

National Report for the Third Review and Appraisal Cycle of the  
Implementation of the Madrid International Plan of Action on Ageing and its  
Regional Implementation Strategy (MIPAA/RIS)  
2012 - 2017

**REPUBLIC OF SERBIA**

July 2017

## Part I

### Executive summary

The Report has been generated in close cooperation and exchange of information between the relevant institutions of the Government of the Republic of Serbia and non-governmental sector. Each institution delivered the responses and analyses, which are under their jurisdiction and their scope of work.

### General information

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4. Name, reference, and date of adoption or status of preparation of national strategy, action plan or similar policy document on ageing (please attach relevant documents in the annex).

The National Strategy on Ageing was adopted in September 7, 2006.

Between 2012 and 2016, evaluation of the National Strategy on Ageing (NSA 2006) was conducted, at the end of 2015, when the decision was made not to develop a new strategy, but to continue with implementation of the existing one and with strategic aims already being established, since the defined strategic aims are in compliance with the aims set by the European Union by 2022. Evaluation of the Strategy involved representatives of scientific and professional public and practitioners from public, civil and private sector in the fields of social protection, healthcare, education, employment and judiciary, both from local and national levels. Certain steps forward were made in all ten strategic directions of the NSA, but the overall implementation process went slower than it was planned and expected.

All the defined strategic directions of the NSA, including recommendations for establishment of priorities in the forthcoming period, were deemed appropriate for the future period:

- ⊙ Poverty reduction,
- ⊙ Compliance with sustainability principle,
- ⊙ Adjustment of Pension and Disability Insurance system,

- ⊙ Defining and establishing legal framework for ageing and practical connection and development of long-term care services
- ⊙ Strengthening of NGOs and private partners in the long-term care process,
- ⊙ Enhanced availability of lifelong education of older persons,
- ⊙ Enhanced living environment and security of older persons,
- ⊙ Prevention and protection of older persons from any form of discrimination and violence.

Council for enhancement of intergenerational cooperation and solidarity has been established.

The Council's tasks are the following:

- 1) Connects two important, but vulnerable, social groups of youth and elderly in the Republic of Serbia;
- 2) Affects awareness raising on the relevance of intergenerational cooperation as a form of support among these groups;
- 3) Utilises working and creative potentials of these vulnerable groups, which result in establishment of cooperation and their participation in development of society, economic and public life;
- 4) Encourages and involves all relevant stakeholders who would act at all levels, creating better possibilities for active ageing and strengthening intergenerational solidarity;
- 5) Encourages efficient mutual support and cooperation between different age groups, which would jointly design innovative solutions for improvement of life quality of both older persons and children and youth, which would result in enhancement of social cohesion and solidarity among them;
- 6) Launches appropriate initiatives for development of cooperation with state authorities, professional, humanitarian and occupational organisations and associations, which would improve life quality in old age, childhood and youth;
- 7) Launches initiatives for changes and amendments of regulations, which lay down the matters relevant for social security and life quality of these age groups;
- 8) Suggests enhancement and directing of international cooperation in this area;
- 9) Takes stands, gives opinions and through recommendations suggests appropriate solutions for undertaking suitable measures, which would contribute to enhancement of intergenerational cooperation;
- 10) Considers the matters of scientific and professional disciplines enhancement in the area of caring for older persons, preschool children, school children and students;
- 11) Monitors the situation regarding accomplishment of objectives of social protection of older persons, children and youth;
- 12) Evaluates the effects of measures being undertaken and informs the Government of the Republic of Serbia;
- 13) Initiates and supports different programmes and activities of intergenerational solidarity and cooperation and their implementation in overall society, economic and public life.

The Council submits the reports to the Government.

## National ageing situation

The population of the Republic of Serbia is very old. Population ageing is intensified in 21<sup>st</sup> century. The main reason lies in low and decreasing level of fertility and decreasing number of children born alive. For example, the year of 2016 records the lowest number of children born live since 1900. In 2016, according to the estimates made by the Statistical Office of the Republic of Serbia, there were 1.4 million people aged 65 and over or 19.2% of total population. The number of persons over 65 was by 33% bigger than number of young persons under 15. In the same year, average population age reached the number 43.

