could the state do to improve the position of older persons, and consequently of all citizens, in such remote areas?

- Better infrastructure (roads, internet)
- Better traffic, more frequent lines
- Subventions so that young people can stay in villages, affordable loans, benefits for agricultural workers
- Opening factories and new employment opportunities
- Opening ambulances
- Higher salaries and pensions
- More cultural events

Respondents' suggestions on how to improve the situation of older people in remote areas can be grouped into accessibility measures, population policies, poverty reduction, various incentives, but also measures that include social and health care and cultural events. Therefore, older persons themselves recognize that in order to improve their position, a set of activities on a broader scale is needed, including developing economic policy measures to include all generations, such as investments in infrastructure, transport, new jobs, and implementing measures that are not short-term and simple, but rather bring possible global improvement of the situation.

Access to justice

If you need any legal help or help in court proceedings, do you have anyone to turn to?

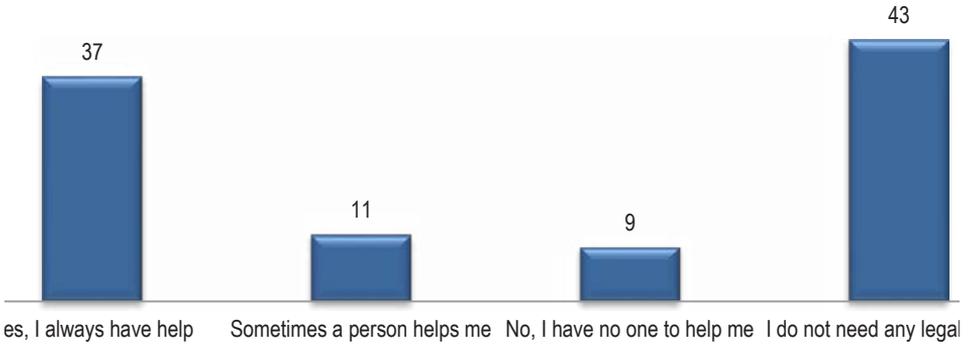
When we asked citizens over the age of 65 if they needed legal assistance and, if so, if they could turn to someone, just over two-fifths of those surveyed stated they did not need legal assistance. 37% of respondents state that they always have help, 11% that they occasionally find someone to help them, and 9% of older persons have no one to help them. Respondents aged 65-69, in relation to other age groups, mostly state that they always have help – 47%.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, I always have help	37	41	35	47	32	26	28	41	42	41	32	23	40	52
Occasionally someone is there to help	11	12	11	7	12	21	18	9	9	11	12	15	12	5
No, I do not have anyone to help me	9	6	10	8	9	8	11	9	6	7	11	8	10	7
I do not need any legal assistance	43	41	43	38	47	44	44	42	42	41	45	53	39	36

Among respondents who do not need legal assistance, there is a slightly higher percentage of those living in rural areas (45% of those living in rural areas compared to 41% living in the city). There is also a higher percentage of those

living in rural areas (11%) who have no one to turn to (compared to 7% of those living in the city). At the same time, there is a higher percentage of those who live in the city and always have legal aid (41%) compared to those who live in rural areas (32%). These results show that legal aid is somewhat less available to respondents living in rural areas. Stating that there is always legal aid was mostly done by respondents with college/university of education (52%), especially in relation to respondents with primary or lower level of education (23%), who, at the same time, stated that they did not need any legal aid.

Differences by gender and household type are not noticeable in relation to access to justice.



Have you used any kind of legal aid in the last 3 years?

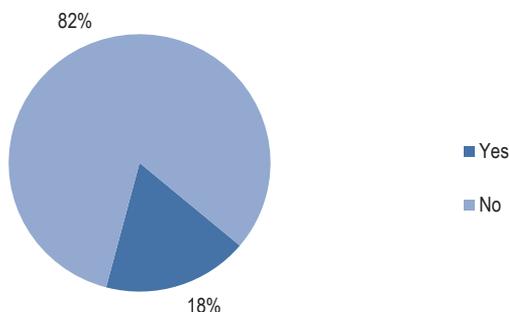
The next thing we were interested in was whether citizens older than 65 had used any kind of legal aid in the last 3 years. Slightly less than a fifth of the respondents stated they used some kind of legal aid. Almost a quarter of the respondents are aged between 65 and 69. A slightly higher percentage of respondents who say they have used legal aid in the last three years were from the city (22%), compared to those from rural areas (13%).

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes	18	18	18	23	16	11	19	18	18	22	13	15	18	24
No	82	82	82	77	84	89	81	82	82	78	87	85	82	76

Both in this question, as in the previous one, the respondents living in rural areas stated in a higher percentage that they have not used legal aid in the last three years (87%), which correlates with their answers to the previous question. Legal aid was used by a slightly larger number of respondents with a higher level of education - almost a quarter, compared to respondents with other levels of education, which may indicate less information about the possibilities of using legal aid. These data can also be a reflection of long-term unresolved property relations in households, especially in terms of property in residential buildings, and the lack of use of legal aid due to traditional patterns of behavior and expectations that family estates be primarily inherited by male descendants.

As with the previous question, differences by gender and household type are not noticeable in the respondents' answers.

The answers to these two questions indicate two possibilities – that older persons do not really recognize the importance of legal aid because they left the resolution of these issues to their children or close relatives, or that they have already resolved most of their previous legal issues. In both cases, it is evident that there is a need for better knowledge on their right to free legal aid.



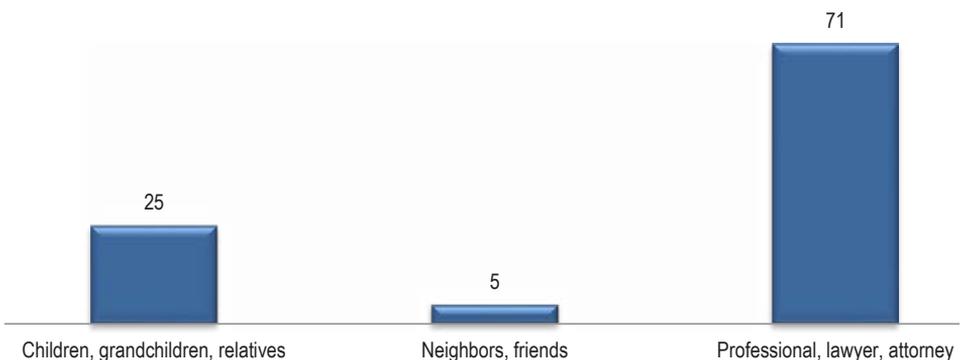
Who helped you use legal aid?

Citizens who answered that they did use the legal aid services stated that they were most often helped by lawyers or professionals – 71%, and then by their children, grandchildren, relatives – 25%, and the least were helped by their neighbors and friends – 5%. Citizens older than 80 state that they were most often helped by their children, grandchildren or relatives – 71%. Respondents aged 65 to 69 and 70 to 79 mostly state that they used legal aid through a lawyer, and so do respondents with a higher degree of education.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Children, grandchildren, relatives	25	22	26	26	8	71	30	24	20	26	21	31	26	17
Neighbors, friends	5	7	3	3	8	0	5	8	0	4	5	13	3	0
Professional, lawyer, attorney	71	70	71	71	83	29	65	68	80	70	74	56	71	83

The analysis of the answers to this question, and of the answers to other questions in this area, indicates that there are no significant differences in relation to the respondents' gender. There is a certain difference when it comes to the type of household in which the respondents live, so the respondents who live with their family relied in a larger percentage on the help of a professional, lawyer or attorney, compared to respondents from other household types. Also, the percentage of respondents who turn to an expert for help increases with the increase in the level of education, which can be explained by the assumption of greater financial ability to use this type of assistance.

However, the overall percentage of citizens who turned to a professional, lawyer or attorney for help is not insignificant, bearing in mind that out of 18% of respondents who needed legal assistance in the previous three years, 71% turned to a professional.



Access to health care

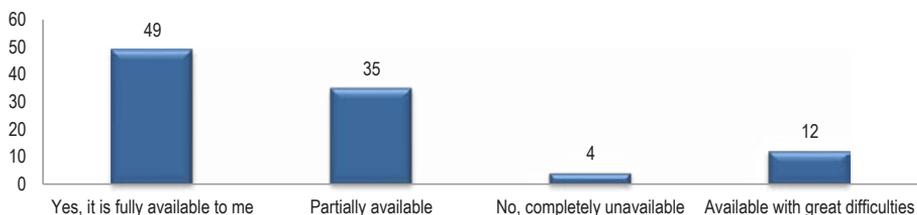
Is the health care you need fully available to you?

The next segment covers the healthcare availability and the first question we asked the respondents was whether they have full access to the health care they need. Half of the respondents state that it is fully available to them, a third that it is partially available to them, and these are the answers that are most represented. 12% of respondents state that help is available to them with great difficulty, and only 4% of citizens state that help is completely unavailable to them.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, it is fully available to me	49	45	51	51	49	44	55	46	47	56	39	36	50	64
It is partially available to me	35	39	32	36	32	38	33	36	35	28	44	47	34	20
No, it is completely unavailable to me	4	4	4	6	3	3	1	6	5	3	5	3	5	5
It is available to me with great difficulty	12	12	12	7	16	15	11	13	12	13	12	15	11	11

The relevant correlation between the obtained answers and the socio-demographic variable was noticed mostly in relation to the type of settlement in which the respondents live. Namely, the results of the analyzed answers show that only 39% of the respondents living in rural areas have fully accessible health care compared to 56% of the respondents living in the city. Also, health care is partially available to a larger number of respondents from rural areas (44%) compared to 28% of respondents living in the city. These results indicate that health care is less accessible to respondents living in rural areas.

At the same time, higher access to health care is expressed by respondents with higher education – 64% compared to only 36% of respondents with primary or less education and half of those with secondary education.



Based on the answers to this question, it has been noticed that health care is fully available to half of the respondents (49%), while the other half of the respondents (51%) only have partially available health care, accessible with great difficulty or it's completely unavailable.

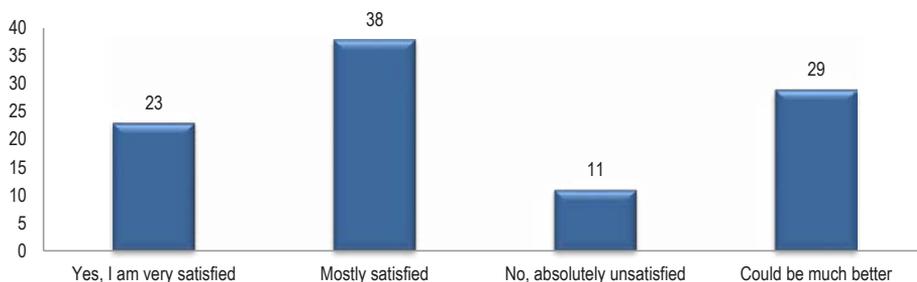
Are you satisfied with the quality of health services?

The next question concerned the satisfaction of citizens with health services. A quarter of the surveyed citizens are completely satisfied with the quality of health services, while 11% are absolutely dissatisfied. 38% of respondents are generally satisfied, and 29% believe that the quality of health services could be better.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, I am completely satisfied	23	21	24	22	22	27	26	19	24	22	24	18	25	24
I am generally satisfied	38	40	37	41	37	36	35	46	33	41	35	31	38	51
No, I am absolutely dissatisfied	11	11	12	12	11	8	14	8	13	11	11	14	12	4
It could be better	29	29	29	26	31	29	26	28	32	27	31	39	25	21

Slightly greater satisfaction with the quality of health services is expressed by respondents from the cities (a total of 63% fully or mostly satisfied) compared to respondents from rural areas (a total of 59%). Also, satisfaction with the quality of health services increases with the growth of the level of education, so the greatest satisfaction has been expressed by respondents with higher education (75% in total) compared to respondents with primary school or lower degrees of education (49%).

The relevant correlation between the obtained answers and other socio-demographic variables is not noticed in the answers to this question.



The overall observed satisfaction with health services, as seen in the answers, is higher (61%) compared to dissatisfaction (40%).

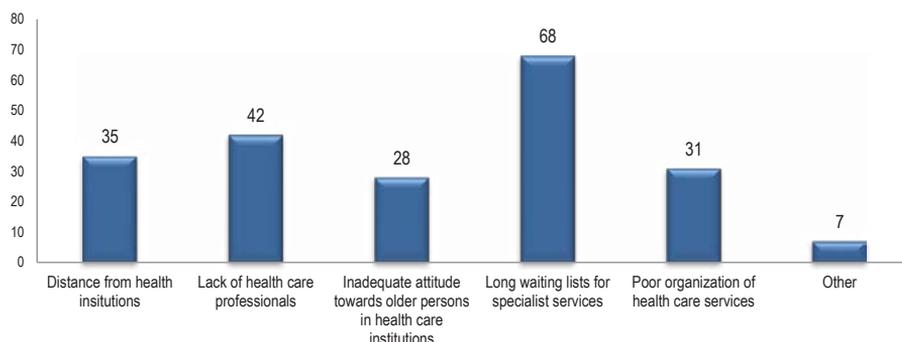
In your opinion, what are the biggest problems for older persons in terms of health care? (It is possible to check multiple answers)

The biggest problem the older persons see in terms of health care is a long wait for specialist examinations – 68%. Other problems they singled out are: lack of specialist doctors (42%), distance of health care centers (35%), poor organization of health care services (31%), and inadequate attitude towards older persons in health care institutions (28%).

Women (72%) complained more about the long wait to see a specialist than men (63%). Also, respondents living in rural areas point out to problems such as the distance of health facilities and the lack of health professionals, more so than city residents. The same problem was mostly pointed out by those with primary and less education, who, as already emphasized, mostly live in rural areas, which explains the distance of health services, and the lack of health professionals.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Distance to health facilities (lack of transportation)	35	34	35	29	38	41	27	41	34	24	49	51	27	29
Lack of health professionals, especially specialist doctors	42	48	38	44	40	41	37	46	41	36	50	48	40	39
Inadequate treatment of older persons in health care institutions	28	29	27	23	32	28	31	28	23	24	33	32	27	23
Long wait for specialist service	68	63	72	71	68	61	68	65	73	69	68	72	68	63
Poor organization of health care	31	29	32	32	34	23	22	35	35	33	28	26	34	29
Something else*	7	5	9	9	6	7	8	7	6	10	4	4	7	13

The analysis of the respondents' answers reveals that the biggest problems older persons face in relation to healthcare are the long wait for specialist examinations and the lack of specialist doctors, while the problem they see as the least important is the inadequate attitude towards the older in health care institutions. Although a smaller number of respondents from rural areas pointed to the poor organization of the health service in general, they still complained about the distance to the nearest health institutions to a greater extent.



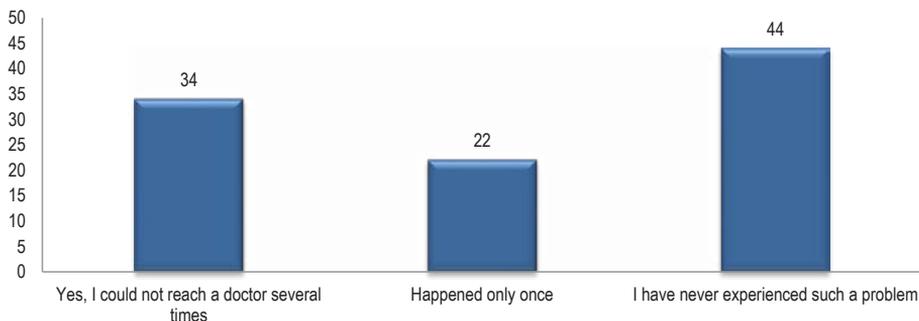
Have you needed a doctor in the past year, and you could not get to him for some reason?

When we asked citizens over the age of 65 if they needed a doctor in the previous year without being able to reach her/him, 44% of respondents answered that they had never had such a problem. One third of the respondents state that they could not get to the doctor several times, and a little more than one fifth state that this situation has happened to them only once.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, I could not get to the doctor on several occasions	34	33	35	30	38	34	32	34	36	33	36	41	32	29
It happened to me only once	22	24	20	22	22	21	19	24	22	22	22	24	21	19
I have never had that problem	44	44	44	48	40	44	49	42	42	45	42	35	46	52

The analysis of the answers received to this question can be compared with the answers to the question on the availability of health care, where almost half of the respondents (49%) stated that health care was fully available to them, while the other half (51%) stated that health care was either partially available, accessible with great difficulty, or completely inaccessible. In answering this question, 44% of respondents have never had a problem reaching a doctor, which is approximately the same as the percentage of respondents who do not have a problem accessing health care.

No relevant correlation between the obtained answers and the socio-demographic variables has been observed relating to this question. There is, however, a slightly higher percentage of respondents living in the city (45%) who did not have a problem to see a doctor in the last year, compared to those living in rural areas (42%). Also, a slightly higher number of respondents from rural areas (36%) were in this situation several times compared to respondents from the city (33%), as was a slightly higher number of respondents with primary or less education (41%).



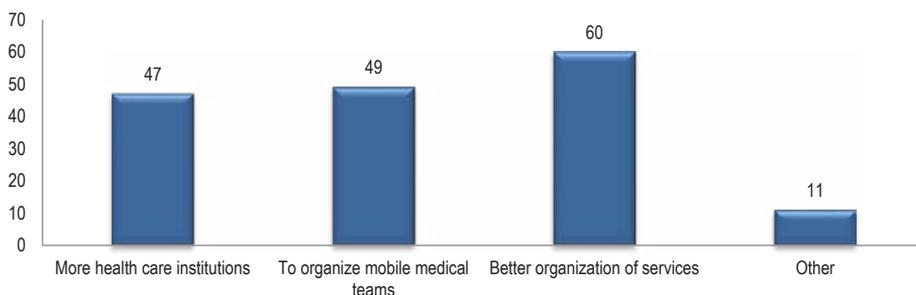
What can the state do to improve health care for older persons?
(you may circle multiple answers)

We wanted to find out from the respondents what, in their opinion, the state should do to improve the health care of older persons. The largest percentage of citizens answered that it should better organize how health care services are provided – 60% of them. The next most frequent answers were: to organize mobile health teams – 49%, and to have more health centers – 47%.

Under ‘something else’ (an option among the offered answers), the respondents stated: free medicines, to have more health workers, to open local health stations in villages where there are none, to organize transportation to the existing health centers, and other.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
To have more health institutions (health stations, health centers, hospitals)	47	46	47	41	51	48	47	46	47	43	51	52	45	41
To organize mobile health teams	49	53	47	49	43	67	59	45	45	50	49	52	48	48
Better organization of service provision	60	61	59	62	58	59	50	65	63	58	63	61	59	60
Something else	11	7	14	10	14	5	8	12	13	11	11	10	11	13

Respondents older than 80, to a greater extent than those of other ages, point out that the state should organize mobile health teams - 67%, and, at the same time, they have the least amount of other proposals. The respondents from rural areas ask for more health centers and a better organization of the health service in general, , to a greater extent than the respondents from the city. However, respondents from rural areas mostly did not recognize mobile health teams as a way to improve the health care of older persons. There are no major differences in the answers given by the respondents in relation to their degree of education.



The answer to this question does not correlate with the answer to what the respondents see as the biggest problem in terms of health care for older persons, but a smaller number of respondents did complain about the poor organization of health care in general (31%).

Access to cultural content

Is the cultural content you would like to see available to you sufficiently?

The next segment we dealt with was access to cultural content. For a start, we were interested in whether cultural content was available to older persons. One third of the surveyed citizens stated that they have access to all contents of interest to them, while 28% answered that they do not have access to cultural contents at all. About a fifth of respondents said they had a limited access, or very rarely had access to cultural contents.

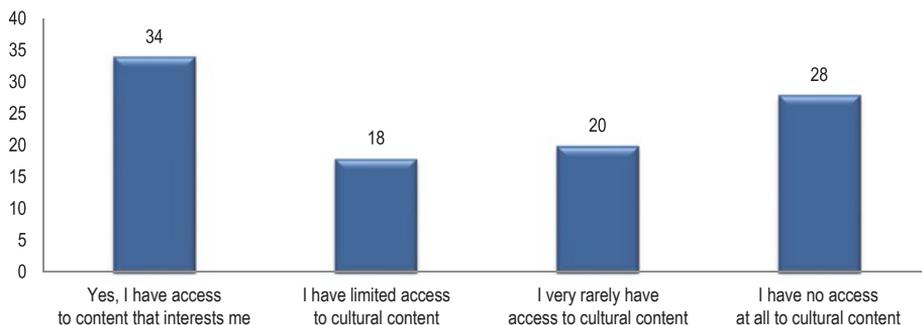
	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, I have access to all contents I am interested in	34	29	37	34	38	23	31	36	35	47	17	9	40	56
I have limited access to cultural contents	18	21	16	23	14	16	16	23	13	19	17	8	21	24
I very rarely have access to cultural contents	20	18	21	20	21	16	20	18	21	18	22	25	20	11
I do not have access to cultural contents	28	31	26	23	27	44	33	23	30	16	45	57	19	9

Half of the respondents from the city stated that they have access to all contents of interest, while only a fifth of the respondents from rural areas answered the same. Also, 45% of respondents from rural areas stated that they do not have access to cultural content at all, compared to 16% of respondents from the city. A certain difference can be noticed in the answer that they rarely have access to cultural contents in relation to the type of settlement. When analyzing the answer to this question, it should be remembered that, among the suggestions given by the respondents to the second question in the set of questions on how to improve the position of older persons in remote areas, the need to organize more cultural events is also mentioned.

An equal percentage of surveyed women and men (47% of women and 49% of men) state that they do not have, or rarely have, access to cultural content, although slightly more older women than men state that they do not have access to all content they want (37% of women compared to 29% of men).

In relation to the age of the respondents, the least access to cultural content was expressed by those older than 80 years. Also, older people from single households showed somewhat less access to cultural content compared to other age categories.

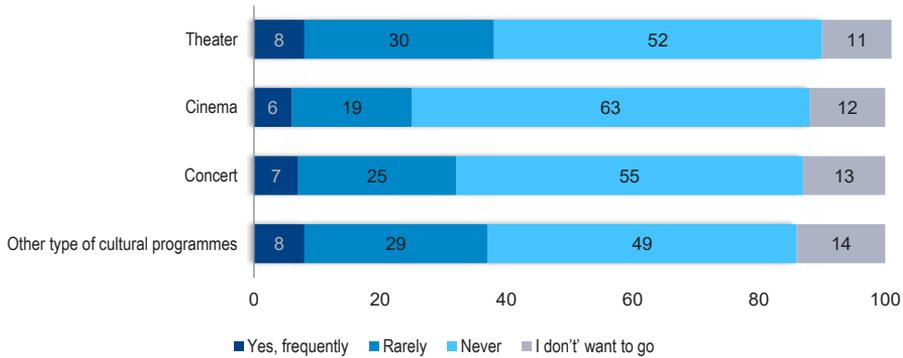
In relation to the level of education, the lowest access to cultural content is expressed by respondents with lower level of education – almost two thirds of respondents with primary school or less education have no access to cultural content at all, unlike almost the same percentage of respondents with higher education, who do have access to cultural contents that they are interested in. The answer to this question correlates to the answers of the respondents from the city and rural areas, and underlines the fact that, among the respondents from the villages, there is a larger number of people with a lower level of education compared to among the respondents from the city.



Do you go (before the COVID-19 pandemic)?

	Yes I go often	I go rarely	Never	I do not want to
To the theatre	8	30	52	11
To the cinema	6	19	63	12
To concerts	7	25	55	13
Some other cultural and artistic programs	8	29	49	14

38% of respondents state that they go to theater, 25% to cinema, 32% to concerts and 37% of respondents say they go to other cultural and artistic programs. However, more than half of the respondents state that they never attend cultural and artistic programs, while about 12% say they do not want to.



The answers to this question are analyzed in relation to the type of cultural and artistic content listed.

Do you go (before the COVID-19 pandemic) to theatre?

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, I go often	8	3	10	9	8	3	7	8	7	13	1	1	7	19
I go rarely	30	28	32	38	28	20	30	28	34	38	20	5	38	48
Never	52	57	48	46	53	62	49	54	51	39	68	79	44	29
I do not want to	11	12	10	8	12	15	14	10	8	10	11	15	11	4

When asked if they go to theater, half of older persons stated they had never been to a theater. Every ninth respondent does not want to go to theater. Only 8% of respondents go to theater often, while a third state that they rarely go. Only 1% of respondents from rural areas answered that they go to theater often, and 68% that they never go. Female respondents (10%) go to theater more often than men (3%).

Also, only 1% of respondents with primary school or less education stated that they go to theater often, while 79% stated that they never go to theater.

Do you go (before the COVID-19 pandemic) to cinema?

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, I go often	6	3	9	8	5	5	7	7	5	10	1	0	6	17
I go rarely	19	17	20	18	22	13	14	23	19	24	13	3	23	33
Never	63	69	58	62	62	66	61	59	68	54	74	83	61	37
I do not want to	12	12	12	11	11	16	18	11	8	12	12	14	11	12

When asked if they go to cinema, 6% of citizens over the age of 65 state that they go often, while 63% that they have never been to cinema. A fifth rarely goes to cinema. Every eighth respondent states that he/she does not want to go to cinema. As with the theater, respondents who live in the city go to cinema more often than respondents who live in rural areas. We can also see that a slightly higher percentage of women go to cinema more often than men.

None of the respondents with primary school or less education answered that they go to cinema often, while 83% of them answered that they never go to cinema.

Do you go (before the COVID-19 pandemic) to concerts?

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, I go often	7	3	9	11	5	3	6	4	11	10	3	2	7	15
I go rarely	25	22	27	32	25	11	17	29	29	28	22	11	28	40
Never	55	59	52	46	59	67	59	54	52	48	64	74	51	36
I do not want to	13	15	11	12	12	18	18	13	8	14	11	13	14	9

More than half of older people have never been to a concert. A quarter stated that they go rarely, and only 7% that they go to concerts often. 13% of surveyed citizens do not want to go to concerts. In this question, and in the previous ones, we can see that women are in the lead among those going to concerts, as are the inhabitants of the city compared to the inhabitants who live in rural areas. Respondents with higher education go to concerts more often than respondents of other educational levels.

Do you go (before the COVID-19 pandemic) to some other cultural and artistic program?

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, I go often	8	7	9	12	6	5	6	8	10	11	5	3	8	15
I go rarely	29	27	30	36	27	18	18	33	35	34	22	20	29	41
Never	49	53	46	42	52	59	52	46	50	39	63	64	47	32
I do not want to	14	13	15	11	15	18	24	13	5	16	11	13	15	12

As for some other cultural programs, half of older persons state that they have never been, while 8% state that they go often. In this case, too, respondents from the city attend other cultural and artistic programs more often than people from rural areas, and respondents with higher education levels compared to respondents from other educational levels.

Would you like to visit more cultural events?

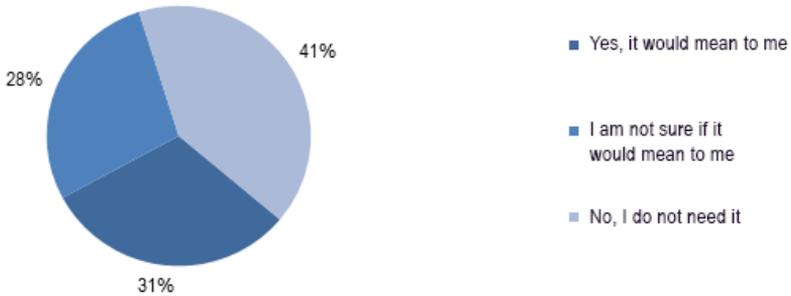
The next thing we wanted to find out from the respondents was whether they would like to visit more cultural events. 31% of respondents said that it would mean a lot to them, while 41% think that they do not need it. Slightly more than a quarter of older persons are not sure if that means anything to them.

Half of men state that they would not like to be able to visit more cultural contents, while a smaller percentage of women share their opinion – 34%.

More respondents from rural areas (46%) compared to respondents from the city (37%) believe that they do not need more culture.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, it would mean to me	31	22	38	39	29	20	28	30	36	36	25	10	40	43
I am not sure if it would mean to me	28	28	28	26	32	23	28	29	27	27	29	26	28	29
No, I do not need it	41	50	34	35	39	57	44	41	37	37	46	64	32	28

Also, the need for more cultural content is expressed by respondents with higher levels of education, while respondents with lower level of education do not need more such content.



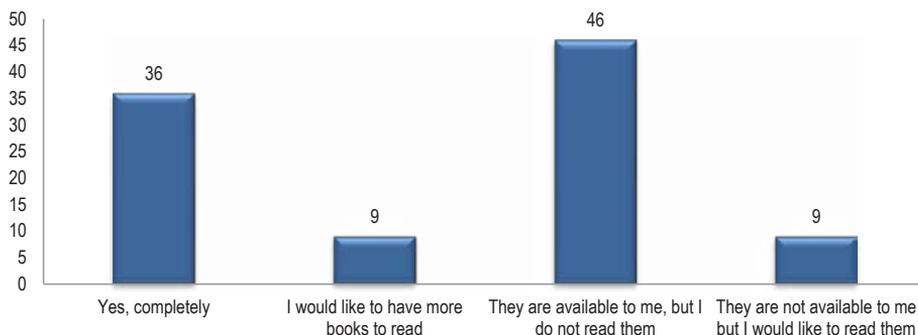
Are books that you would like to read available to you?

When asked if they have access to the books they would like to read, slightly more than a third of the respondents state that they completely do. However, 46% of the surveyed citizens state that books are available to them, but that they do not read them. Every eleventh respondent states that they would like to have more books to read and that there are books that are not available to them, even though they would like to read them.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, completely	36	27	43	38	39	26	36	36	37	49	20	7	40	69
I would like to have more books to read	9	10	8	10	7	11	7	11	7	7	11	4	11	11
They are available to me, but I do not read them	46	53	41	45	43	56	44	46	48	40	54	74	42	15
They are not available to me but I would like to read them	9	10	8	8	12	7	13	7	8	4	16	15	7	5

Older female citizens are more likely to state that books are available to them (43%) than male respondents (27%). Also, respondents living in the city (49%) are more likely to estimate that books are available to them than respondents living in the countryside (20%), while 16% of respondents from rural areas say that books are not available to them but that they would like to read books, whereas only 4% of respondents from the city gave that answer.

69% of respondents with higher education level state that books are fully available to them, as opposed to only 7% of respondents with primary school. At the same time, 15% of respondents with primary school say that books are not available to them although they would like to read some, which, together with the response of rural respondents about the desire for a greater availability of books, indicates that measures should be introduced to ensure a greater availability of books for citizens in rural areas, such as organizing mobile libraries.



Discrimination

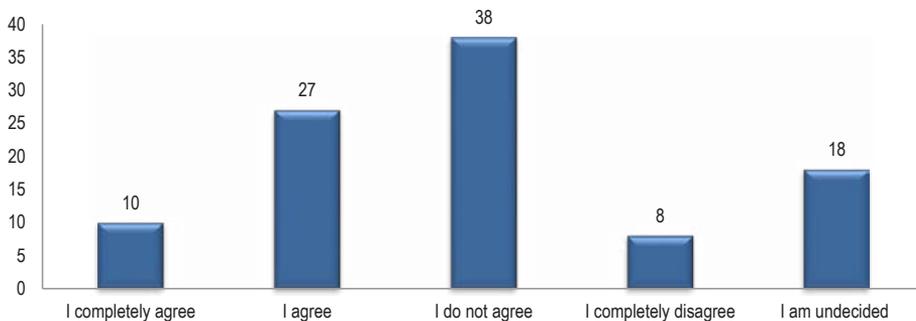
In your opinion, are older persons equal to citizens of other age categories?

The next segment we dealt with is discrimination. We asked citizens over the age of 65 if, in their opinion, older persons are equal to other age categories. 37% of respondents agree with this statement, while 46% disagree and believe that older persons are not equal to other citizens.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
I completely agree	10	7	12	14	6	8	6	9	13	11	9	7	12	8
I agree	27	24	29	26	28	28	29	28	25	28	26	30	21	37
I do not agree	38	44	33	34	41	38	35	39	38	38	37	33	44	31
I completely disagree	8	6	8	6	8	10	9	7	7	7	8	9	7	5
I am undecided	18	19	17	20	17	16	20	17	17	16	21	21	16	19

Slightly more male respondents in relation to females (50% of men compared to 42% of women) stated 'I do not agree', or 'I completely disagree' that older persons are equal to other age categories. Slightly greater disagreement in the answer to this question was also expressed by the respondents with secondary education in relation to other levels of education.

No relevant correlation between the obtained answers and other socio-demographic variables has been observed in the answer to this question, although the indecision on this issue was expressed by slightly more respondents from rural areas than by respondents from urban areas (21% from rural areas vs 16% from urban areas).



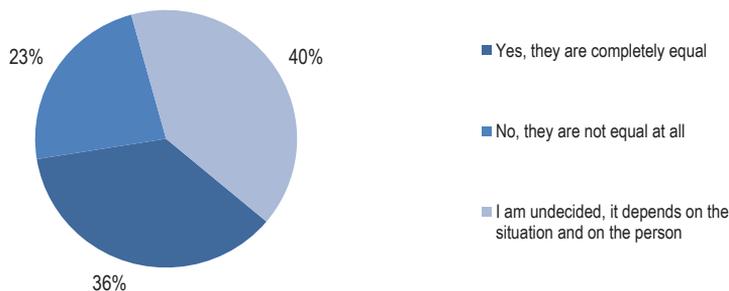
In your opinion, are men and women equal?

After we established their attitude towards discrimination against older persons, we wanted to find out from the respondents whether, in their opinion, men and women are equal. 36% of respondents state that they are completely equal, and 23% that men and women are not equal at all. Two-fifths of citizens over the age of 65 are undecided on this issue. We can observe that men (41%) are more likely to believe that there is gender equality than women (33%).

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, they are completely equal	36	41	33	37	34	39	40	34	35	38	34	28	36	48
No, they are not equal at all	23	18	27	18	24	33	23	26	20	22	26	28	24	15
I am undecided, it depends on the situation and on the person	40	41	40	45	41	28	37	40	44	41	40	44	40	37

18% of male respondents vs 27% of female respondents believe that men and women are not equal at all, while almost the same number of respondents are undecided. Also, there is a slightly higher number of respondents from rural areas who believe that men and women are unequal compared to respondents from urban areas (26% of respondents from rural areas and 22% of respondents from urban areas). This attitude is shared by slightly more respondents over the age of 80 compared to other age categories. 48% of respondents with higher

education believe that men and women are completely equal, while at the same time the smallest percentage believe that men and women are not equal at all.

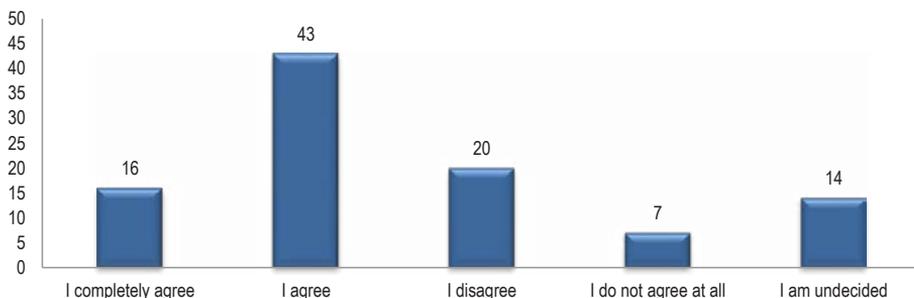


There is an opinion that discrimination against older people is present in our society, that is, that older people are treated worse because of their age?

Two-fifths of the surveyed citizens agree with the opinion that discrimination against older people is present in society, while a quarter do not share their opinion. 16% of respondents fully agree that older persons are treated worse because of their age.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
I completely agree	16	14	17	15	18	15	19	16	14	18	13	15	17	16
I agree	43	46	41	40	45	44	42	41	48	40	47	46	48	28
I disagree	20	20	20	19	18	28	19	24	17	20	21	15	18	32
I do not agree at all	7	8	6	9	6	5	7	7	7	8	5	9	5	9
I am undecided	14	12	15	16	13	8	14	13	14	13	14	15	12	15

59% of respondents agree that older persons are unequal with others because of their age, compared to 27% of those who disagree with this statement, which indicates that there is a worse attitude towards older persons, but the question is whether this is really discrimination in terms of legally impermissible unequal treatment based on personal characteristics. No connection between socio-demographic variables and the obtained answers to this question has been noticed.



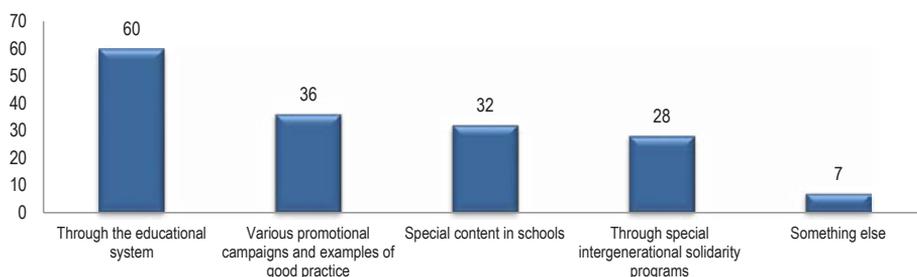
In your opinion, how is it possible to reduce unequal treatment of older persons, i.e. discrimination? (You can check more than one answer)

The next thing we were interested in was how, in the opinion of the respondents, it is possible to reduce the unequal attitude towards older persons. The largest percentage of citizens believe that this is possible through education – 60%. This answer was most frequently given by respondents with college/university education (68%). The next most frequent answers are: ‘various promotional campaigns and examples of good practice’ – 36%, followed by ‘special content in schools’ - 32%, and ‘special programs for intergenerational solidarity’ – 28%.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Through the educational system	60	59	60	60	60	59	62	61	56	58	62	59	56	68
Various promotional campaigns and examples of good practice	36	42	32	31	41	36	39	38	30	36	36	36	34	41
Special content in schools	32	33	32	30	32	38	35	30	32	31	34	32	32	33
Through special inter-generational solidarity programs	28	34	24	33	24	28	35	25	26	29	26	22	31	29
Something else*	7	9	6	8	8	5	6	8	7	8	6	7	9	4

*Upbringing, television shows...

Education and upbringing, ie mostly of the younger generations who are in such a process, was recognized by the respondents as the most effective way to reduce discrimination against older persons, regardless of whether such an answer was obtained directly or through special content in schools. This attitude is dominant in all socio-demographic variables, which indicates its importance for achieving equality of older persons.



Do you see any organization/institution/individual representing and protecting the rights and position of older persons?

More than half of the respondents do not know about any organization, institution or individual representing and protecting the rights and positions of older persons- 56%. 16% of citizens over the age of 65 answered in the affirmative.

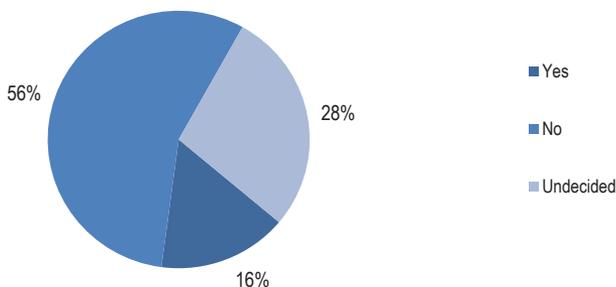
	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes	16	16	16	10	20	18	15	18	14	16	15	12	14	25
No	56	54	57	59	54	54	57	58	52	56	56	57	59	47
Undecided	28	29	27	31	26	28	28	24	34	27	29	31	27	28

Respondents who answered that they do see an organization, institution or individual representing and protecting the rights and positions of older persons gave the following answers: Red Cross, Gerontology Center, President of Serbia, Association of Pensioners ...

The fact that slightly more than half of the respondents do not know that an organization, institution or individual represents and protects the rights and position of older persons in Serbia, and that almost a third are still undecided on this issue, indicates the need for a greater availability of information on

this topic, which could lead to the greater protection of older persons from discrimination.

Most respondents who answered that they have seen an organization, institution or individual representing and protecting the rights and the position of older persons in Serbia, have college/university education, although the answer to this question does not show a relevant relationship between the answers and socio-demographic variables.



Social participation – digital literacy

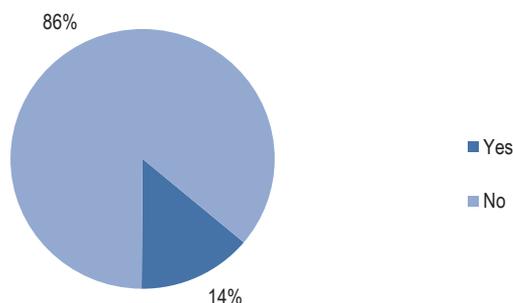
Are you involved in the work of some organizations (club, association, local community center, local self-government, self-organized informal groups ...)?