Numerous areas in Serbia are seriously demographically endangered. The examples of extreme demographic collapse are municipalities Crna Trava, Gazin Han, Rekovac, and Svrlijig; in all four municipalities the number of older persons in 2016 was several times bigger than the number of young persons (ageing index 6,4; 4,4; 3,5 и 3,3 respectively) and average old age was over 50 (the Republic of Serbia without the data for AP Kosovo and Metohia). Serbia is immigration country and that is why we underline that the real age structure is even more unfavourable, since the estimates of the Republic Institute for Social Protection do not include external migrations.

In the middle of the century, Serbia will be demographically significantly older than today. The number of persons aged 65 or over, according to medium projections of the Statistical Office of the Republic of Serbia, will be increased to 1,645 thousands in 2041, i.e. every fourth citizen of Serbia will belong to the group of old persons. According to these estimates, share of the oldest persons, persons aged 80 and over, in total population of Serbia will be 7.5%.

Active ageing index in Serbia for 2014 is estimated to 29.5, and this level is higher only if compared with four EU countries. This data shows that there is lot of space for improvement of both, use of potentials of older persons in the function of social and economic development of country and creating an environment that will allow older persons to be active and to live a healthy life. Active ageing index value in Serbia is significantly higher for men. The difference in index height between male and female is 6.9 in Serbia and 3.7 in EU countries-28.

Presentation of **demographic indicators** that could help better understand the country's development regarding the issues discussed – **in the attachment of the report.**

Presentation of **key quantitative social and economic indicators** and features that may help to bring into focus the issues treated and to permit quantitative analysis

### Overall Economic Context

Being an EU candidate country since 1 March 2012, following the entry into force of the Stabilisation and Association Agreement on 1 September 2013 and having opened accession negotiations on 21 January 2014, the Republic of Serbia confirmed its strategic commitment to the acceleration of the European integration process.

In recent years, the overall economic situation in Serbia has been characterised by two trends. One is marked by pronounced economic growth up to 2008, and the other by a slowdown since 2008, with the Serbian economy facing a negative economic growth in some years.

External and internal imbalances and weaknesses, which characterised the Serbian

economy even before the crisis, were intensified further in the period following the onset of the crisis. The country's overall economic situation deteriorated significantly, which had an adverse impact on the social situation, negative trend of labour market indicators, poverty growth and living standards decline. The positive results of the fiscal consolidation measures undertaken during 2015 affected a decrease of external and internal imbalances and somewhat mitigated this adverse trend.

The Republic of Serbia ended the year 2015 with the estimated real economic growth of 0.8%. Given that a real decline of 1.8% was recorded in 2014, and a slight recovery trend was observed in 2013 (economic growth of 2.6%), the Serbian economy shows no signs of stable recovery yet (negative economic growth of 1.0% was recorded in 2012).

According to the projections presented in the Fiscal Strategy for 2016, with Projections for 2017 and 2018 and the Economic Reform Programme (ERP) for 2016-2018, an accelerated recovery path is expected, with the growth rates of 1.8%, 2.2% and 3.5%, respectively, in the next three-year period.

The Government has taken certain steps to address numerous obstacles hindering growth. Fiscal consolidation and economic recovery were set as the main Government objectives. The Progress Report, adopted by the European Commission in November 2015, reiterates the importance of fiscal consolidation sustainability and implementation of the reforms as planned. A credible medium-term plan of structural reforms, together with fiscal consolidation measures represents a key precondition for accomplishment of the Government's main economic policy objectives in the next three years. In November 2014, the IMF Mission reached an agreement with Serbia on a precautionary stand-by arrangement. The IMF press release states that the new economic Serbian programme is aimed at creating conditions for sustainable growth and job creation, during medium-term period, by implementing ambitious fiscal consolidation and structural reforms. After the IMF Mission, the assessment of the fourth review of precautionary arrangements in February 2016, it was concluded that performance under Serbia's economic program has been strong and all quantitative performance targets for end-December were met, most by large margins.

The main economic policy objectives of the Republic of Serbia are set out in the Fiscal Strategy for 2016 with Projections for 2017 and 2018:

1. continued implementation of fiscal consolidation measures, sustaining macroeconomic stability together with reversing further debt growth;
2. strengthening the stability and resilience of the financial sector by resolving the issue of non-performing loans; and
3. removing barriers to economic growth and enhancing competitiveness by implementing comprehensive structural reforms, as well as continuing the implementation of structural reforms, especially with regard to public enterprises, and raising public sector efficiency.

On the other hand, the focus of fiscal policy objectives of the Republic of Serbia set out in the Fiscal Strategy for 2016 with Projections for 2017 and 2018 is on further strengthening tax compliance, increasing tax collection efficiency and combating the shadow economy.

Fiscal trends at the end of 2015 show a consolidated general government deficit of 3.7% of the GDP. Fiscal imbalance remains very high and large economic sectors require reform. According to the projections presented in the Fiscal Strategy, with fiscal consolidation measures, the consolidated general government deficit will amount to 4.0% of the GDP in 2016, with a further decrease to 1.8% of the GDP in 2017 and 2018. Without these measures, the estimated consolidated general government deficit would reach 6.5% of the GDP in 2018.

One of the fiscal policy objectives in the coming period is to reduce the public-debt-to-GDP ratio. In October 2013, the Government adopted a new set of measures aimed at public finance stabilisation and economic recovery, which somewhat mitigated the growth trend, but the public debt level continued to grow substantially.

The central-level public debt continued to grow, reaching 73.4% of the GDP as at 31 January 2016[5]. In order to prevent a public debt crisis in the short term and create assumptions to discontinue further debt growth in the medium term, the Government adopted the Public Sector Reform Programme in June 2013. This Programme set out three groups of measures: 1) reduction of discretionary budget spending and establishment of new rules for the planning of the 2014 wage bill and pensions, 2) additional savings across the public sector, 3) continuation of structural reforms, particularly completion of the restructuring process in the former socially-owned enterprises, as well as streamlining in public enterprises and public for-profit corporations.

Year-on-year inflation dropped from 7.8% in late 2013 to 2.9% in late 2014 and to 1.9% in late 2015. Thus, the inflation remains below the target inflation tolerance band (4% ± 1.5%).

#### Macroeconomic trends

2010	2011	2012	2013	2014	2015					
GDP, EUR bn		29.8	33.4	31.7	34.3	33.3	33.1			
GDP, per capita, EUR			4,082	4,619	4,400	4,781	4,672	–		
GDP, real growth in %			0.6	1.4	-1.0	2.6	-1.8	0.8		
Inflation (CPI), %/y-1			6.5	11.0	7.8	7.8	2.9	1.9		
RSD/EUR exchange rate, period average						103.0	102.0	113.1	113.1	117.3
Current account deficit, % GDP						-6.8	-10.9	-11.6	-6.1	-6.0
Foreign direct investments, net % GDP						3.8	9.9	2.4	3.8	3.7
NBS reserves, EUR bn			10.0	12.1	10.9	11.2	9.9	10.4		
Consolidated fiscal deficit, % GDP						4.6	4.8	6.8	5.5	6.6
Public debt, % GDP			41.8	45.4	56.2	59.6	70.4	75.5		

Source: Ministry of Finance, updated on 24 February 2016, NBS, updated on 19 February 2016.

1. Brief **description of the social, economic and political situation**, which may help to understand the context in which ageing-related issues are dealt with in your country.

## Overall Social Context

As at 1 January 2015, the population of the Republic of Serbia totalled 7,114,393. In demographic terms, Serbia is characterised by a strong depopulation trend (in the period 2002-2012, the Republic of Serbia lost 301,000 people), low fertility[10], relatively high specific mortality rates (compared to European values), high average population age (42.2 years, according to the 2011 Population Census data) and an unfavourable age structure. The year 2014 was the twenty-third consecutive year of negative natural growth in Serbia. In relative terms, the natural growth rate per one thousand people stood at -4.9‰. The true proportions of negative population growth are evident at the local government level. In 2014, negative natural growth rates were recorded in as many as 165 cities and municipalities out of the total of 172.