The next thing we asked citizens over the age of 65 was whether they were involved in the work of some organization. Only 14% of respondents answered yes. We can see that a higher percentage of men are involved in the work of organizations than women. Also, we notice that respondents aged 70 to 79 are somewhat more involved in the work of organizations such as clubs, associations, local community centers and others, than other age categories.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes	14	18	12	12	17	13	14	17	11	15	13	4	13	32
No	86	82	88	88	83	87	86	83	89	85	87	96	87	68

There is no significant difference between the respondents according to the type of environment they live in, i.e. rural vs urban area.. When looking at the type of household, respondents living with a partner showed slightly

greater involvement in the work of some organizations compared to other respondents. The highest involvement in the work of various organizations was seen in respondents with higher education (32%). This difference is particularly noticeable in relation to respondents with primary school or lower level of education (4%), while respondents with secondary level of education are on average in relation to all variables.



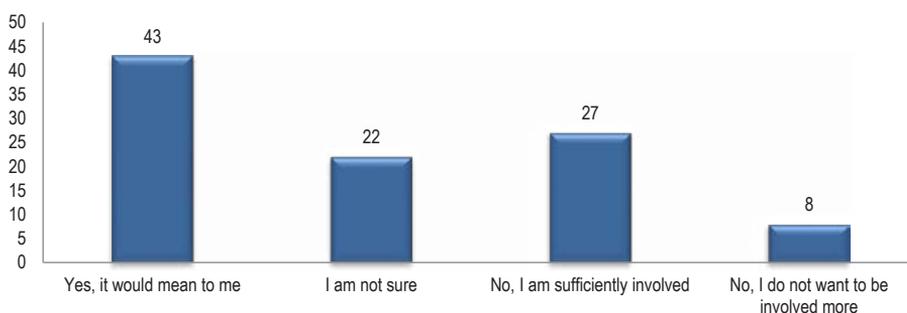
Would you like to be more involved in the social life of the community?

When asked if they would like to be more involved in the social life of the community, two fifths of the respondents answered that it would mean to them – 43%. Slightly more than a third of respondents answer that they do not want to be included in the social life of the community, either because they think they are sufficiently involved, or because they do not want to be involved more. A higher percentage of women (48%) than men (38%) think that more involvement in the social life of the community would mean to them.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, it would mean to me	43	38	48	53	35	50	33	50	42	41	47	25	30	58
I am not sure	22	23	20	24	27	0	33	25	0	19	26	25	30	13
No, I am sufficiently involved	27	27	28	24	27	38	20	17	58	31	21	25	39	17
No, I do not want to be involved more	8	12	4	0	12	13	13	8	0	9	5	25	0	13

31% of respondents from the city and 21% of respondents from rural areas believe that they are sufficiently involved in the life of the community. Also, there is a slightly higher percentage of respondents who live with a partner and would like to be more involved in the community life (50%), compared to those living alone (33%), or those living with their family (42%). The largest percentage of those living with their family feel that they are sufficiently involved in their community life (58%), compared to respondents living in other types of households.

In addition to the fact that respondents with a higher degree of education showed greater participation in the work of various organizations (previous question), they also expressed greater interest in additional involvement in community life - 58%, which is twice as many as 25% of respondents with primary school or less education and 30% of respondents with secondary education.



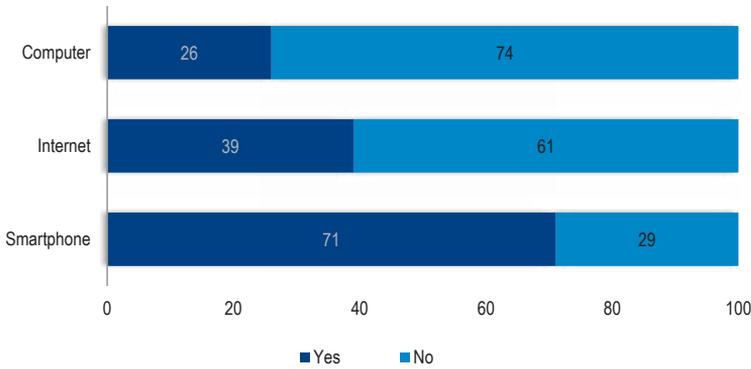
Do you use IT devices?

When we asked older persons if they used IT devices, we got the answer that they mostly use smartphones (71%). Two-fifths of respondents state that they use the Internet, and a quarter that they use a computer. The obtained answers indicate that it is possible not to understand, or insufficiently understand, what is meant by a smartphone and that it is possible that the respondents called all types of mobile devices 'smartphones'.

Regarding the use of computers, we notice that they are mostly used by respondents aged 65 to 69 - 41%, and those with college or university education (49%). Only 7% of surveyed citizens over the age of 80 use a computer, and so do only 5% of those with primary school or less education.

A higher percentage of people living in the city use computers (34%) and the Internet (42%), while people living in rural areas use smartphones more (80%).

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Computer	26	23	28	41	19	7	19	30	27	34	15	5	29	49
Internet	39	41	38	54	28	30	34	44	37	42	35	21	44	53
Smartphone	71	71	72	79	72	51	67	75	71	65	80	60	73	83



Respondents did not show significant differences in terms of gender, although a slightly higher number of older women use a computer compared to the number of men. The use of computers and smartphones is less present the older an age group is. The lowest percentage of older persons who do use the Internet are those in the age category of 70-79 years old.

All IT devices are mostly used by respondents with college/university education, in relation to all variables.

Also, according to the answers received, older people who live alone use IT devices less than older people from other types of households, which may indicate the need for their greater involvement in training for the use of these devices.

What is the reason why you do not use IT devices? (you may circle more than one answer)

We asked respondents who stated that they do not use IT devices what their reason for this was. Half of the citizens over the age of 65 say that they do not want to use them, while two fifths think they do not have the necessary knowledge. Only 6% of surveyed citizens do not use IT devices because there are no technical possibilities for it in their area. 17% of respondents state that they do not have the means to buy the devices, and 18% that they are afraid that something will go wrong.

Residents who live in rural areas answer that they do not have the opportunity to buy devices and that there are no technical possibilities for using IT devices in their area to a greater extent than the respondents from urban areas. At the same time, however, a smaller percentage of respondents from rural areas state that they do not want to use IT devices (47%) compared to the city residents (59%).

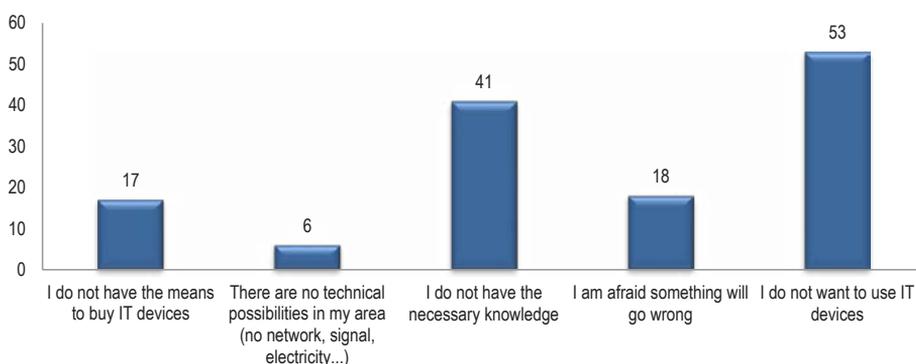
	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
I do not have the means to buy IT devices	17	15	19	17	17	17	23	16	13	12	23	25	15	5
There are no technical possibilities in my area (no network, signal, electricity...)	6	5	6	4	5	8	5	10	1	2	10	10	4	2
I do not have the necessary knowledge	41	41	41	43	40	41	45	42	36	42	40	41	43	34
I am afraid something will go wrong	18	13	21	20	16	15	16	21	14	17	18	22	13	20
I do not want to use IT devices	53	56	51	54	53	53	57	46	59	59	47	55	49	63

Only respondents who do not use an IT device may answer this question

The answer to this question correlates with the answer to the previous question, in that the same respondents who live alone were the ones who were most likely to say that they did not have the necessary knowledge and/or means to buy IT devices.

A large number of respondents with higher education do not want to use IT devices (63%), although, at the same time, this is the group where the largest number of respondents say that they do use IT devices. This answer indicates that those who do not use the devices, simply do not want it, regardless of the knowledge and capabilities they have. On the other hand, a larger number of respondents with a lower level of education than college/university state that they do not have the necessary knowledge to use the IT devices.

When the answers are analyzed according to gender of the respondents, there is a slightly higher percentage of women who are afraid of breaking something or do not have the means to buy devices compared to the percentage of male respondents who say the same thing.



Do you use any of the communication applications (Viber, WhatsApp, etc.)?

Respondents who stated that they did use a smartphone were asked if they used any of the communication applications such as Viber and WhatsApp. More than half of the citizens answered that they did use these applications, 55% of them. Gender differences are not noticeable, i.e. both men and women use these applications to the same extent. However, we can notice that these applications are used more by respondents aged 65 to 69 compared to older respondents - 71%.

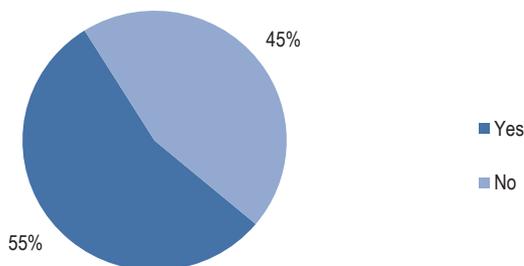
We also noticed a significant difference in the type of settlement. Namely, respondents who live in the city (70%) use a higher percentage of communication applications compared to rural area residents (39%).

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes	55	55	56	71	48	26	40	64	58	70	39	13	64	82
No	45	45	44	29	52	74	60	36	43	30	61	88	36	18

Only respondents who said they did use smartphones may answer

Fewer people living alone use these applications compared to those living in other types of households, which may confirm the need for their greater involvement in training to use the devices themselves and various applications, as one of the ways to increase their involvement.

We also noticed a significant difference according to the level of education. Respondents with a higher level of education use communication applications in the highest percentage – 82%, while, at the same time, the respondents with primary school or lower level of education are the ones who do not use communication applications – 88% in the highest percentage.



How do you assess your knowledge/skills in using IT devices?

The next thing we wanted to find out from the respondents was how they assess their knowledge and skills in using IT devices. Half of the respondents stated that they did not use these devices. A quarter of citizens over the age of 65 believe that they have only basic IT skills. 15% of respondents use a computer or a telephone mostly on their own and only sometimes ask for help, and 10% of surveyed citizens, in their opinion, use IT devices quite well.

Respondents in the age categories from 65 to 69 years and from 70 to 79 years in a higher percentage state that they only sometimes ask for help, and that they use these devices quite well in relation to the respondents older than 80 years. More precisely, knowledge on IT devices is less present the more advanced the respondents age is.

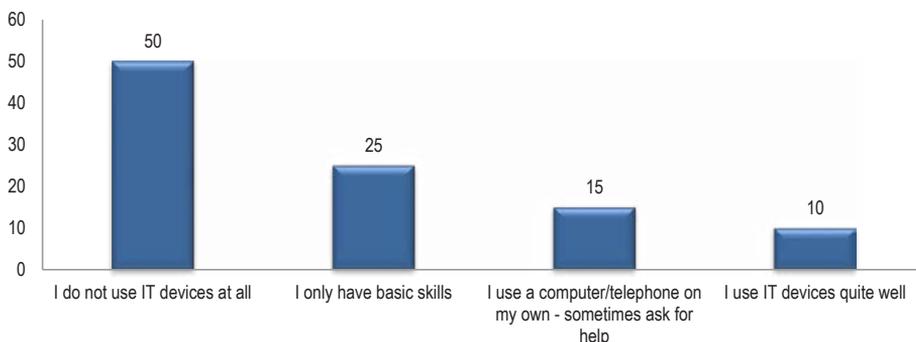
	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
I do not use IT devices at all	50	53	48	34	55	77	63	38	52	44	58	83	41	25
I only have basic skills	25	27	24	29	25	15	17	34	22	26	23	15	32	23
I use a computer/telephone on my own - sometimes ask for help	15	13	16	21	13	5	11	17	15	17	12	1	19	24
I use IT devices quite well	10	7	12	16	7	3	9	10	11	13	7	1	8	28

More respondents from the city than from rural areas (13% from the city and 7% from rural areas) state that they use IT devices quite well, and that 58% of rural residents and 44% of the city residents state that they do not use these devices at all.

Analyzed by gender, more women than men use IT devices quite well, more of them use computers independently and do not use smaller devices at all.

Again, as with the previous questions, more respondents living alone (63%), compared to the number of respondents living in other types of households, do not use IT devices at all or only basic IT skills.

Also, by far the largest percentage of respondents who do not use IT devices at all (83%) are those with primary school or less education, not only in relation to other levels of education but also in relation to other variables. Respondents of this level of education at the same time state in the smallest percentage (1%) that they independently use or use IT devices quite well. These data, together with the data from the previous questions, indicate the need for a greater involvement of older people with a lower level of education in various courses on how to use IT devices.



In your opinion, can new communication technologies improve the quality of life of older persons (especially in terms of information and social inclusion)?

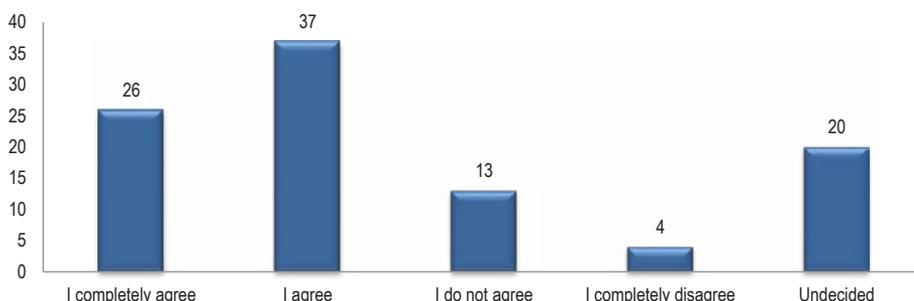
As many as 63% of the surveyed citizens believe that the new communication technologies can improve the quality of life of older persons, and a quarter of them fully agree. 17% of citizens do not agree with this statement, while a fifth are undecided on whether the new communication technologies can improve their quality of life. Only 4% of respondents disagree with this statement, which shows that the importance of communication technologies and their impact are accepted by older persons.

One third of citizens over the age of 80 do not agree that new communication technologies can improve the quality of life. This age group stands out compared to others who only do not agree in a smaller percentage.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
I completely agree	26	24	26	30	22	23	21	30	25	30	20	13	28	37
I agree	37	33	40	37	40	30	40	38	33	36	38	36	36	43
I do not agree	13	16	10	9	10	28	10	11	17	11	15	17	12	7
I completely disagree	4	5	4	5	5	3	6	4	4	3	6	10	2	1
Undecided	20	21	20	19	23	16	22	17	22	20	21	24	21	12

A larger number of female respondents than male respondents agree or completely agree with this statement. An equal percentage of respondents in different types of households agree or fully agree that the new communication technologies can improve the quality of life of older persons. Regarding the type of settlement, a slightly higher number of respondents from rural areas in relation to those living in the city do not agree or do not agree at all with this statement, while a larger number of respondents from the city completely agree.

Regarding the level of education, a larger number of respondents with a higher level of education agree, or completely agree, with this statement, compared to respondents with a lower level of education.



Would you join an additional education program?

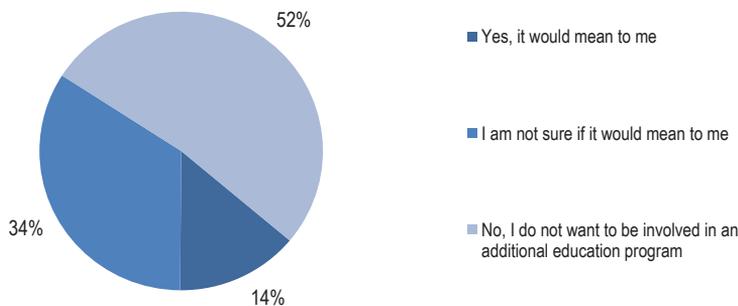
Slightly more than half of the respondents would not join an adult education program, and only 14% of the respondents would join. A third are not sure if that would mean anything to them.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, it would mean to me	14	10	17	22	9	10	14	13	17	16	12	7	13	29
I am not sure if it would mean to me	34	41	29	34	39	23	31	39	30	37	30	24	39	36
No, I do not want to be involved in an additional education program	52	49	53	45	52	67	55	48	53	47	58	69	48	35

Respondents over the age of 80 (67%) do not want to be involved in further education to a greater extent than respondents in other age categories. A slightly higher number of women compared to the surveyed men stated that an inclusion in additional education would be meaningful to them (17% of women and 10% of men). Also, there is a higher number of older men who are not sure what it would mean to them (41%) compared to the surveyed older women (29%).

Also, a smaller number of respondents from the city (47%) do not want to be included in additional education compared to respondents from rural areas (58%), and a smaller number of respondents from rural areas who are undecided in this regard compared to the respondents from the city, which shows the presence of interest for additional education programs among older people in the countryside

A larger number of respondents with college/university education believe that it would mean for them to be included in additional education (29%) compared to other levels of education, which is correlated with a greater interest in inclusion in community life. At the same time, the largest percentage of respondents with primary school or less education do not want to be included in additional education at all (69%).



What additional education programs do you think should be offered to older persons? (possible to check multiple answers)

Those respondents who would join a program of additional education are the ones who state in the largest percentage that they would choose a digital skills training program – 77%. The next answer, in terms of representation, is – a foreign language program – 42%. A quarter of citizens over the age of 65 are interested in programs such as handicrafts and repairmanship workshops.

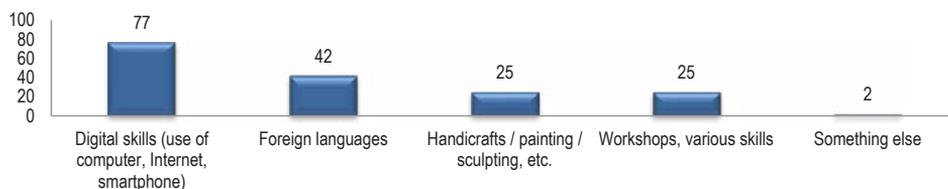
Men (93%) are more interested in the digital skills program than women (70%), while women (46%) are more interested in foreign languages than men (33%). Only women are interested in the handicrafts courses – 35%. Respondents aged 70 to 79 are more interested in digital skills than other age groups.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Digital skills (use of computer, Internet, smartphone)	77	93	70	75	86	67	67	83	79	79	72	71	83	73
Foreign languages	42	33	46	47	29	50	40	44	42	41	44	0	35	64
Handicrafts/ painting/ sculpting, etc.	25	0	35	31	21	0	20	28	26	29	17	43	22	23
Workshops, various skills	25	20	27	22	29	33	33	28	16	24	28	43	26	18
Something else	2	0	3	3	0	0	0	0	5	3	0	0	0	5

Only respondents who answered Yes to the previous question may answer

When looking at household types, those living with a partner show the greatest interest in adult education programs. In answering this question, there is no greater relevant connection between the obtained answers and the type of settlement in which the respondents live, i.e. respondents from both rural areas and the city showed interest in various trainings, with less interest in training for handicrafts among rural residents, and the interest in various crafts is higher in relation to the inhabitants of the city. Also, those living in the city, and respondents with highschool education, showed a slightly greater interest in training for digital skills programs.

Significant interest in the foreign language program – 64% was expressed by the respondents with college/university education, while those with primary school or less education showed greater readiness for handicrafts and workshops.



In your opinion, how should educational programs for older persons be implemented? (you can check several answers)

We asked citizens over the age of 65 how educational programs for older persons should be implemented. 45% of respondents answered that the content should be high quality and easy to understand, and 41% of respondents still believe that the content of the program should be tailored to the needs and abilities of students, and that lecturers should be trained to work with older persons.

Respondents aged 65 to 69 are more likely to believe that lecturers should be trained to work with older persons than older respondents.