Despite the fact that the trend of increasing life expectancy at birth has continued, reaching the historic maximum of 75.14 years, life span in the Republic of Serbia is five years shorter than that in the EU. In 2011, the old age dependency ratio stood at 25.5%, with projections of reaching 36.3% in 2041.

Rough estimates indicate the net migration loss of approximately 15,000 people per year in the period 2009-2011[12]. In 2011, about 227,000 internally displaced persons from AP Kosovo and Metohia were still registered in the Republic of Serbia, ranking Serbia 15th in the world and the first in Europe by the number of internally displaced persons.

Living standards further declined in 2015. The real net wages in 2015 declined by -2.1% and pensions by 5.2% relative to 2014. In absolute terms, the average net wage in 2015 amounted to EUR 368, and the average pension – EUR 188.

Despite the positive signals of the labour force surveys conducted in 2013, 2014 and 2015, improvements in the labour market remain weak.

### Key labour market indicators 2008-2015 (working-age population 15-64)

	2008.	2009.	2010.	2011.	2012.	2013.	2014.	2015.			
	Total	Women	Total	Women	Total	Women	Total	Women	Total	Women	Total
Activity rate	62,7	54,4	60,6	52,8	59	50,8	59,4	50,7	60,1	51,2	61,6
	53,261,7	53,8	63,4	55,5							
Employment rate	53,7	45,3	50,4	43	47,2	40,1	45,4	38,3	45,3	38,1	
	47,540,1	49,6	42,8	51,7	44,7						
Unemployment rate	14,4	16,7	16,9	18,6	20,0	21,0	23,6	24,3	24,6	25,6	
	23,024,6	19,7	20,4	18,5	19,5						

Source: LFS respective years, SORS

Poverty remained significant, both expressed in absolute terms (the share of people whose consumption is below the threshold required to meet the basic needs – 8.9% in 2014[15]) and in relative terms (the share of people at risk of poverty stood at 25.6% in 2014). Regardless of the methodological concept applied, the profile of the poor does not differ significantly according to the concept of absolute poverty or relative poverty. Judging by the profile of the poor, the living standard is decisively influenced by the following elements: employment status, education attainment, household size and type (households consisting

of a single parent with several children are particularly vulnerable) and residence outside urban areas.

The at-risk-of-poverty-or-social-exclusion (AROPE) rate, the key monitoring indicator for the Europe 2020 strategy, stood at 41.3% in Serbia in 2015; according to the most recent available data comparable with the EU Member States, this is among the highest values.

The at-risk-of-poverty rate by the most frequent activity status (held for more than six months) shows that the unemployed are in the worst situation (48.7% or almost one out of two unemployed people is at risk of poverty). Employment reduces the risk of poverty considerably, but the quality of employment remains the key factor for exiting poverty (the self-employed have a significantly higher at-risk-of-poverty rate than those in dependent employment – 38.3% and 6.4% respectively). After those in dependent employment, pensioners are in the most favourable position, with the risk of poverty approximately equal to that of total employed people (14.5% compared to 14.9%). Education is a decisive factor for the economic status and the income-generating capacity; it is, therefore, not surprising that people with lower education attainment levels are at an above-average risk of poverty. In 2013, the highest at-risk-of-poverty rate was recorded among the population with primary education and below (41.8%), while the population with college or university education had the lowest at-risk-of-poverty rate (7.1%). This distribution of the population at risk of poverty by educational attainment level clearly indicates that education is worthwhile, given that the highly educated are rewarded in the labour market.

Even though consumption inequality measured by the Household Budget Survey (HBS) indicates that Serbia can be classified among countries with an even distribution (the Gini coefficient stood at 0.26[19] in 2014), the values obtained through a comparable methodology (SILC) point to a highly pronounced problem of income distribution inequality (Gini 0.38). Part of the explanation can certainly be found in the fact that the share of goods and services produced for own consumption is high among the households from lower quintiles (over 12% of their total consumption), and that, according to the SILC methodology, this income is not assessed or included in the total income. In order to address this issue appropriately, further in-depth research will be necessary.