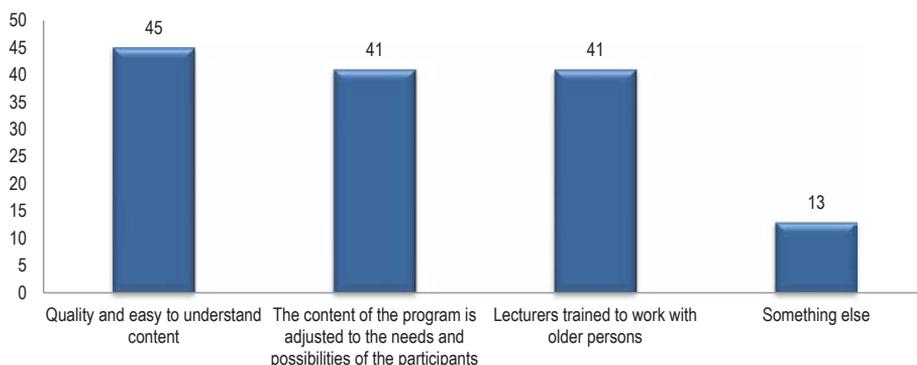
Quality and easy to understand content, i.e. content adapted to the needs of older persons, has been mentioned by a slightly higher percentage of surveyed men than by women. In all the offered options, the respondents from rural areas are in the lead in relation to the respondents from the city, except in the part of the answer which refers to other conditions for setting up educational programs for older persons.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Quality and easy to understand content	45	48	42	42	46	49	48	41	46	43	48	52	42	40
The content of the program is adjusted to the needs and possibilities of the participants	41	44	38	45	38	39	38	44	39	40	42	34	43	45
Lecturers trained to work with older persons	41	39	42	49	37	30	39	37	47	40	42	42	38	44
Something else*	13	13	13	10	15	15	13	12	14	14	11	13	12	13

* through TV shows, pensioners' organizations...

“Quality and easy to understand” content has been asked for by a slightly higher percentage of respondents with primary school or less education.

In answering this question, no relevant correlation is observed between the obtained answers and other socio-demographic variables.



The attitude of the media towards older persons

In your opinion, are the position and problems of older persons sufficiently represented in the media?

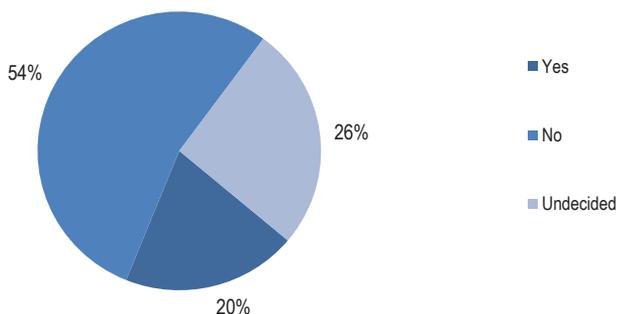
More than half of the surveyed citizens believe that the position and problems of older persons are not sufficiently represented in the media. One fifth of the citizens are of the opinion that the problems of older persons are sufficiently represented in the media.

Female respondents believe that the problems of older persons are sufficiently represented in the media (25%) to a greater extent than male respondents (12%).

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes	20	12	25	21	19	20	21	23	14	20	20	17	17	31
No	54	58	51	54	54	54	48	53	61	56	52	49	59	51
Undecided	26	31	23	25	27	26	31	24	25	25	28	35	24	19

Slightly fewer respondents who live in a community with a family feel that the position and problems of older persons are sufficiently represented in the media, compared to other respondents.

No relevant connection between the answers in relation to the type of settlement in which the respondents live has been noticed, while there are more respondents with college/university education in relation to other levels of education who believe that the position and problems of older persons are sufficiently represented in the media.



In your opinion, what content should the media provide on a larger scale? (possibility of multiple answers)

70% of respondents believe that more media content is needed in the media designed to enhance the understanding of the aging process and older persons and their problems, and almost half believe that more content is needed that encourages intergenerational solidarity and understanding.

The majority of respondents over the age of 65 believe that the media should cover, to a greater extent, content that contributes to the understanding of the aging process and older persons and their problems - 70%. Half of the respondents state that there should be more content that encourages intergenerational solidarity and understanding, and slightly less than a third state that the media should provide more content that promotes the value and the achievements of older people.

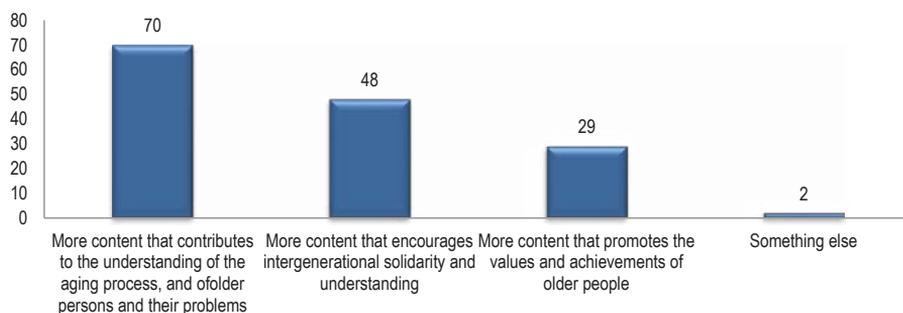
A higher percentage of respondents over the age of 80 believe that the media should provide more content that contributes to the understanding of the aging process and older people, compared to younger respondents. This is also the attitude of the respondents from rural areas in relation to the respondents from the city.

Demands for more content that promotes the value and the achievements of older people have predominantly been made by respondents with college/university education.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
More content that contributes to the understanding of the aging process, and of older persons and their problems	70	68	72	70	67	79	71	73	67	72	67	73	72	61
More content that encourages inter-generational solidarity and understanding	48	51	47	53	46	42	58	47	43	53	41	50	49	45
More content that promotes the values and achievements of older people	29	34	25	30	30	21	27	29	30	26	33	23	27	42
Something else	2	0	4	0	4	3	6	0	1	2	3	2	3	0

Only respondents who answered 'No' to the previous question may answer this question

The fact more than half of the respondents answered that they believed that the position and problems of older persons were not sufficiently represented in the media (54%), and that a large number stated that more content was needed to understand the aging process and older people, and to encourage intergenerational solidarity and understanding, shows that measures should be taken to broadcast such content.



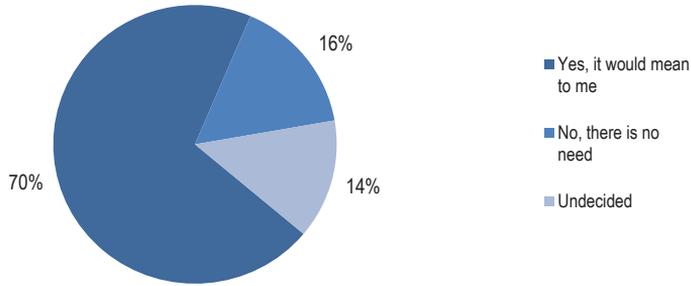
In your opinion, would it be useful to you if the public media services would broadcast specialized content intended for older persons?

We asked citizens over the age of 65 if they thought it would be useful to them if public media services were to broadcast specialized content intended for older persons, and as many as 71% of respondents answered that it would mean something to them. Only 16% of the surveyed citizens are of the opinion that there is no need for that.

Respondents older than 80 years (80%) believe that it would be useful for media services to broadcast programs intended for older people to a greater extent than younger respondents. No relevant correlation between the answers in relation to other socio-demographic characteristics has been observed.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, it would mean to me	71	69	72	66	72	80	74	71	67	72	70	71	69	75
No, there is no need	16	15	16	18	15	11	13	18	15	15	16	16	16	13
Undecided	14	16	12	16	13	8	13	11	18	13	15	13	15	12

The data obtained from the answers to this question correspond to the data obtained from the answers from the previous question. Namely, a large number of respondents stated in the previous question that more content intended to enhance the understanding of the aging process and older persons (70%) was needed. Those programs could be broadcast by public media services, according to a larger number of respondents.



Violence

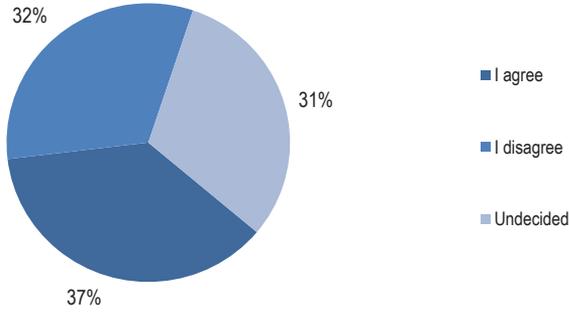
In your opinion, are older persons more exposed to various forms of violence?

37% of respondents believe that older persons are more exposed to various forms of violence, while 32% of respondents disagree with them. A higher percentage of women (42%) agree that older people are exposed to violence than men (31%).

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
I agree	37	31	42	32	40	41	39	36	36	38	36	37	38	33
I disagree	32	35	30	36	30	28	30	33	33	30	35	35	27	40
Undecided	31	35	28	32	30	31	31	30	31	33	28	28	34	27

The opinion that older persons are exposed to violence increases with the respondents' age.

32% of respondents share this opinion in the age category 65-69 years and 40% in the category of persons older than 80. Other variables do not indicate a relevant association with the responses obtained.

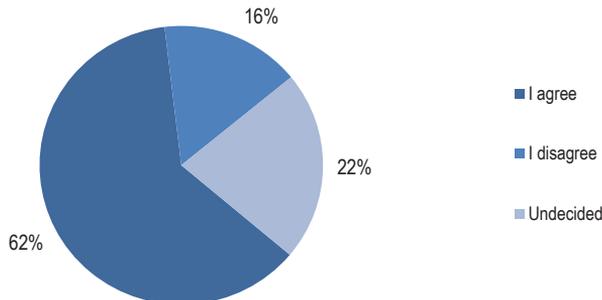


In your opinion, are older persons more exposed to neglect?

Just over two-thirds of respondents believe that older persons are more exposed to neglect. Only 16% of surveyed citizens disagree with them. One-fifth of respondents are undecided on whether older persons are more exposed to neglect than other citizens.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
I agree	62	63	61	61	62	66	61	62	63	61	64	55	69	55
I disagree	16	18	14	16	16	13	14	18	15	15	17	16	11	27
Undecided	22	18	25	23	22	21	25	20	22	24	19	29	19	19

When it comes to neglect, no relevant connections with individual socio-demographic characteristics of the respondents have been observed.

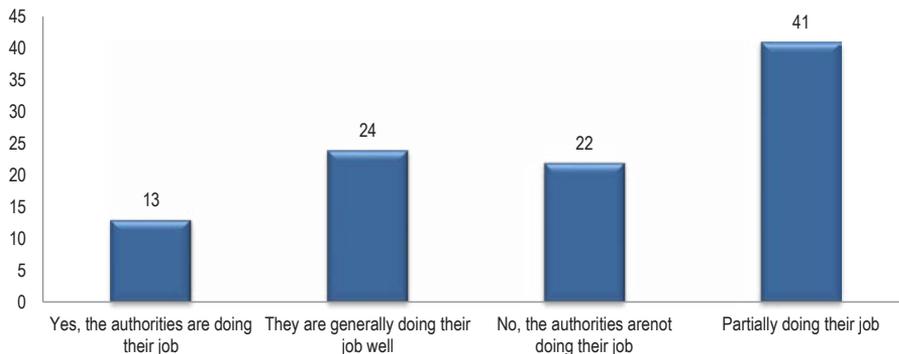


Do you find the response of the competent authorities regarding protection against violence, abuse and neglect of older persons adequate?

The next thing we asked citizens over the age of 65 was whether the response of the competent authorities regarding protection against violence, abuse and neglect was adequate. 13% of respondents believe that the authorities are doing their job, and 24% that they are generally doing their job well. One fifth of the respondents are of the opinion that the authorities are not doing their job.

	Total (%)	Gender		Age			Household			Type of settlement		Education		
		Men	Women	65-69	70-79	80 and above	I live alone	I live with a partner	I live in a community with family	City	Rural area	Primary school or lower	Secondary education	Higher education
Yes, the authorities are doing their job	13	10	15	13	12	15	12	12	14	13	12	11	11	19
They are generally doing their job well	24	26	22	23	24	25	26	28	16	23	25	19	24	31
No, the authorities are not doing their job	22	27	19	23	21	25	17	22	27	20	25	21	24	21
Partially doing their job	41	38	43	41	43	36	45	37	42	43	38	50	41	29

Women more often than men think that the authorities do their job (15% of women and 10% of men). Respondents living in rural areas, more so than the respondents from the city, believe that the authorities do not do their job when it comes to protecting the citizens from violence, abuse and neglect (25% in rural areas and 20% in the city). Respondents with primary school or lower levels of education more often than average believe that the competent authorities are partially doing their job (50%). No relevant correlations based on age and household type have been observed.

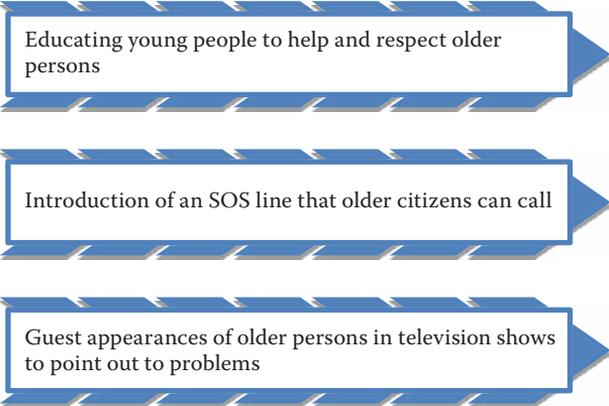


What do you think could protect older people better from violence, abuse and neglect?

Among the statements related to the possibilities for a better protection from violence, abuse and neglect, in addition to mentioning ‘better work of competent institutions’ and ‘contact phone/SOS lines’, they also mentioned ‘educating young people to help and respect older persons’, and ‘guest appearances on TV shows’. These answers are related to the answers given in the part of this questionnaire that refers to discrimination against older persons, when, among the offered answers on how to reduce the poor treatment of older persons, most respondents suggested ‘through education’ (60%), and a significant percentage said they would like to see ‘special contents introduced in schools’ (32%).

These answers can also be compared to the answers about needing more media content aimed at the understanding of the aging process and understanding older persons and their problems, and needing more media content that encourages intergenerational solidarity and understanding.

- Better work of competent institutions (police)
- A phone number that can be called and asked for help
- Stricter penalties for those who commit violence



Educating young people to help and respect older persons

Introduction of an SOS line that older citizens can call

Guest appearances of older persons in television shows to point out to problems

Results of focus group analyses

Part of this survey was conducted using the qualitative method, i.e. the quantitative survey, based on interviewing a representative sample of people older than 65, was supported by a qualitative survey, using focus groups.

Participants in the focus groups were representatives of:

- older retired persons, members of the academic community, and other, who spoke about their position, in order to compare their experience with other older people interviewed;
- older people from a typical rural area, who presented the challenges they face in accessing basic social and health care services, and in economic and other fields;
- civil society organizations dealing with the situation of older persons, who would talk about their experiences providing help and support to older persons.

Focus groups were guided by a pre-defined set of questions. Six to eight participants participated in each focus group.

The results of the interviews with the focus group participants are given below, divided according to focus groups, and their views on: possibilities for policy makers to improve the position of older persons with a brief overview of the implementation of the previous National Strategy on Aging; examples of good practice that support older people and take their needs into account; opinion on current trends in policy-making and opinion on financial sustainability of certain solutions designed to protect older persons; and key issues to be covered by a future strategic document.

Interviews with experts and decision makers in this field were conducted on the same topics, as a specific addition to this qualitative survey method. The results of interviews with experts and decision makers are highlighted in a separate section, including their views on the areas in question.

Conclusions and recommendations that follow from both parts of the survey are given in the Conclusions and recommendations section.

The pearls of survey work

Some interesting quotes from the focus groups

There is a lot more work in the countryside, the living conditions are difficult, a doctor is far away, a shop, everything is far away, if you don't have any children you are in big trouble.

Who knows how many people agonized in their village and died because of some benign, trifle thing, only because there was no one there to help them. Also, you have no one to call to help you anymore. There is no one to work here either.

Not every support costs money - a nice gesture or a conversation is sometimes enough.

It is difficult for both women and men in the countryside. And everyone hopes to die before the other one, so as not to be the one left alone.

The readiness and capacities of the older persons are also evidenced by the fact that, during the state of emergency, despite the ban on movement, the older persons were involved in various volunteer activities that they performed over the phone.

They say: services are expensive. But we don't even have a sufficient number of services organized for those who can afford them.

We would like to learn how to use this phone, but those who train us do not understand that we are not children and we can't do it so fast - older persons forget how to cut with their scythe, which is something they have been using all their life, let alone how to use the phone.

In the vicinity of Kragujevac, we have villages where there are no health stations, people do not even have a telephone and the electricity supply is very low.

Please child, don't bother me with culture. Here, in the villages, people are preoccupied with other problems and no such thing would attract our attention. It would be a little better if we would have a better TV signal, it often gets lost while I watch TV.

The biggest burden of caring for older persons falls on the so-called sandwich generation - the middle generation. Society doesn't do enough.

It started to get better in health care, they make an appointment, you don't wait long, they treat you nicely, while when you were born (think of a researcher born in the seventies), not everything was as great as you think, but we had a healthier environment, so the people got sick less.

The problem is that the state used to be poor, and now that the economy has started developing, it still needs to develop, so that the situation becomes better than it was, because you can't just do one thing to make it better for the older persons. But, hell, this virus came and ruined everything.

We live fast, we eat and drink water on the run, so we get sick quickly. You work during the weekend, the boss calls you on this devil's mobile phone to come tomorrow even though you have a day off - there are no longer the rights of workers as there used to be, so people get sick of it, and some even have a mental problems.

In the village, people work, they go out, weed out a little, dig, they never lack work, some because they have to, and some because of their hobbies. As long as people work, they are worth something. Work keeps us alive.

You used to gather 30 people in a second to help you, and now you can't find someone to help you lift a sack of flour, or to measure a piglet... It's like, as they say - mind your own business.

People don't even know about many rights they have, so they don't use them, and they keep quiet about it, those working in the public administration.

In our environment, the prevailing view is that someone else will do the work, that someone else is responsible for our lives, that they will organize what is best for us to live well. In our environment, it is a shame to write a will while you're alive and well and finish the business with the distribution of property, as if it is better for the heirs to drag themselves around the courts and quarrel.

It encourages the recognition of the needs and development of certain types of services 'outside the sector' for the care of the older persons, which recognize and meet the needs of the older persons (food delivery, 'cooked meals' in kitchens 'take away', etc.).

There are also examples from volunteer good practice of how, with a little effort and good will, support can be provided to the older persons (e.g. Potrčko (Fetch-Boy) in Pirot, who 'distributes' medicines by bicycles to the older persons in the city).

Examples of good practice (media, civil society, local community, etc.) should be systematically affirmed and 'rewarded' and these examples should be used to 'innovate' systemic solutions.

Focus group – members of civil society organizations

Participants in this focus group came from several civil society organizations dealing with the position of older persons.

All focus group participants expressed almost the same view on current trends in policies for older people. This view reflects concerns about the ambiguity of policy trends and objectives, without consistency in addressing current issues.

In order for the prospects and modalities for improving the conditions and quality of life of older persons to be significantly better, it is necessary to support various activities of all stakeholders (older persons and those who will age, civil society organizations) and establish a system of compliance with and implementation of these policies.

Also, all participants expressed a very positive attitude about the previous National Strategy on Aging, which they believe was a very good document (the Madrid International Plan of Action on Aging and other important documents were respected), which covered the most important areas. The participants stated that the main problem of this Strategy was that no action plan for its implementation has been determined, nor have financial resources been allocated for the implementation of activities, the achieved results have not been monitored, nor has a proper evaluation of its implementation been performed, which would have been a good starting point to conduct the policies concerning this area.

Considering the current demographic structure and the growing need for numerous and diverse support services for older persons in the social and health care system, and using their previous experience in law enforcement, while focusing on financial unsustainability of certain solutions and the need for better defined and controlled funding, the participants assessed that the policy makers have a great chance and opportunity to draft a new, future strategic document to implement and monitor based on a much more realistic foundation than the previous one.

The biggest problems concerning the position of older persons highlighted during the discussion were:

- poverty in older age and insufficient efficiency of the financial assistance system (only 10% of older persons who have the right to financial social assistance, exercise that right), while 0.2% of GDP would be enough for “social pensions”, the amount of which would have to be less than the minimum amount of the insurance pension;
- lack of funds for social assistance (in terms of GDP);
- lack of control over funds allocated to local-self governments through earmarked transfers, inconsistency in allocating these funds to appropriate services on an ongoing basis, and the lack of control over the spending of funds for other people’s care and assistance and connecting the funds to the

use of services in terms of justification of funds, so as to reduce undeclared work;

- lack of records on older persons and their needs;
- the existence of a ‘black’ market for various services, and the lack of an adequate number and scope of legal service providers (for an example, too small a number of day care centers compared to a great demand);
- lack of sustainability of various services and lack of support to private service providers (need to review licensing standards especially before starting to provide services, lack of benefits in terms of reduction or subsidy of contributions for compulsory social insurance, inability to hire home care assistants for temporary and occasional jobs, etc.);
- the need to provide adequate capacity for institutional accommodation and the separation of shared accommodation for adults and older persons;
- lack of systematic introduction and advancement of new services (a good example is the Majdan Cultural Center, which employs older persons who provide free art courses to young people);
- lack of digital literacy among older persons, which includes how to use payment cards and make withdrawals from ATMs, and digital fraud (online shopping);
- the scope and possibilities for health care use, especially during an emergency situation, which is why special outpatient clinics should be organized for older persons who are chronically ill and who regularly need medical help. All procedures in health care should be standardized and enable complete and simplified informing of citizens;
- lack of specialists in geriatrics.

The participants singled out the following key topics/issues that the new strategic document should contain, :reducing the poverty of older persons, which should be the role of the state, and improving the quality of their lives and daily functioning by creating and improving services. The current possibilities of the state to provide for the existence of persons who do not exercise the right to a pension stand out as limited. The so-called ‘Social pension’, or cash social assistance, should be less than the lowest retirement pension (for workers in agriculture). The pension system itself should be sustainable (by controlling the payment of appropriate employees’ taxes, and not the payment of taxes on minimum income) and at the same time ensure a dignified older age (appropriate amount of income);

- the need to assess the sustainability of certain services in Serbian conditions, especially bearing in mind the need to ensure continuity and efficiency of service delivery (owing to uncertainty in financing, services are not provided throughout the year, although different models of long-term care are known);

- enabling the development of social and health services, and the integrated services of the two systems. The need to provide adequate and accessible health care was especially emphasized (there are no official data on the number of rural settlements lacking a health station);
- supporting the development of all services (currently, the most developed service is home help, but the right to it is exercised by only about 14 thousand older people living in 122 local self-government units, mostly in urban areas, and the service is not provided throughout the 12 months of the year). There is an absolute lack of community services for people with dementia;
- to ensure that the services provided by the state and private providers do not have the same price. The state should subsidize the services, and also provide certain benefits to private providers;
- providing various services in accordance with the needs of older persons, who are a heterogeneous group, paying special attention to older persons in rural areas where there are often no roads, transportation, even electricity and landlines (give examples of self-association), and people with disabilities, women, etc .;
- continuous evaluations, monitoring of quality and improvement of the situation with regard to the provision of services in the field of social and health care;
- involving older persons in decision-making processes, especially those that directly affect them, and defining policies, with better organization of institutions that implement programs to support, care for and protect older persons. The possibility of introducing a special advisory body within the Government, consisting only of older persons, where older persons would have the opportunity to influence decision-making on issues that concern them;
- the field of education, mental health, programs for preparation for retirement and life in older age, and the future strategy to include topics that have already been covered in the past and which are indicated in international documents;
- creating support measures for families caring for older dependent members;
- ensuring accessibility in every respect (to buildings, to information, to communication, to appropriate transport...), creating communities that are adapted to older persons ('age-friendly communities');
- using the potential of older persons and respecting the principle of active aging in practice, with special attention to both the physical and mental health of older persons;
- the position of older persons in emergency situations, which is why it is necessary to establish records of older persons and their needs at the level of local self-governments, in order to facilitate action in all situations, especially emergencies;

- intergenerational solidarity with constant promotion and media coverage of this topic;
- violence and neglect, and the often present financial abuse of older persons within their families.

Examples of good practice that the participants of this focus group singled out are:

- during the state of emergency, despite the ban on movement, older persons were involved in various volunteer activities carried out over the phone (the involvement of older persons is invaluable, given that the report of the UN High Commissioner for Human Rights states that only 2% activities during the state of emergency were dedicated exclusively to older persons, who were, indisputably, in a very difficult situation);
- not all activities require funds - an example is when during the state of emergency in Belgrade, local governments offered help in the form of packages which said that, from that moment, they are in care of local government, which did much for the mental health of older persons, especially in times of lockdown;
- mobile pharmacies, in addition to mobile health workers teams, like the ones already existing in the villages around the village of Blace, Serbia;
- good home treatment systems, especially in larger centers, which should be used and expanded;
- in European countries, there are different forms of housing communities, which can be diverse: sets of smaller detached houses with accompanying common facilities and open spaces suitable for different activities, smaller apartments within the housing facility, combined communities of older and young families, which establish multiple and mutually satisfactory cohabitation and mutual assistance;
- in Austria, users participate in the prices of services depending on the income they have at their disposal - which could increase the number of users, while in the Netherlands specialized day care centers are organized for people with dementia, on farms and rural households, where people feel more useful and more fulfilled, and the funds required for such centers are smaller compared to the specialized departments in the accommodation institutions (e.g. one driver, one vehicle and two caregivers are needed, with a certain fee for the farm itself).

Focus group – members of the academic community

Participants in this focus group were members of the academic community dealing with the position of older persons.

All focus group participants expressed almost the same attitude about the current trends in policy making, reflecting their concerns about not seeing what the trend and goal of public policies is, and about the fact that current

problems are solved with ad hoc solutions spontaneously, without a clear plan and strategies. They state that it is necessary to adopt a new strategic document as soon as possible. Participants also express a very positive attitude about the previous National Strategy on Aging, which they consider to be an extremely good document that provides a good starting point for conducting policies in this area, but that, unfortunately, in practice lacks both the funds to implement, and mechanisms for monitoring the achieved results. They also expressed their concern that the action plan for its implementation has not been implemented. In this regard, we do not have valid and realistic indicators of its performance in practice, as its 'evaluation' consisted of only a couple of focus groups and interviews organized by the UNFPA, but without further use in practice. Considering such starting points, and the current demographic structure and the growing need for numerous and diverse support services for older persons, especially in the social and health care system, with previous experience in law enforcement in the two areas, with a focus on financial unsustainability of certain solutions, but also the need for better defined and controlled financing, the focus group participants assessed that the policy makers have a great chance and opportunity to develop a new, future strategic document, which would be applied in practice and monitored on a much more realistic basis than the previous one.

The biggest problems mentioned during the discussion were:

- the problem of financing services in the social protection system, disconnection of rights from the system, such as the right to care and assistance, which is not related to services in the system, and there is no obligation to justify how the budget funds are spent by the users of this right;
- as a possible way to solve the problem, the participants suggest special insurance for long-term care, which should be a special type of insurance, following the example of health insurance, which they believe has practically preserved the health care system to a certain degree, because it has its own fund;
- an exceptional increase in the need for services, which is not accompanied by a bid from the provider, and the problem of the manner of providing services, especially the problem of choosing providers at the local level and the interruption of three months due to budget and public procurement regulations;
- a big problem of the 'gray market', which, as they say, works perfectly in practice because various services are provided this way, and the state does not generate income on that basis, while licensed service providers are significantly hindered in doing business legally and forced into 'gray zone' - a proposal for a possible solution are tax reliefs or subsidies to these legal entities;

- the lack of a system of integrated social and health services, which has failed to be implemented in practice at all, although provided for by the Law on Social Protection;
- insufficient involvement of older persons in policy making and decision-making related to aging and older persons; the proposed solution is to find the best way for their participation at the local level, while promoting examples of good practice;
- inadequate health care, especially its insufficient accessibility, and the lack of geriatrics physicians in the health care system - increasing their number could be a solution to a number of problems in the provision of health care;
- inadequate and insufficient information of older persons on all issues important for their lives, especially as the result of frequent ‘digital exclusion’ must be tackled by increasing digital literacy and the use of new technologies among the older people, which represents both a challenge and a chance for a better quality of life for older persons;
- untapped potential of older population, especially for volunteer activism. Despite the fact that older persons very often express that they lack work and a sense of usefulness, in the organization of volunteer work insurance is stated as a big problem/imposition;
- insufficient survey on the way lifelong learning works in practice;
- the need for more dedicated work on active and healthy aging, with a special focus on personal responsibility in the aging process (older persons are not mere observers of this process);
- to a large extent, the protection of older persons in emergency situations stood out as a huge problem - as one of the solutions, the mandatory participation of experts dealing with older persons in crisis headquarters for emergency situations at all levels was proposed;
- problems of stigmatization, inadequate culture of aging and, in particular, self-stigmatization and a generalized perception, based on prejudices about older persons.

The participants singled out the following key topics/issues that the new strategic document should contain:

- financing the service system for older persons;
- plan for further development of support services for older persons, with special emphasis on participation and simplification of the organization;
- a plan for adapting the health care system to older persons;
- development - change of aging culture, with special emphasis on the attitude of the media towards aging and older age;
- promoting active and healthy aging and personal responsibility in this process;

- increasing possibilities for lifelong learning;
- greater involvement of older persons in decision-making and policy-making, taking into account the great diversity of this age group.

Examples of good practice are:

- *'New York bench movement'* - several benches for rest on the road, in order to provide an opportunity for rest on the way from home to markets, supermarkets, health centers, local governments and other institutions; a similar example exists in the town of Vrbas, Serbia, created as a result of the advocacy process;
- creating a service that furnishes an older person's living space for their longer independent functioning in a close and familiar environment;
- all services 'on wheels' - food, medicine, hygiene, etc., which are not present enough ;
- support in self-organization, socializing of older persons and promoting their contribution and role in changing and nurturing the culture of aging, and numerous cultural activities – the example of the Festival of Creativity of Older Persons organized by the Gerontology Center Belgrade, and the Older Persons' Crafts Market;
- the example of the Volunteer Center in Zvezdara and examples of volunteering of older persons in general, as a very important social resource;
- the example of the Belgrade Institute for Gerontology and Palliative Care, the way it functions today, and how its recent work as the Institute for Gerontology and Home Treatment was highlighted as an example of good practice - this manner of organizing work in the health care system proved to be very effective in practice;
- an example of good and efficient information is distributing leaflets in apartment buildings, houses, streets, cultural centers, local communities....
- more recently, city building managers have been noted as examples of possible good practice in mapping the needs of older people, and indicating those who could be institutionalized by being linked to the social and health care system.

Focus group – older persons from a typical rural area

The questions in this focus group were tailored to the participants' abilities, as they are citizens who live in rural areas and do not follow the implementation of strategic documents in the way professionals in this field do, especially compared to the way members of academia and/or civil society organizations do. The questions were less formally structured, so that participants had the freedom to talk about the problems that bother them and the ways to solve them, and about their outlook on life. Most of the quotes in the subtitle 'The beauty

of survey work' are from this particular focus group, as they are authentic and reflect a vivid picture of life in rural areas.

All participants unequivocally stated that life in rural areas is much harder than in the city, because jobs in rural areas are very demanding, especially if a person grows older, and the structure of the population in rural areas has changed, so there is no one to help. There are not enough young people and they do not have a job, or their income is insufficient, so the older ones help them financially. However, the most difficult thing is that there is no one left to work in the villages, and that, unlike until only 20-30 years ago, 'you can no longer gather a few people to help you lift a load in the yard, when once you would call 30 people in a moment to dig a hectare of corn'.

The problem is that everything is far away - shop, doctor, pharmacy and everything else, and there is no more transportation, and there aren't enough passengers to make organizing transportation profitable, so whoever does not have a car, has to use a local private taxi if he/she can afford it, and if he/she doesn't, then they have to rely on the support of children, neighbors, distant relatives. However, their neighbors come first here, because people still help each other as much as they can in rural areas in Serbia. However, people sometimes get seriously ill, and even die, due to a benign problem, because no one was there to help them at the start of the disease, and they develop complications over time, just because they could not go to the doctor on time.

Lack of information on rights and how to exercise them is also something that creates great difficulties for older people, and the fact that they do not have enough, or have no knowledge on to use new information technologies, especially Internet services, smartphones, e-banking and the like. They are ready to learn, if there is anyone to show them, especially those younger than 75. They would like to know and use technology more, but only if someone explained it to them nicely, without humiliation, because they cannot master it as fast as children. They need someone who has more patience. As a way to solve the problem, they call or see an official in their municipality who deals with them and tells them how things are being done because it is very difficult for them to find their way in the sea of information.

They see the general poverty and economic underdevelopment, and also the unresolved problem of wastewater and sewage, as their biggest problems and believe that solving them would solve many other things, and move rural areas in the right direction, so that the young people would stay in rural areas more. They think that it would be good to determine the direction of development in terms of aging with a plan/document.

Their opinion is that not much can be done in a partial way, taking the example of wastewater, and that only general improvement leads to a better life for them all. They say that the state has done a lot lately and that they have

slowly started to feel the benefits of a better economy, and then COVID-19 arrived and took us back many years.

When it comes to the mentioned shift in the position of people in the countryside, they say that health care has improved, with less waiting and a better attitude towards older persons, but again the COVID-19 changed all that, almost overnight. They especially praise the attitude of the doctors from the neighboring village, who, as they say, call them to ask how they are doing and remind them of their therapy or a vaccine against the seasonal flu.

They see the speed of life with which everyone lives today as a big obstacle in preserving health, especially mental health, because they think that an unhealthy environment and the speed of life are the main cause of illness. The worsening of the position of workers has also affected health, so people lose their ability to work earlier in life.

They do not miss cultural contents and media contents about older persons because people in the village organize themselves and have great freedom in how to spend their day - in their garden, field, yard, neighborhood, going to a shopping center in the town of Čačak or somewhere else in town, to a tavern, etc. They say that if a person wants to watch something, he/she can find it, except maybe the theater, but they feel one can do without it. They would like the signal for TVs to be stronger because it is often lost and disappears.

They generally see the attitude towards older persons as good, although worse than before, because today, they say, for the sake of illustration, it is, ironically, mostly the older people those who get up and offer their seat on the bus to a sick man or a pregnant woman. However, in most institutions, they are respected due to their age. Otherwise, they think that a person must take responsibility for his/hers own life because the state cannot take care of everything. One should slowly prepare oneself for the older age. They do not see violence against older persons as a big problem, they say that these cases are few and far between, which people will not report, but everyone in the village discards such violent children. They do not know how the state could solve this problem, because it is not the state's fault when someone has psychologically unstable children. They think the police just have to be there on time when someone reports.

As the main recommendations/advice for decision makers, the participants in this focus group state:

- solving the problem of waste, wastewater and sewage, so as to stop the problem from getting bigger;
- mobile doctors, e.g. in the local community, especially for important specialist examinations so that people do not waste time and the state resources;
- better information on their rights and on the duties of the competent services;

- further investments in infrastructure and in opening new factories, jobs, general further development of the economy so that young people would stay and children would be born in villages again;
- work on raising digital literacy, creating courses especially adapted to older persons.

The conducted interviews

Due to the situation caused by the COVID-19 epidemic and especially the high risk for persons in older age homes, one focus group could not be held, i.e. the group with older users of services from the social protection system, who were supposed to talk about their experiences, services they use and how they should be improved. Therefore, four interviews were held with experts and decision makers who directly deal with the position of older persons in their work.

During the interview, the same questions were asked that were also raised in focus groups, referring to: the possibilities of policy makers for improving the position of older persons; how they see trends and financial sustainability of individual solutions; examples of good practice to support older people and their needs; key issues that should be part of the new strategic document with reference to the previous strategic document and its evaluation.

The interviewees saw the adoption of a new strategic document as a policy priority towards older persons, primarily due to the demographic structure of the population, but also the broad number of areas that should be covered by such a document.

The possibilities of policy makers for improving the position of older persons are observed through strengths and weaknesses, that is, through opportunities and obstacles. Appropriate material opportunities and financial stability, especially the system of social and health care, and the system of retirement and disability insurance, can be seen as a pre-condition for the creation and implementation of programs for the improvement of the position of older persons.

They highlighted the necessity of inter-sectoral cooperation in the creation and coordination of programs and activities to support older persons and also underlined the need to harmonize the relationship between the national and local level, i.e. create a standardization of duties (the right of older persons to certain types of services) and financial and organizational capacities for the provision of services in the community (availability of services). Inequality in the number and type of services provided in certain local self-government units is still recognized as an on-going issue.

One of the great challenges, and thus a priority, was the creation of the most adequate measures for preserving the complete potentials of older persons, so as to have a positive impact on the family and on Serbian society as a whole. Improving health in general is seen as a great opportunity that requires work

on improving the health literacy of the entire population. A great challenge is the need to provide support to the family, in terms of the different types and scope of support services that should be provided in providing a dignified and quality life for vulnerable groups.

It is important for the new strategic document not to be a manifesto of all possible goals and tasks, and a wish list, but a good choice of priorities, tasks and activities according to financial and all other, primarily human capacities, where all stakeholders accept their part of the responsibility for its full implementation.

The issues that the future strategy should include are the financial-material provision and availability of services for poor households with older persons, especially in rural areas, an inclusive environment for social participation of older persons, and the removal of various obstacles (physical, mental and social) that practically constitute discrimination.

Promoting voluntary contributions (of both young and older persons) was also discussed, an insufficiently used field of social involvement. Successful organization of volunteer work can significantly contribute to the financial sustainability of the service network and improve the quality of life for older persons, for which there are numerous examples.

3.2.5.4. Conclusions and recommendations

This survey provides us with an insight into the position of older persons in Serbia from the perspective of older persons, but also experts, civil society representatives and decision makers, pointing to the “measure” of success of existing policies related to aging, and possible future directions in responding to the growing needs of older people, their social inclusion and the achievement of equality in society, with the aim of improving the quality of their lives. At the same time, the survey examines the social context in which older persons in Serbia find themselves, through a brief overview of data on the demographic situation and the legal framework related to aging policies, both in Serbia and internationally. In this way, you can get a more complete picture of how demographic characteristics affect the need to respond to the current situation, but also to the situation that awaits us in the future, given the decline in birth rates, high mortality, negative natural growth, negative migration balance, low fertility, de-population and intensive population aging. Therefore, this survey can provide assistance to decision makers and interested social actors in policy-making and potential adoption of a new strategic document related to the improvement of the position of the older in the Republic of Serbia.

Participants in both parts of the survey (especially participants in the qualitative part) expressed an almost identical position on current trends in policies for older people, reflecting *concerns about the ambiguity of policy*

trends and goals, without consistency and a systematic approach to solving current problems. The problem of non-participation of all interested actors, especially the older citizens but also members of their families, persons before exercising the right to a pension, civil society organizations, volunteer organizations, etc. in creating individual solutions and concrete measures was especially expressed.

Also, the participants in the survey expressed *a very positive attitude about the previous National Strategy on Aging*, emphasizing that it followed the Madrid International Plan of Action on Aging and other important international documents, as well as covered the most important areas of social life within aging policies, which a new strategic document should include with a certain addition in relation to the current situation. As the biggest shortcoming of the expired Strategy, the participants pointed out that the action plan for its implementation was not adopted, nor were special financial resources allocated for the implementation of the planned activities, and that the monitoring of the achieved results and the evaluation thereof was insufficient.

The new strategic document should be realistic, with previously well-considered possibilities and capacities, above all the financial sustainability of the given solutions in order for the envisaged goals to be achievable and sustainable, concluded the survey participants, pointing out that it is necessary to consider what the real obligation and responsibility of the state is, and what measures and activities can be implemented by other social entities. Allocations from the state budget are relatively high in the area of social and health care for older persons, including the provision of services, but the question of their adequate spending and best utilization arises.

Focus group participants singled out the following as the basic responsibilities of the state: *minimum social security in older age, which includes poverty reduction and the efficiency of the financial assistance system; functioning and control of social and health care services (with the emphasis on a special problem – the ‘gray zone’ of work in providing services).*

As the main challenges in terms of solving problems in the implementation of public policies dealing with the consequences of aging, more precisely the implementation of the law, survey participants saw *the inadequately resolved issue of financing services from the system and proposed the existence of a single system of long-term care, as a solution to the problem, that could be financed from a special type of insurance for long-term care.*

The challenge is also the issue of justice and fairness in terms of setting the border between the lowest pension incomes and financial social assistance,

and *the possibility of introducing social pensions* is mentioned as a proposed solution.

The need to adapt the health care system to the growing needs of the older, with special insistence on prevention, more regular screening of conditions posing the most common health risks, the concept of active and healthy aging, and taking into account the heterogeneity of this age group, especially 'older' older persons, all represent great challenges in terms of the organization of health care for older persons in rural areas and the organization of health care in general at all levels. The Institute of Gerontology and Palliative Care in Belgrade stood out as an example of good practice. The concept of active and healthy aging is also part of the Decade of Healthy Aging program, proclaimed by the World Health Organization.

All survey participants, but also all relevant indicators, point to *the need for a comprehensive plan to address accessibility*, and its consistent and continuous implementation, in order to remove all obstacles to the smooth performance of daily life activities, not only for older persons but also for other categories of the population. A major problem is *the lack of infrastructure and transportation* for older persons, especially from remote areas, in order to exercise all the rights guaranteed by the constitution and the laws.

In addition to the above, an important element to recognize is the need for *joint action of all actors (at the national and local level, civil society organizations, older persons themselves ...), and when it comes to system institutions – insisting on cross-sectoral and inter-ministerial cooperation*. Such attitudes of survey participants indicate the need to achieve a comprehensive approach to aging through the coordinated functioning of all competent authorities and a consistent approach of all participants.

Bearing in mind that the functionality and autonomy of older persons also depends on the environment in which they live, it is necessary to take into account *a healthy environment, an adapted, safe and integrated housing where older persons can be active and autonomous, where they can participate in social and cultural life. In addition, volunteerism, informal care and understanding of the needs and specifics of older persons, intergenerational respect and solidarity*, are some of the characteristics of inclusive communities adapted to older persons. *Respect for the human rights of older persons means their true inclusion in the community at all levels and in all areas, while respecting the principles of non-discrimination and respect for the heterogeneity of this social group*, are the basic principles of access for older persons.

Encouraging intergenerational understanding, dialogue and solidarity, while enabling the transfer of knowledge between generations, has been identi-

fied as one of the invaluable and effective social resources. The need for work, expressed by older persons, and the possibility of organizing efficient volunteer services among members of all age groups, is also a significant resource (as an example of a good practice, the Red Cross volunteer network with many years of successful practice, Zvezdara Volunteer Center, Friendship Power Association – Amity and others organizations, members of the Humanas network).

Special attention within the qualitative part of the survey is paid to the need for ***special protection and support for older persons in emergencies*** caused by various types of security risks, precisely because the current situation, caused by the COVID19 virus, has showed that older persons are disproportionately more affected in such situations. The need for the participation of older persons and civil society organizations dealing with these issues, and other specialized bodies with specific knowledge and capacities, in the work of the crisis staff formed on the occasion of the emergency situation was emphasized.

These conclusions, together with the general and specific recommendations that follow from them, are based on the analysis of answers to questions from the questionnaire, analysis of focus group discussions and interviews, with simultaneous and continuous review and partial secondary analysis of previously conducted survey projects and studies and reports.

GENERAL RECOMMENDATIONS:

The following would be the most important general recommendations, concerning all segments of social life:

- The need to adopt a comprehensive and integrative strategic document on the issues of aging which would improve the quality of life of older persons and cover areas of several sectoral policies. The strategic document should be the result of reviewing the existing relevant data on the structure and position of older persons, projections for the future of aging, and analysis of the effects of the measures taken so far. The new strategic document must be accompanied by an action plan with a precise time frame for the implementation of specific activities and precisely allocated financial resources and sources of funding for all measures and activities;
- When creating and implementing an aging policy, as a candidate country for membership in the European Union, the Republic of Serbia should follow European aging policies with implicit monitoring and implementation of all international standards at the United Nations level. It is necessary to follow the consultative process in drafting the ‘Green Paper’ within the European Union’s policies regarding the implementation of an inclusive approach to groups having more difficulty accessing the labor market, especially in relation to women, older persons and people with disabilities, fighting

- against all forms of discrimination and improving the work-life balance, gender perspective and investing in the improvement and recognition of new skills and qualifications;
- Support for financial security in older age considering opportunities to reform the retirement pension system and cash social assistance system (e.g. introduction of social pensions for those who have not exercised the right to older-age or other type of pension), but also the labor market system by stimulating flexible forms of work and longer employment, with support for lifelong learning. Further development and adjustment, primarily of the social and health care system, by improving the existing but also by creating innovative services, and building institutional capacities, in accordance with the needs of older persons;
 - Improving the living conditions of older persons and enabling their participation in various segments of social life, removing physical barriers, introducing appropriate public transport, infrastructure without barriers, etc. both in urban and especially in rural areas;
 - Improving the coordination of all actors, at all levels and in all sectors (social and health services, education and culture, security, retirement and disability insurance, labor market, etc.) and cooperation with actors dealing with aging issues, including civil society organizations and volunteers organizations, on all issues concerning older persons in order to enable social inclusion as much as possible, with regular assessment of the situation and the need to adapt certain measures and activities, encouraging regional approach and connecting with other countries in the region;
 - Encouraging intergenerational cooperation, understanding, dialogue and solidarity, with the transfer of intergenerational knowledge and exchange of experiences, as well as raising awareness of the importance of personal development and responsibility in relation to age issues in the entire population;
 - Reducing discrimination against older persons and providing effective protection against discrimination and violence, abuse and neglect of older persons, while respecting all the specifics and heterogeneity of this age group (women, older persons in rural areas, older older persons, in residential institutions, with disabilities, etc.);
 - Mitigating the impact of crisis situations on older persons, such as those caused by the COVID-19 virus, by improving access to adequate information related to the crisis and establishing procedures for dealing with all phases of the crisis, involving older persons and representatives of their organizations in relevant activities in response to a specific crisis event, and including older people in the process of planning and preparation for future similar situations that require previously gathered quality and age-disaggregated data.

RECOMMENDATIONS PER SPECIFIC AREA OF PUBLIC OPINION RESEARCH:

Services for older persons

- Equal greater coverage for older persons that includes necessary and adequate support services, with special emphasis on rural and remote areas and groups at risk (e.g.: persons with dementia, people living in poverty, or at risk of violence, etc.), with prior mapping of missing services, analysis, and facilitation of conditions for licensing of services in the area of social protection, and creating conditions for establishing continuity in the provision of services, while providing sustainable financing long-term care services;
- Expansion of existing programs of financial social assistance for the most vulnerable older persons, easing of limits on property ownership as the condition for receiving financial social assistance;
- Encouraging further development and creation of innovative services, especially concerning the use of innovative technologies in the process of improving the quality of life of older persons and reducing their social exclusion;
- Further increase the capacity and quality of institutional older age home facilities while applying a human rights-based approach to the provision of services, and encourage the development of alternative forms of housing for older people, such as a economically viable housing community for the older persons, that are in line with the normative regulation;
- Promoting social inclusion, especially at the local level, removing barriers and risks of social exclusion. Active cooperation with civil society organizations and active participation of older persons in designing the process of social inclusion;
- creating opportunities for appropriate benefits and incentives for service providers in order to stimulate the development of service provision capacity;
- Ereating activities and measures to provide support to informal caretakers and strengthen their capacities, while providing special support to families caring for older persons and dependent members;
- Encouraging different forms of self-organization of older persons, different types of self-support, self-protection, and self-affirmation in older age, with the affirmation and promotion of active aging and the possibilities of each individual.

The position of older persons in extremely underdeveloped areas

- Further work on promoting fair and sustainable growth - increasing the level of investments and subsidies with special emphasis on young people

and women in rural areas aiming at sustainable growth in these areas, with active cooperation and connection with investment partners and international financial organizations in organizing strategic investments in the social and health care system, from which older persons would also benefit;

- Regional cooperation and regional approach in resolving the issue of demographic aging, regular analysis of the effects of population policy and better targeting of the envisaged measures;
- Further investment in better infrastructure that will provide accessibility, such as public transport, both in urban and rural areas, especially in less developed areas, so that as many older persons as possible have satisfactory conditions for a dignified life in older age and better access to all necessary goods and services, especially institutions of health, social protection, culture, recreation, etc.

Access to justice

- Providing better and more efficient access to justice and organizations that provide legal protection, especially for older persons living in rural areas;
- Improving access to information concerning their right to free legal aid;
- Strengthening and providing support in resolving issues related to financial security and quality of life in older age (timely resolution of legal matters such as distribution of property, especially in cases of persons who suffer from dementia, etc.).

Availability of health care

- Promoting active and healthy aging by undertaking activities for disease prevention, conducting screening examinations at the primary level of health care, and providing support to older persons in their homes, while increasing the number and scope of services that include maintaining mental health and psychological support;
- Ensuring equal access to health services throughout the country, especially in rural areas, in terms of appropriate scope, content, and quality (mobile teams, organized transport, home nurse service, specialist examinations, etc.). Encouraging the development of new health care units for the protection and care of older persons or departments in existing health centers, where measures are implemented to preserve and improve their health, organize home treatment, health care, and rehabilitation, as well as palliative care;
- Development of social and health care services as integrated and coordinated services pertaining to the two systems.

Access to cultural content

- Improving the existing offer of cultural and other content while enabling equal access to cultural content, especially for older persons living in villages. Involvement of the older persons in the creation of cultural, entertainment, and recreational content;
- creating innovative services in the field of culture, such as mobile libraries for rural areas, various performances, and other cultural content.

Discrimination

- Continuous elimination of prejudice and stereotypes about the role and contribution of older persons to the community; equal and planned inclusion of older persons in all areas of social life, while taking into account the gender perspective;
- Improving the content of school programs so as to develop an understanding of the individual aging process, the needs of personal development and responsibilities in this process, the importance of intergenerational transfer of knowledge, understanding, solidarity, and tolerance in all generations;
- Conducting information and promotional campaigns on achieving equality and the existence of mechanisms for protection against discrimination. Active action on changing narratives and perceptions of older persons, promoting non-discriminatory language in public space, with the continuous professional engagement of older persons.

Social participation – digital literacy

- Encouraging the participation of older persons by enhancing their active involvement in the community, and encouraging the development of intergenerational relations, cooperation and dialogue. Raising awareness among older persons about the responsibility for their own life in older age;
- Encouraging volunteerism among all generations and facilitating the procedures for organizing volunteer services, with the involvement of older persons in these activities;
- Further development of lifelong learning for older persons, with special programs of additional education harmonized with their needs and possibilities, especially programs of mastering digital skills, and educational contents intended for the protection of older persons as consumers and users of services.

The attitude of the media towards older persons

- Creation of media content that contributes to the understanding of the aging process, characteristics of older persons and their problems, with special focus on their diversity, with more content that encourages intergenerational solidarity and understanding and emphasizes the potential of older persons. Broadcasting a program that informs older persons about their rights and the manner of their exercise, and other relevant information;
- Media monitoring and promoting achievements of older persons, while highlighting examples of good practice aiming at improving the position of older persons and strengthening intergenerational solidarity and volunteerism.

Prevention and protection from violence

- Creation of measures and activities for protection against violence with the perceived diversity of this age group and specific risk factors for violence against older persons, such as older women and 'older' older people (over 80 years old). Effective functioning of the network of psychological and other necessary support to victims and potential victims, implementation of programs for the prevention of violence, neglect, and abuse of older persons;
- Better coordination of all services and organizations in the protection system and efficient handling of reported cases. Continuous conducting of training programs intended for professionals on the specifics and severity of recognizing violence against older persons, effective functioning of the network of psychological and other support necessary to victims and potential victims, implementation of violence prevention, neglect, and abuse against older persons.

QUESTIONNAIRE FOR THE SCREENING OF THE POSITION OF OLDER PERSONS IN SERBIA

All terms used in the masculine grammatical gender in Serbian language refer both to the masculine and the feminine gender of the person in question.

DEMOGRAPHIC CHARACTERISTICS

1. **Gender: (Note: It is not necessary to ask about the respondent's gender. The interviewers fill it in themselves)**
 - 1) female
 - 2) male
2. **Years of age**
 - 1) 65-70 years
 - 2) 70-80 years
 - 3) Over 80 years old
3. **Level of formal education completed**
 - 1) primary school or less
 - 2) high school
 - 3) college/university
4. **Where do you live?**
 - 1) city/town
 - 2) village
5. **Do you live alone or in a community?**
 - 1) I live alone.
 - 2) I live with a partner.
 - 3) I live in a family community (partner, children, grandchildren...).
6. **Do you have children?**
 - 1) Yes
 - 2) No
7. **What is the monthly amount of your total personal income?**
 - 1) No personal income.
 - 2) I do not know.
 - 3) My income is around _____ RSD per month. (100 USD = 10000 RSD)

SERVICES FOR OLDER PERSONS

1. **Do you use a support service?**
 - a) YES
 - b) NO
2. **If the answer is YES – which service do you use**
 - a) home help (home care assistance)
 - b) day care for older persons
 - c) club for older persons or retired persons
 - d) field service and / or home medical care
 - e) food delivery (food on wheels)
3. **If the answer is NO, do you need any of the existing community services right now**
 - a) YES
 - b) NO

Which ones? _____
4. **Do you think that it is necessary to introduce a new special service for older persons in order to make your life better and simpler?**
 - a) YES
 - b) NO
5. **If the answer is YES, what type of service/assistance for older persons is it necessary to create in order to make your life better and simpler?**

6. **If you need support, who do you rely on:**
 - a) Family
 - b) Relatives
 - c) Neighbors/friends
 - d) Paid care assistance
 - e) Volunteers
7. **If necessary, would you accept the service of a home for older persons (an institutional form of protection)?**
 - a) Yes, I would be glad to.
 - b) Undecided
 - c) Only in case of an extreme emergency
 - d) Never

POSITION OF OLDER PEOPLE LIVING IN EXTREMELY REMOTE AREAS

8. **In your opinion, is it possible to improve the demographic situation in Serbia, especially in remote areas, so as to stop the growing number of places where predominantly older persons live would ?**
 - a) Yes, it certainly can
 - b) Very difficult and with large investments
 - c) No, it is absolutely impossible to fix the situation
 - e) No, unless some major change occurs
 9. **In your opinion, what could the state do to improve the position of older persons, and thus all Serbian citizens, in such remote areas?**
-

ACCESS TO JUSTICE

10. **If you need any legal assistance or protection before the court, do you have anyone to turn to:**
 - a) Yes, I always have help
 - b) Occasionally someone helps me
 - c) No, I have no one to help me
 - d) I do not need any legal assistance
11. **Have you used any kind of legal aid in the last 3 years?**
 - a) YES
 - b) NO
12. **If the answer is YES – who helped you (you can circle more than one answer):**
 - a) children, grandchildren, relatives
 - b) neighbors, friends
 - c) an expert, a lawyer, an attorney
 - d) local community
 - e) civil society organization
 - f) trade union

AVAILABILITY OF HEALTH CARE

13. **Is the health care you need fully available to you?**
 - a) Yes, it is fully available to me
 - b) It is partially available
 - c) No, it is completely inaccessible to me

- d) It is available to me with great difficulty
- 14. Are you satisfied with the quality of health services?**
- a) Yes, I am completely satisfied
 - b) I am mostly satisfied
 - c) No, I am absolutely dissatisfied
 - d) It could be significantly better
- 15. In your opinion, what are the biggest problems for older persons in terms of health care (you can circle more than one answer)?**
- a) Distance to health facilities (lack of transportation)
 - b) Lack of health professionals, especially specialist doctors
 - c) Inadequate treatment of older persons in health care institutions
 - d) Long wait for specialist service
 - e) Insufficiently good organization of the system
 - f) Something else _____
- 16. Have you needed a doctor in the past year and you could not get to them for any reason?**
- a) Yes, I failed to get to the doctor several times
 - b) It only happened to me once
 - c) I have never had such a problem
- 17. What can the state do to improve the health care of older persons (you can circle several answers):**
- a) to have more health institutions (local health stations, health centers, hospitals)
 - b) organize mobile team visits and mobile specialist examinations in accordance with the needs
 - c) better organization of how health care services are delivered
 - e) something else _____

ACCESS TO CULTURAL FACILITIES

- 18. Are the cultural contents you would like to see available to you sufficiently?**
- a) Yes, I have access to all the content that interests me
 - b) I have limited access to cultural content
 - c) I very rarely have access to cultural content
 - d) I have no access to cultural content at all

19. Do you go (before the COVID-19 pandemic):

a) to theater	Yes, I go often.	Rarely.	Never.	I do not want to.
b) to cinema	Yes, I go often.	Rarely.	Never.	I do not want to.
c) to concerts	Yes, I go often.	Rarely.	Never.	I do not want to.
d) to some other events ²⁷⁵	Yes, I go often.	Rarely.	Never.	I do not want to.

20. Would you like to attend more cultural events:

- a) Yes, it would mean a lot to me
- b) I'm not sure if that would mean anything to me
- c) No, I don't need it.

21. Are there books available for you to read:

- a) Yes, completely.
- b) I wish I had more books to read.
- c) They are available to me, but I do not read books.
- e) They are not available to me, but I would like to have the opportunity to read books.

REDUCING DISCRIMINATION AGAINST OLDER PERSONS

22. There is an opinion that discrimination against older persons is present in our society, meaning that older persons are treated worse because of their age.

- a) I totally agree
- b) I agree
- c) I do not agree
- d) I do not agree at all
- e) I am undecided

23. In your opinion, how is it possible to reduce the unequal treatment of older persons, i.e. discrimination (it is possible to circle more than one answers)?

- a) through the education system
- b) various promotional campaigns and examples of good practice
- c) special content in schools
- d) through special programs of intergenerational solidarity
- e) something else _____

²⁷⁵ Cultural and artistic programs

24. Do you see anyone advocating for and protecting the rights and position of older persons?

- a) Yes
- b) No
- c) Undecided

25. Which organization/institution/individual, in your opinion, represents the rights and position of older persons the most?

SOCIAL PARTICIPATION - DIGITAL LITERACY AND INCLUSION

26. Are you involved in the work of some organizations (a club, an association, local community, local self-government, self-organized informal groups)?

- a) Yes
- b) No

27. Would you like to be more involved in the social life of the community?

- a) Yes, it would mean a lot to me
- b) I'm not sure
- c) No, I am involved enough
- d) No, I don't want to be involved more

28. Do you use a computer, Internet, smartphone?²⁷⁶

Computer	YES	NO
Internet	YES	NO
Smartphone	YES	NO

29. If the answer is NO, what is the reason why you do not use a computer, Internet, smartphone (it is possible to circle more than one answer)?

- a) I cannot afford it.
- b) In my area, there are no technical possibilities (no network, signal, electricity, etc.)
- c) I do not have the necessary knowledge
- e) I'm afraid that I'm going to break something
- e) I do not want to use the mentioned devices.

PORTRAYAL OF OLDER PERSONS IN THE MEDIA

- 35. In your opinion, are the position and problems of older persons sufficiently represented in the media?**
- a) Yes
 - b) No
 - c) Undecided
- 36. If the answer to the previous question is NO, what content, in your opinion, should the media provide on a larger scale (it is possible to give more answers)?**
- a) more content that contributes to the understanding of the aging process and the position of older persons, and their problems
 - b) more content that encourages intergenerational solidarity and understanding
 - c) more content that promotes the values and achievements of older persons
 - e) something else (specify what) _____
- 37. In your opinion, would it be useful for public media services to broadcast specialized content intended for older persons?**
- a) Yes, it would mean to me.
 - b) No, there is no need.
 - c) I am undecided.

VIOLENCE

- 38. In your opinion, are older people more exposed to various forms of violence, abuse and neglect?**
- a) I agree
 - b) I do not agree
 - c) I am undecided
- 39. Is the response of the competent authorities regarding protection against violence, abuse and neglect of older persons adequate?**
- a) Yes, the authorities are doing their job
 - b) They generally work well
 - c) No, the authorities are not doing their job
 - d) They are partially doing their job
- 40. What do you think could make older persons better protected from violence, abuse and neglect?**
- _____

There has always been a difference between the older and the younger generations. Children have thoughts, ideas, and dreams of their own, while older people think differently, more maturely, taught by life experience. They have already gone through a lot in life, what we children have yet to experience. So, often there are disagreements, arguments, and heated quarrels. People these days are more nervous, impatient.. Especially because of the workload, lack of free time, and financial situation. Younger ones are often tense and do not have much compassion, but they have their desires and wishes. This is when misunderstandings and conflicts arise. There should be much more compassion, patience, respect, and much, much more love. Because when there is a lot of love between people, all problems are easier to solve. Love is a bridge of understanding that connects the incompatible, which awakens the need to understand and respect each other regardless of the age limit. This is the way to achieve intergenerational solidarity. Older persons should support the younger ones, taught by experience, they should draw the attention of younger ones to what they have to go through in reaching their goals. The young will understand that their advice is well-intentioned and adopt it. They should learn from older people's mistakes and be grateful to them for that. Love, respect, and tolerance are a bridge of understanding between generations from seven to one hundred and seven years old. Older people, please understand us, young people, because we still don't know what awaits us in life! Then we, the younger ones, will give you compassion and respect, in return, and above all, our love to you and to the new generations.

Third prize 2017: Marijana Drajić, 7th grade,
'Milovan Glišić' elementary school, Valjevska
Kamenica, Serbia, BRIDGE OF UNDERSTANDING
– INTERGENERATIONAL SOLIDARITY

4. KEY CHALLENGES IN PROTECTING EQUALITY OF OLDER PERSONS AND RECOMMENDATIONS FOR IMPROVEMENT

Analyzing the situation regarding the realization of equality of older persons in Serbia from a large number of available sources, taking into consideration both the practice of the Commissioner in handling complaints and other appeals, and the quantitative and qualitative indicators of the position of older persons, it is clear that society needs to adapt to aging trends, longer life expectancy and a declining trend in total population. These circumstances represent challenges primarily for the retirement and disability insurance systems, and social and health care, which need to adapt to the new conditions and adequately respond to the growing needs of older persons. In order to find the best ways to solve these challenges, it is necessary to ensure greater social participation of older persons and their involvement in decision-making processes, but also of all members of society, and also to implement adequate activities. Special attention should be paid to the growing number of single households with older persons, longer life expectancy and worse economic situation of older women and men in rural areas, to 'older' older persons i.e. those over 80 years old, persons with disabilities, and others who need more support, bearing in mind that they face a whole series of obstacles in their everyday life. Challenges appear in other areas as well and require effective action in terms of greater involvement in various activities, especially at the local community level, to prevent loneliness and isolation of older persons, but also to use the capacity they have, especially in terms of knowledge and experience. Among the key challenges the older persons face are discrimination, stereotypes and prejudice about inferiority in older age, but also violence, abuse and neglect, to which they are often exposed to. There is a present need to conduct a range of comprehensive activities to prevent such phenomena and develop intergenerational dialogue, understanding and tolerance.

The most common narrative in the public mind regarding aging is related to statistical data and the sustainability of the retirement and disability insurance system, with individual issues the older persons face such as poverty, loneliness, violence, etc. In short, there is a discourse in the society that there are more older people compared to others (the young, or of working age) and that they are 'expensive'. Our priority is to deconstruct this narrative. This Report of the Commissioner is a contribution to that broader social endeavor.

Among the key challenges in terms of achieving equality of older persons in society, certain issues stand out that relate to more vulnerable social groups in general, but affect older persons especially. Some of these issues are, for example, poverty, which affects all social groups, but is a special problem

when it comes to older people, who are often unable to get out of it without the help of the wider community. This example shows the necessity of ensuring accessibility, primarily architectural, to public facilities, but also to facilities where older persons live, accessible transportation, public areas, information, and communication.

The Republic of Serbia belongs to the group of countries experiencing a trend of demographic aging and a high average age of the population. Some of the most important demographic characteristics in the period from 2001 to 2011 (between the last two censuses of population, concerning households and dwellings) are lower birth rates, high mortality, negative natural increase, negative migration balance, low fertility, depopulation, and intensive population aging.

The average age of the population is going up – in 2019 it is 43.3 years, with life expectancy for men 73.1 and 78.3 years old for women. The share of young people is low and with a tendency to further decline, while the share of people aged 65 and over in 2018 was 20.2% of the total population. A special challenge lies in the depopulation of villages, which now exceeds the rate of reduction of the agricultural population (depolarization) and the total population as a whole. All variants of projections of population changes for the next period indicate a decrease in the participation of the working-age population (15-64) in the total population and an increase in the participation of older persons, with an increase in the population older than 80 years, especially women. It certainly poses a serious challenge to the economy and the advancement of society. These data should be taken into account when creating all policies, especially those related to older persons, primarily to provide an adequate response of all systems to the needs that change with the aging population.

According to the data from the Survey on Income and Living Conditions (SILK), 31.7% of the population of the Republic of Serbia (2.18 million) are at risk of poverty or social exclusion, which is significantly above the average in 28 EU countries (21.7%). According to the indicators of subjective poverty, 46.7% of citizens state that it is difficult, or very difficult, for them to 'make ends meet', and about 486,166 inhabitants of the Republic of Serbia live below the line of absolute poverty.²⁷⁷ In numerous surveys and publications, both at the national and international level, persons who face poverty are perceived as one of the most discriminated social groups, but also the group that is at the highest risk. The fight against poverty is the first of the Sustainable Development Goals of the UN Agenda for Sustainable Development 2030, which refers to future social and economic development under the principles of sustainability. In this regard,

277 *Consequences of Covid-19 on the position of vulnerable and at-risk groups – causes, outcomes and recommendations*, United Nations Human Rights Team and Social Inclusion and Poverty Reduction Team of the Government of the Republic of Serbia, Belgrade, 2020, available at <https://serbia.un.org/en/resources/publications>

all relevant international documents indicate that work on social inclusion of persons who face poverty require good cooperation of all protection systems, at all levels and all sectors (social and health services, education and culture, security, retirement and disability insurance, labor market, etc.), as well as cooperation with other actors dealing with poverty issues, including civil society organizations and voluntary organizations. This cooperation should include all issues related to poverty in order to enable greater social inclusion, reduce discrimination, and achieve equality to the greatest extent possible. According to relevant data, over half of the beneficiaries of social welfare centers belong to the group of financially vulnerable users (the percentage of this user group has increased in 2019 by 33.5% compared to 2011), while those over 65 make up a share of 10.9% of the total number of recipients of cash social assistance. Bearing in mind that a large number of citizens cannot exercise their right to financial social assistance or that it is difficult for them to exercise this right, and they need assistance, the Commissioner initiated easing the conditions for exercising the right to material support for older persons. This was initiated through the amendment of the Law on Social Protection, and also through recommendations in this report on improving the efficiency and quality of financial support to older persons to overcome social and life difficulties.

In the Republic of Serbia, the retirement and disability insurance is based on the principle of mandatory retirement insurance, directly deducted from gross salaries. This system, as in many other countries, is based on intergenerational solidarity. Also, it is based on the system of covering the costs of older-age pensions with the current income from the retirement and disability insurance, whereby employees directly finance the retired citizens with their contributions and thus acquire the right to their own older-age pension. However, in the light of demographic change, such retirement systems are becoming difficult to sustain in their current form. The reform of the pension system in Serbia, which has been implemented in several phases since 2001, has significantly changed the characteristics and structure of this system, which has already been discussed in this report. Thus, the age limit for exercising the right to an older-age pension is gradually equalized, the institute of early old-age pension was introduced. It implies a reduced amount of pension in case of early retirement. Also, significant changes were adopted within the fiscal consolidation program when all pensions were progressively reduced for about 40 percent of retirees. According to the Retirement and Disability Insurance Fund of the Republic of Serbia, 948,615 pensioners, i.e. more than 55% of pension beneficiaries, receive a monthly pension that is less than the minimum wage, and 1 068 113 beneficiaries receive a monthly pension that is below the minimum daily grocery shopping needs. The number of insured persons of the Retirement and Disability Insurance Fund of the Republic of Serbia dropped from almost 2 800 000 in year 2000 to 2 200 000 in 2019, while the number of pensioners increased by about 200 000 in the same period. The average number of years of using the older-age pension

are also increasing, so, in 2012, women used their older-age pension for 18 years on average, and men for 16, while in 2019, women used their older-age pension for 20 years and men for 17 years. The main problem is not in the number of pension beneficiaries, or of people who use funds for which they had paid contributions from their salaries, but in the reduction of the number of those who pay insurance in the moment – the working population, which disrupts the intergenerational solidarity relationship on which the retirement and disability insurance system rests. Namely, in light of demographic changes, the current model of pension insurance is becoming unsustainable. The amount of pensions is reduced compared to the period when this system was originally established, when three or four insured working persons would pay the amount of insurance for one pensioner. This greatly affects the financial security of older persons and ‘pushes’ them into poverty.

In the long run, the existing system of pension benefits does not lead to economic security in older age, but rather create financial dependence on other family members and on society as a whole. The fight against poverty is crucial in the field of economic and social rights, and it means ensuring economic and social security and quality of life at all ages.

Having in mind primarily the demographic picture characterized by demographic aging, and a high average age of the population, with further migration and departure of young people, special attention should be paid to the implementation of measures and activities to reduce poverty, encourage rural development, and to achieving full equality. This means paying special attention to vulnerable and marginalized social groups, and to the poverty of older persons. Due to their importance, these issues should be addressed by the National Assembly as the highest legislative body. For several years, the Commissioner has emphasized in her recommendations and regular reports that it is necessary to envisage implementing measures and activities aimed at reducing poverty at all levels, in order to achieve equality for all citizens, especially vulnerable and marginalized social groups. Taking this into consideration, it is necessary to especially monitor poverty indicators among older persons and improve existing programs and activities that enable a dignified life in older age.

Both the 2030 Agenda for Sustainable Development and the United Nations Sustainable Development Goals emphasize the framework of sustainable development policy by integrating the perspective of reducing inequality through poverty reduction, healthy living, inclusive education, full employment, safe and sustainable settlements, access to justice, and equality data. This approach is also accepted in the *Declaration on the Role of Equality Bodies – 2030 Agenda*

for Sustainable Development²⁷⁸ of the European Network of Equality Bodies (EQUINET).

Bearing in mind that these are comprehensive topics that are high priority for international bodies, these issues should be addressed primarily by the highest bodies in Serbia, such as the National Assembly and the Government of the Republic of Serbia, but also relevant ministries and local self governments.

RECOMMENDATIONS:

Establish a special committee/subcommittee in the National Assembly in charge of improving the position of older persons or delegate these issues within existing committees.

All bodies at the national, provincial, and local level, when creating and implementing various measures and activities related to poverty reduction, should pay special attention to statistical indicators and data from relevant surveys, and analyses of already taken measures that affect older persons, especially those who belong to multiple vulnerable groups, such as persons above 80 years old, older women, financially deprived, older persons from rural areas, etc.

Local self governments should develop support systems for older persons in local communities.

Ministry of Labor, Employment, Veterans, and Social Affairs should propose measures to provide support for financial security in older age through the reform of the pension system and social protection system. The reform should improve the efficiency and quality of financial support to overcome social and life difficulties (for example by expanding existing cash social programs for the most vulnerable older persons, by easing the property ownership limits as conditions for exercising these rights, or by introducing 'social pensions' for those who have not exercised the right to an old-age or other type of pension).

The Ministry of Labor, Employment, Veterans' Affairs, and Social Affairs and the Ministry of Finance should propose measures to stimulate flexible forms of work that enable greater participation in the labor market and encourage the employment of older persons in accordance with their abilities.

Stimulate flexible forms of work that enable greater participation in the labor market of all generations and encourage the employment of older persons in accordance with the possibilities.

278 *Declaration on the Role of Equality Bodies – 2030 Agenda for Sustainable Development*, Equinet, 2019, available on the website: <http://equineteurope.org/2019/07/09/declaration-on-the-role-of-equality-bodies-2030-agenda-for-sustainable-development/>

A National Strategy on Aging was in force until 2015 in the Republic of Serbia.²⁷⁹ Its strategic directions included promoting and implementing a comprehensive approach to aging, through a coordinated functioning of all competent bodies and a consistent approach of all participants, and reaffirming the family role and family solidarity in ensuring the quality of life of older persons and development of the society as a whole. However, after the expiration of this strategy that acted as a guiding principle for all social actors in Serbia in terms of policy development about aging and improving the social, economic, political, and cultural position and role of older persons, a new document to implement these activities has not been brought. Five years have passed since the expiration of the Strategy. The need for the adoption of a new strategic document related to aging is expressed by all political and social actors and older persons. Special attention should be paid to aging, integrating the needs of older persons into a general strategic document that would include financial material security and exercise of various rights related to the retirement pension and disability insurance, social and health care, as well as preventing discrimination and combating stereotypes and prejudices through education and information, various media campaigns, specialized shows, publications, brochures, newspaper articles. The new strategic document should be accompanied by an action plan with a precise time frame for the implementation of concrete activities and with pre-determined financial resources for all measures and activities.

When looking at the population of older persons and the issues they face, it should be noted that this is not a homogeneous group that has equal needs and opportunities. Differences are expressed between those who live in urban or rural areas, between those of older age, i.e. those who are over 80 years old and those younger, those who are in institutional homes or live alone, not forgetting gender differences between men and women, etc. Therefore, it is necessary to approach the improvement of the position of older persons in a multisectoral and comprehensive manner, with prior analysis and in-depth consideration of all relevant reports and survey, especially the analysis of previously implemented measures and activities. When creating concrete measures, a broad consultative process should be conducted with all relevant actors. Measures should realistically define goals and activities, and sources of funding, while taking into account the needs of different groups of older persons with their active involvement in these processes at the level of local self-government.

When creating and implementing an aging policy, as a candidate country for membership in the European Union, the Republic of Serbia should follow European aging policies with implicit monitoring and implementation of all international standards at the United Nations level. It is necessary to follow the consultative process in drafting the Green Paper within the European Union

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policies regarding the implementation of an inclusive approach to groups to which the labor market has been more difficult to access, especially in relation to women, the older persons, or persons with disabilities, forms of discrimination and improving the work-life balance, gender perspective and investing in the improvement and recognition of new skills and qualifications.

In addition to a comprehensive strategic document on older persons, it is necessary to adopt strategies and action plans related to prevention and protection against discrimination, development of social protection, mental health, adult education, etc. New strategic documents should be based on the evaluation of previously valid strategies and take into account the current situation and needs of the social groups to which they relate. It is also necessary to regularly review and evaluate the envisaged measures and activities, level of results achievement, and to consider the need for their change accordingly.

RECOMMENDATIONS:

Competent ministries, primarily the Ministry of Demography and Population Policy, in cooperation with the ministries responsible for health and social protection and human and minority rights, should develop a comprehensive strategic document on aging and improving the quality of life of older persons, based on all relevant data and analyses, while taking into account diversity of this social group and the involvement of all relevant actors in the drafting process.

The government should adopt strategic documents and action plans the validity of which has previously expired. Also, the government should take into account the current demographic situation and its perspectives, while covering issues of aging and older persons (such as prevention and protection against discrimination, development of social protection, health care, and palliative care, lifelong learning, mental health, infrastructure, and traffic development, etc.).

When drafting strategic documents, action plans, and other acts that prescribe measures and activities relevant to older persons, representatives of older persons and of organizations that advocate human rights of older persons should be consulted. Also, the participatory approach should be part of the implementation of these measures and activities, especially at the level of local self-government. Regular evaluation of the implementation of the planned measures and activities should be carried out to consider their effect on different groups of older persons and the possible need for their changes.

The need to improve the normative framework in certain areas of interest to older persons was also noted. Thus, for example, it is necessary to amend the Law on Social Protection, the Law on Prevention of Domestic Violence, the Family Law, but also to pass the Law on Gender Equality. In the initiative

for amendments to the Law on Social Protection, the Commissioner pointed out that it is necessary to protect the socially endangered rural population in households with older persons, in the part that refers to the prescribed land area as a general condition for exercising the right to financial social assistance of individuals or families.

Namely, due to the prescribed restriction regarding the land area ownership, a large number of citizens cannot exercise the right to financial social assistance or it is difficult for them to exercise this right. The initiative points out that in addition to increasing the prescribed limits to property ownership, when deciding on the right to financial social assistance, it is necessary to take into account the quality of the land, the possibility of its cultivation, leasing, or sale.

In the Commissioner's practice, it has been noticed over the years that the prescribed procedure on how to obtain opinions from all competent bodies and on public participation in the adopting or amending certain regulations has, in some cases, not been consistently implemented, which may later lead to the adoption of regulations that are not harmonized or are unconstitutional. In this regard, when adopting these acts, it is necessary to consistently follow the prescribed procedures, to consider the effects of the application of regulations in practice, and the possible consequences these regulations may have.

One of the issues in monitoring cases of discrimination is the fact that we do not have a unique, centralized, and standardized system for collecting, recording, and analyzing relevant data. Monitoring the discrimination, and the functioning of the legal protection system can help increase knowledge on the situation in Serbia, and support us to improve the position of certain social groups. Taking this into consideration, keeping record of all procedures for protection against discrimination could contribute to the promotion of the fight for equality, especially when having in mind that the practice of the Commissioner in dealing with complaints indicates, as already emphasized, that older persons are less likely to contact the authorities. In Serbia, the existing anti-discrimination legislation provides a decent foundation for the promotion of equality and combating discrimination, but it needs further improvement and harmonization with the *acquis communautaire* and international standards. The Action Plan for Chapter 23, among other things, envisages the need to amend the Law on Prohibition of Discrimination in such a way to include the introduction of a single system for monitoring all discrimination cases.

RECOMMENDATIONS:

The competent ministries should advocate for amendments to existing or adoption of new regulations in relevant areas, in line with the international standards, taking into account the improvement of the position and equality of all social groups, especially older persons (such as amendments to regulations on legal capacity, social protection, prevention of domestic violence, adoption of regulations on gender equality, etc.).

The Ministry of Human and Minority Rights and Social Dialogue should, through amendments to the Law on Prohibition of Discrimination, achieve harmonization with the *acquis communautaire* and overcome identified issues in its implementation so far. It should lead to the development of a unique, centralized, and standardized system for collecting and analyzing relevant data that serve to monitor discrimination and the effectiveness of the system of protection against discrimination.

The current situation of the covid-19 pandemic at the global level, and during 2020 especially, pointed to the need to establish a balance between protecting the health of the population, while respecting human rights and minimizing the various consequences of the health crisis. Already in the first days of the health crisis caused by the epidemic, numerous bodies and organizations around the world paid special attention to the position of vulnerable groups of the population in emergencies. Older persons were identified as one of the most endangered groups of the population in such emergency conditions, and were restricted or banned from moving in most countries of the world due to their vulnerability to infection.

During the crisis, we could see the need to improve access to adequate and timely information regarding the crisis event, and ways to cope with it. The specific needs of different social groups that are at risk during crises require a timely response; It is necessary to have as precise segregated data on the population as possible to prevent some groups of citizens from being left out of support; Also, it is necessary to establish cooperation and involve as many representatives of vulnerable groups as possible in creating appropriate responses to crises; We should encourage volunteerism and social responsibility; Also, we need to specify the provisions of certain regulations and create an appropriate response to crises. The consequences of actions of public authorities that introduced measures of the length and the ban on movement, were pointed out by citizens in complaints to the Commissioner. It was increasingly difficult to tolerate isolation. Also, supply of commodities, and permission to move in the early morning hours once a week had a negative impact on mental and physical health, which needs to be taken into account, especially during crisis

situations. During the previous year, the need to provide all necessary services in the appropriate scope emerged as a relevant topic. Namely, exercising the right to health care should not be a problem for any citizen, regardless of the place of residence, diagnosis, age, and other characteristics. Health care should be available to every person, regardless of the system burden caused by the crisis. Complete focus on 'covid patients' can significantly endanger the health of the population, especially for persons who suffer chronic disease. It can leave major consequences on individuals and can reflect on the long-term health care system. In that sense, it is necessary to ensure continuous comprehensive access to health care services for all citizens in every situation, regardless of the crisis. On the other hand, the previous years showed major shortcomings in terms of exercising the right to social protection services, and the continuity of special importance in crisis situations. Volunteers and volunteer organizations play an important role in such situations.

RECOMMENDATIONS:

The Government should adopt a regulation that establishes clear, precise and applicable procedures for dealing with all phases of crisis events. Regulations should be based on quality and disaggregated data on population, and analysis of the response of the responsible authorities to the crisis caused by the coronavirus. In this process, experts from various fields should be involved, together with representatives of vulnerable social groups, primarily older persons, their organizations, and human rights institutions.

All responsible authorities and organizations should reconsider their modes of work to ensure access to adequate, comprehensive, and timely information in crisis events, and ways to overcome them.

All bodies at the national, provincial, and local levels should undertake activities to promote volunteerism and encourage volunteers to work with all generations while facilitating procedures for organizing volunteer services and encouraging social responsibility not only in crises, but also in regular daily activities.

Today's society is characterized by rapid changes happening at all levels and in different areas, greatly affecting individuals, families, communities, and society. According to the United Nations, the number of people over the age of 60 will exceed the number of children under the age of 15 in 2050. These changes place certain requirements that largely relate to social and health care systems, which need to be adapted to the increasing number of older people in society.

The practice of the Commissioner confirmed the need for continuous provision of health care to all users. Older people often, and regardless of the

current health crisis, have a problem with the coverage and availability of health care. Over the years, the Commissioner has sent several initiatives related to the use of health care services, such as the Initiative to the National Health Insurance Fund to amend the Rulebook on medical and technical aids provided from compulsory health insurance. The Initiative also sent the Ministry of Health suggestions to amend the Decree on the plan of networks of health institutions. An analysis of the Commissioner's practice, and acting based on the Commissioner's recommendations, show that the National Health Insurance Fund has showed great enthusiasm in acting on the given recommendations. This is important, bearing in mind that the Fund's resources are limited, and it is not easy to set priorities regarding health care for all citizens of the Republic of Serbia.

A special group of service users is the group of people who, due to their specific social and health status, need both social care and permanent health care, i.e. palliative care. Currently, in our country, there are no standards for providing such services. For patients who are facing the final phase of life, it is very important to be provided with all alternatives for care, and one of them is certainly palliative care. In terms of availability and quality of palliative care services, in the reality of the existing system, this right often remains only an opportunity that most patients and their families fail to exercise, which is why it is necessary to raise citizens' awareness of these rights and services, but also to simplify procedures for exercising them. Also, it is important to improve the use of information technology for assistance, provide adequate access to palliative care for both the older persons and other persons in need, as part of their right to health care, without discrimination. In order to solve these issues, the Ministry of Health and the Ministry of Labor, Employment, Veterans, and Social Affairs must regulate them and organize services for users who, due to their health status, need medical care and constant social care.

In addition, the problem of conducting preventive and screening examinations for an early detection of diseases and of improving the general health of the population is still evident, as is the need to improve citizens' awareness of these topics.

RECOMMENDATIONS

Ministry of Health should undertake activities to improve the health care system and intensify work on increasing the availability and development of mobile and innovative services for older persons. Especially services like home treatment and care, patronage services for visiting and helping older persons, telephone counseling, especially in rural and remote areas.

The Republic Health Insurance Fund needs to continue working on providing more efficient therapies, drugs, materials, and innovative aid at the expense of the Fund.

Health care institutions need to intensify activities related to preventive care, screening examinations, and raising awareness of health risks among older persons.

The Ministry of Health should take measures to ensure greater availability of psychological support and protection of the mental health of the entire population, especially older persons, during crises.

The Ministry of Health should work on ensuring equal access to palliative care within the right to health care, without discrimination, while simplifying the procedures for achieving palliative care and improving the use of information technology for health assistance.

The trend of family transformation is continuously present. People get married later; have fewer children, and much later; live in cohabitation, single parenthood is not uncommon. This all affects the family structure, which no longer implies households with several generations under one roof which take care for older persons. Older persons are increasingly living alone. Also, life expectancy has increased. Due to the loss of the traditional role of the family, there is a great need for a number of services that include care and nursing of older persons. Relationships between family members are complex and two-way. Older persons often provide financial assistance and care for family members. With age, the risk of chronic diseases increases, which can lead to disability and functional dependence of older persons on the younger members of the family or on social community. Due to exhaustion, illness, and disability, without the support of the family environment, a significant number of older persons have been referred to appropriate social and health care services, including those that provide basic living conditions. These changes require adaptation to the specifics of living conditions and needs that arise in older age. Services catering to older persons, such as help and care at home, older age home services, should be provided in each municipality and town in Serbia. Special effort is needed to enable the use of these services to as many people as possible in smaller or

remote environments where these services are underdeveloped and the need is high. Special attention should be paid to older persons in rural areas, and additional efforts should be made to make all services available to people in these areas as much as possible. The current situation in Serbia shows that older family members receive care mostly from informal caregivers, such as family members and relatives. The question is whether they possess the capacity and ability to perform such tasks. Improving the position of home care assistants, while improving the system of formal support to those who are in need, introducing different types of support services, etc. is a way to overcome the identified problems. The Commissioner regularly points out that it is necessary to build all the capacities of the centers for social welfare, but also home care assistants, in order to ensure that all forms of necessary support and assistance are in place. Also, with the same goal, the Commissioner sent the Initiative for Repealing the Law on Determining the Maximum Number of Employees in the Public Sector, having recognized that the application of this law has disrupted the structure of employees in the public sector. Also, there is a serious shortage of employees in key areas such as social and health care. This causes an inadequate response to the needs of citizens, which was especially confirmed during the covid-19 pandemic.

In addition to the mentioned problems related to the scope and availability of social protection services, in the Commissioner's practice, there are also cases when service to users of certain homes for older persons is based on stereotypes and prejudice about the possibilities and abilities of older persons. Therefore, the Commissioner recommended homes for the housing of older persons in the Republic of Serbia not to base their decisions and actions relating to services on stereotypes and prejudices in relation to users' age and health condition. Also, during 2019, the Commissioner sent several recommendations for measures to achieve equality to the centers for social welfare, in response to an increased number of initiated proceedings for deprivation of legal capacity. Some centers for social welfare initiate proceedings to deprive their clients of legal capacity and appoint a temporary guardian, not taking into consideration the real possibilities of these persons. Namely, according to the available information obtained by the Commissioner acting on the complaints, the decisions of individual centers for social welfare were not preceded by an adequate assessment of the strengths and needs of older persons. It is an outdated practice to easily initiate proceedings for deprivation of legal capacity and appoint temporary guardians. We need to take into account the consequences of such a practice and what it brings to each person.

RECOMMENDATIONS

We need to build the quantitative and qualitative capacities of social welfare centers and other social protection institutions in order to fully ensure quality mapping of needs, recognition of social exclusion, and timely activation of all forms of support and assistance to older persons.

The Ministry of Labor, Employment, Veterans' Affairs, and Social Affairs should propose ways to better link cash benefits to social protection services, ensure the strengthening of control mechanisms, and monitor and evaluate the quality of social protection services. Local self-government units, in cooperation with the ministry in charge of social protection, should actively work on equal increasing of the coverage of appropriate support services to older persons, with special emphasis on rural and remote areas and groups at risk (e.g.: persons who suffer from dementia, persons who live in poverty, or are at risk of violence, etc.).

We need to encourage further development and creation of services by using innovative technologies (tele-assistance) and services, such as occasional and temporary accommodation, etc.

Also, conditions for licensing social protection services should be eased in order to stimulate capacity development and improve the formal support system. We need to undertake concrete activities to improve the position and strengthen the capacity of home care assistants, by considering their needs, introducing support services, trainings, networking, etc.

Also, we need to ensure adequate capacity and quality of institutional old age home services by applying a human rights-based approach and encouraging the development of alternative forms of housing (such as economically viable housing communities).

The traditional division of roles between men and women at an earlier age is reflected in everyday life at an older age. Older women are more likely to rely on the income provided by their partners, have lower incomes than older men, and, at the same time, according to relevant statistics, women live longer. One of the characteristics of demographic changes is the feminization of aging. In addition, many women have spent their lives in care, in physically demanding and poorly paid jobs, or the informal economy, resulting in an even worse position in older age. Women in the Republic of Serbia are still at a disadvantaged position in all areas of social life compared to men. Women are especially discriminated in the labor market, participation in decision-making, in the economic sphere, and education. They suffer from gender-based violence as well. *The Special Report of the Commissioner for the Protection of Equality on Discrimination in the Field of Labor and Employment* states that in the ten

years since the establishment of the institution, until the publication of that report, the Commissioner received the most complaints in the field of labor and employment. The majority of complaints were in terms of violation of the Law on Prohibition of Discrimination. Most cases were filed because of gender-based discrimination. The majority of cases involved discrimination against women in the labor market, followed by discrimination based on marital and family status, primarily women. The Commissioner's practice also shows that, these two personal characteristics often appear together as a basis for a discrimination complaint. The causes that lead to the subordination or superiority of the genders, i.e. the stereotypical role of the gender, continue to produce inequalities in everyday life. Women are among the most vulnerable groups, and this is confirmed by the results of the Commissioner's public opinion poll on the attitude of citizens towards discrimination. The survey shows that women are the second most vulnerable group (after Roma), and 42% of citizens believe that women are those most exposed to discrimination.

As the result, it is necessary not only to envisage special measures and activities aimed at older women but to work on the full realization of gender equality throughout life. This should lead to greater equality in older age.

In addition to the above, older persons, and especially older women, face various aspects of violence, abuse, and neglect. One of the more common forms of violence against older persons is financial violence. Older persons often do not fully decide how they will spend the funds they have at their disposal, or they have to support other household members, as evidenced by numerous surveys and reports. Violence against older persons is a serious problem in our society, and at the same time, it is a topic that is rarely talked about. It is often hidden and not reported, which represents a significant obstacle in combating it. They have the same rights – what older women have to say about their rights not to be discriminated against, to be equal and free from violence, abuse and neglect.²⁸⁰ Study respondents stated that they were exposed to violence, abuse and neglect, both in the houses in which they live, but also in institutions and public transport. This report concludes, among other things, that states need to ensure equality in practice for older persons, and violence prevention, support services, and access to justice. It was especially emphasized that we should work on information, raising awareness, and further survey.

Data on the increase in the number of cases of gender-based violence indicate that violence remains a serious and very complex issue, although the Law on Prevention of Domestic Violence has achieved certain effects and improved the

280 *They have the same rights – what older women have to say about their rights not to be discriminated against, to be equal and free from violence, abuse, and neglect*, Serbian Red Cross and HelpAge, 2017, available on the website: <https://www.redcross.org.rs/media/2467/imaju-ista-prava-pdf.pdf>

coordination of the system in providing protection. The number of reported cases of domestic violence decreased during the state of emergency, but, at the same time, psychological-social support for women in situations of violence provided by emergency telephone lines increased by 30% compared to the period before the covid-19 epidemic and ending in August 2020. There were 12,332 victims of domestic violence, of which 72.4% were women.²⁸¹ This situation shows the need to further strengthen the victim support system, and to strengthen the capacities of responsible institutions. Measures that could yield results would be the following: further steps to combat gender stereotypes and sexism, closure of gender gaps in the labor market, empowerment of women, achieving equal participation in different sectors and decision-making processes, prevention of violence through the promotion of equality in gender roles in education, culture, and the media. Special attention should be paid to measures for the prevention of violence in crisis situations when an increase in the number of cases of violence can be expected.

The current health crisis has further confirmed the need for unhindered access to all mechanisms for protection against discrimination. Full implementation of the anti-discrimination legal framework by all public authorities, keeping a central and unified record of cases of discrimination in all areas of social life, and monitoring international and domestic anti-discrimination practices and policies is needed. In order to reach democracy in our society, we should consider the findings of relevant surveys and reports, the level of information, and awareness of citizens about the prohibition of discrimination. Also, the importance of achieving the principles of equality for social and economic development and improving the quality of life of all citizens, and creating such a cultural pattern of behavior where discrimination is condemned and respect is needed.

The results of several surveys on the position of older persons conducted by the Commissioner in previous years, as well as the practice of this institution, but also other survey and reports, both in the country and internationally, indicate that older persons, above all, encounter prejudice and stereotypes about their position and role in society. As elsewhere in the world, so in Serbia, older persons are seen as unproductive recipients of aid and a burden on the health and economic system. Especially in the mainstream culture that “appreciates” and forces youth, physical fitness and beauty, speed, and technological progress. A significant issue remains that the characteristics of society are easily accepted as a given framework, so the older persons do not question them. Namely, older persons often adopt negative perceptions about themselves, accept the prevailing social norms, and take on the role assigned to them by society, as

281 *COVID-19 Socio-Economic Impact Assessment*, United Nations Serbia/ UNDP, September 2020, https://serbia.un.org/sites/default/files/2020-09/seia_report%20%281%29.pdf

inactive, passive, and dependent persons. Society does not expect older persons to be physically active, social, creative, and productive. By agreeing with such expectations, older persons avoid activities in which they would do something contrary to what society expects of them. This is embodied in attitudes that imply that something is not appropriate for their age. In such an environment, the ability of older persons to be active, creative, and productive also declines and leads to permanent physical and mental deterioration.

A term that is generally accepted, and is used to describe stereotypes and prejudice, or discrimination against older persons based on their age, is “ageism”. This term encompasses all behaviors that result in violations of the human rights of older persons in various areas of social life. It impacts the lives of families and individuals in the broadest sense and increases the dependence of older persons by reducing their opportunities for contribution. The usual attitude is that something ‘is not appropriate for certain age’ or ‘that their time has passed’. Such patterns of behavior are influenced through series, movies, plays, commercials, books ... Negative stereotypes about aging are also contributed by the image in the media, often portraying older persons as sick, dependent, and expensive for society. Older persons are rarely shown in advertising, and the products they advertise are mostly medicines, medical aids, and medical devices. Also, advertising content for financial services of banks, such as loans, shows that older persons use this type of product primarily to help children and grandchildren and not to meet their own needs. There are rare cases in which older persons are portrayed as active, creative, smiling, and independent.



Removed mural from Bristol, UK, depicting an older woman at the start of the covid-19 pandemic sneezing and spreading the virus, anonymous street artist (Banksy)

Affirmative perceptions of the values of older people and their participation in society can increase the potential of society for progress. Also, it contributes to a more effective and comprehensive introduction of aging in the overall development of society, especially in the demographic picture and projections of population aging. Therefore, most members of society must accept that population aging is a natural outcome, that older persons are a resource for continuous economic growth, and that the aging population should be integrated into development programs and policies. This is where the media should play a special role. Ways to combat such prejudices and stereotypes are certainly reflected in educating and informing citizens of all ages about solidarity and coexistence, mutual relations and acceptance of the aging process, while promoting tolerant relations in the family and society and respecting the needs and positions of all generations.

RECOMMENDATIONS

The Ministry of Human and Minority Rights and Social Dialogue should intensify work on the Draft Law on Gender Equality, which will draft measures to eliminate stereotypical gender roles and achieve full gender equality of women in all areas.

The Government should take measures to improve coordination and efficient operation of all institutions of the system that protect victims of violence.

The system of protection against violence should keep gender and age-sensitive statistics, in reports of violence and processed cases, with the implementation of continuous activities to raise awareness of the recognition and obligation by all actors to report violence.

Actively and continuously eliminate prejudice and stereotypes about the role and contribution of older people to the community. Also, special attention should be paid to responsible reporting in the media, without discrimination, and monitoring the publishing of illegal media content.

In the media space, including social media, we should encourage the integration of topics that develop a culture of tolerance, understanding, respect for diversity, intergenerational solidarity, gender equality and non-discrimination, and the existence of mechanisms for protection against discrimination.

Continuously conduct adequate training to recognize and respond to cases of discrimination.

One of the problems identified in the analysis of the Commissioner's practice is multiple discrimination, which can also occur in relation to property status and age, or disability, health status, gender, marital and family status,

etc. Complaints of multiple discrimination, in most cases, were filed in the area of public service delivery and in the area of labor and employment. In the area of public service delivery, most complaints are based on health, disability, and age, which, combined, lead to discrimination. Based on the Commissioner's practice, women are often exposed to multiple discrimination.

Various surveys and reports identify inaccessibility of public facilities, areas, and services as one of the key obstacles for social inclusion of persons over the age of 65, and persons with disabilities and reduced mobility. Accessibility is a general term used to describe the extent to which the physical environment, means of transport, information and communications, or facilities, goods, and services are accessible to most people. When we discuss people with disabilities and all persons with reduced mobility, such as older persons, or their right of access to the physical environment, services, and products, accessibility is associated with the field of human rights and various legal mechanisms for their protection. These mechanisms are associated with the term 'universal design' which implies accessibility for all people regardless of whether they have some degree of disability or not. In the Republic of Serbia, a legal framework has been created in this area, and some of these regulations relate to: planning and construction and technical standards of planning, design, and construction of facilities that ensure equal access for persons with disabilities, children and older persons; public procurement based on the obligation to submit evidence of compliance with technical standards of accessibility for goods and services; road safety and providing equal access to the physical environment; communal activities and the possibility of providing public city transport and unobstructed parking; rail and air transport and the rights of persons with disabilities and persons with reduced mobility in rail and air transport; privileges in domestic passenger traffic, etc. Regardless of the existence of this regulation, citizens still face obstacles in performing their daily activities, usage of transportation, or accessing public and private facilities. This implies that there is no equal access to goods and services. Inaccessibility of public facilities, especially those in which various rights are exercised, such as centers for social welfare, local self-government, post offices, banks, Republic Pension and Disability Insurance Fund, etc. still exists despite numerous but unsystematic interventions. This represents one of the bases for discrimination. In order to develop a more inclusive society and to improve the position of older persons, we should create a healthy environment and public space accessible to all ages. These spaces should be comfortable and safe where older persons can be active and autonomous, and participate in social and cultural life.

To ensure accessibility, acting on citizens' complaints, the Commissioner-issued several opinions on cases of discrimination because of physical barriers that prevent equal access to facilities and services. Also, the Commissioner sent a recommendation of measures to the National Election Committee to take

all necessary measures and activities in order to provide accessible election stations with information in order to ensure equal participation in elections. One of the recommendations to public authorities over the years is the need to intensify work on improving architectural and information accessibility and the application of universal design in all areas, to enable equal access to public buildings and areas, transport, information, communications and services, while providing equal opportunities. for access to emergency services, notification services, SOS lines, etc.

Improving the position of older persons includes intergenerational dialogue and the exchange of knowledge, experiences, skills and abilities between the younger and older generations, which is also mentioned in numerous reports and survey. One of the ways to achieve intergenerational cooperation are campaigns to combat stereotypes and prejudices about different generations. Also, promotion of abilities, needs and rights of all generations, and of intergenerational solidarity, good practice examples and family values. In that sense, the Commissioner also carries out various activities, such as the implementation of the project called the Bridge of Understanding, which was discussed more in the earlier part of the text.

On the other hand, the accelerated development of technology, primarily digitalization and robotics, which represent the success of civilization and enable new knowledge for humanity, makes life easier. Also, at the same time this opens new horizons and facilitates long-distance contact, but poses a challenge, especially for older persons. Attention to the inclusion of older persons in the processes of mastering new technologies is essential. In that way, they would be equally informed and included in modern trends, especially in crises such as the state of emergency that is characteristic of the first half of 2020. Older persons often do not have access to new channels of communication, which leaves them without timely and complete information about all social flows. Inadequate availability sometimes implies a lack of skills for advanced usage of information technologies, such as electronic banking, e-government, e-applications for scheduling, etc. Thus, for example, the Commissioner pointed out that the method of immunization against coronavirus by electronic notification through the eGovernment portal is especially inaccessible to older persons. This was confirmed after enabling direct vaccination at several locations, without prior registration. In this way, the state has enabled equal access to the vaccine for citizens of all generations and in all areas.

*The strategy for the development of digital skills in the Republic of Serbia for the period from 2020 to 2024*²⁸² states, among other things, that a good number of older persons do not have basic digital skills, even though they have the need

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to follow the information on modern devices. Also, they have the need to make contact and access various services in society, which requires the development of these skills. Therefore, as many older persons as possible should be trained in the basic usage of smartphones and the internet. Also, skills to set up new accounts and create passwords, survey, download, use network, and mobile applications should be developed. This strategy states that key performance indicators of the envisaged objectives will be elaborated in detail within the action plans. The public debate on the proposal of the first action plan is in progress (in the period March 25 – April 14, 2021), and its adoption is planned within 90 days from the day of the adoption of the Strategy. This plan should contain a special part - a platform for the development of digital skills of older persons, through tailored-made training for the purpose of adequate digital inclusion.

Greater social inclusion of older persons is also conditioned by their attitudes, values and capacities. This implies that the promotion of active and healthy aging among all generations, especially among the older persons is necessary. Within its activities, the Commissioner constantly points to the need to preserve a healthy life through active and healthy aging, which refers to the promotion of healthy lifestyles throughout life and includes both the way of consumption and nutrition and the level of physical and social activity. Also, the need to protect the environment and include all generations, of course, older persons, in activities that contribute to a healthy environment is a priority of all society. Older persons in preserving and improving a healthy environment can have the role of guardians but also innovators together with young people. They have 'mature' knowledge that can be used and modified following modern needs. Such attitudes are embodied through the United Nations Sustainable Development Goals 2030, which refer to future social and economic development in accordance with the principles of sustainability.

The degree of involvement of older persons in various activities, cultural, sports, and other content is important. The principle of lifelong learning, the organization of various trainings adapted to the needs and abilities of older persons. A greater degree of involvement in various social activities is a way to achieve adequate social participation.

RECOMMENDATIONS

All bodies at the national, provincial, and local levels should intensify their work on improving architectural and information accessibility, and the application of universal design in all areas. Local self-government units should work on providing infrastructure and public transport without barriers in urban and especially in rural areas, access to emergency services, information services, SOS lines, etc. Through various measures at the level of the local community, they should promote and encourage intergenerational dialogue and exchange of knowledge and experiences between members of different generations, and carry out activities on the prevention of loneliness. Promote lifelong learning and inclusion of as many older people as possible in various adapted programs in accordance with the possibilities and wishes of older people.

The Ministry of Trade, Tourism, and Telecommunications should start drafting an Action Plan for the implementation of the Strategy for the Development of Digital Skills in the Republic of Serbia, which elaborates in detail how to raise capacities of older persons to use modern information and communication technologies, with special emphasis on internet security. All bodies at the national, provincial and local level to encourage activities and projects in which the inclusion of older persons in various areas of social life, culture, sports, and other activities is carried out equally and in a planned manner. Active cooperation with civil society organizations and active participation of older persons should be ensured in order to prevent social exclusion. Also, various forms of self-organization and self-help of older persons should be encouraged, while raising awareness of personal responsibility for a dignified, active, and healthy ageing.

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