Income distribution inequality measured by another indicator – income quintile share ratio – stood at 9.0, which means that in 2014 the equalised income of the richest 20% in the Republic of Serbia was 9 times higher than that of the poorest 20%. The value of this indicator measured in recent years was substantially higher than the average for the 28 EU Member States (about 5) and also higher than the highest value recorded in individual Member States.

## **EVALUATION RESULTS OF THE NATIONAL STRATEGY ON AGEING**

It is agreed by the evaluators of the implementation of the National Strategy on Ageing that most visible is the advancement achieved regarding residential social care. The capacities of social residential care institutions have been partially increased in the areas where there used to be none (which has been a specific strategic objective), while in parallel a number of the other reform of social welfare objectives have been achieved in these institutions in public sector. There are more different community-based services for older persons who live in institutional environment. As a result, the contact with older persons in residential care has been improved. As for public sector, structural conditions for placement in homes have also been improved, as well as functional aspects of residential care, spurred by the introduction of the standard of services and licensing of service providers, both the

institutions and front desk social work practitioners.

Other achievements include greater accommodation capacity (i.e. opening the private residential institutions), making conditions in an institution more humane regarding the respect for basic human rights of the beneficiary (more comfortable placement, enhanced and standardized services), strengthening of the role and importance of rehabilitation (greater range of rehabilitation services), as well as all the types of day activities for the beneficiary (more leisure and programmed activities), further progress of the process of deinstitutionalization (development of a set of services intended for older persons in their environment and strengthening the contact with an environment where an institutions is located).

The first institution of social care the operation of which has been licensed is the Belgrade Gerontological Centre.

-Inclusion in community life is confirmed through very alive self-organised activities of older persons' clubs members, which are of huge importance for degree of integration of older persons and as a daily support, public discussions and round tables are organised for lobbying and influencing decision making in local community, municipalities and towns. These activities also include media coverage, which highlights the positive image of older persons as active and interested community members.

However, integration of older persons into community is significantly higher in urban areas than it is the case in rural environment. There is a difference in the level of integration in community between relatively isolated older persons, who live in the conditions under or around the poverty threshold, and comparing to the older persons living in somewhat better financial, housing and family conditions and who are more involved in local community and some kind of decision-making within the community. One of the reasons for these differences and their increase is insufficient geographical coverage and targeting both older population in rural areas and poor older people in general with social and other services

-Older persons are one of the groups in population structure who are members of some association of citizens more frequently than it is the case with average population. The most frequent ones with the largest number of members are the Associations of Pensioners of the Republic of Serbia, which have its units at local level. Participation of volunteering work among older persons is not sufficient, comparing to the existing resources, but volunteering work among older persons exist and it has positive effects, first of all due to individuals' enthusiasm.

-A good practice example of NSA implementation is establishment of a portal "Penzin" [www.penzin.rs](http://www.penzin.rs), which plays an important role in providing older citizens with information on the matters related to exercising of their rights, as well as on conditions for resolution of everyday needs. Launching of this portal largely contributed to enhancement of social inclusion of older persons in Serbia, although other sources of information must not be ignored (sites of ministries, institutions of social and health care, humanitarian and non-governmental organisations, etc.).

-"The Third Age Movement", which has been operational in the territory of the Republic of Serbia and Belgrade for several years, gathers a large number of older persons around the concept of active ageing, sport and recreational, but also educational activities. Once a year, in honour of the 1 October, International Day of Older Persons, events such as "Olympic Games of Sport, Health and Culture", competitions and gatherings are organised, and number of participants is increasing every year.

The older citizens of Belgrade are associates in around fifteen humanitarian and non-governmental organisations gathered in network "Humanas", which works for older people

and with older fellow citizens. There are around thousand older volunteers in the Red Cross organisation and volunteering work is an integral part of other non-governmental organisations like: "Amity", "Bread of life", „Caritas“, etc.

-In the last several years, in majority of municipalities and cities, the 1 October – International Day of Older Persons has been marked with programmes suitable for older persons (lecturing, preventive medicine services, and recreational, cultural and artistic programmes).

-Development of services for older persons has lead to the establishment of a number of new services such as psycho-social counselling in family.

-It would be better for the old persons clubs which under the law are not treated as community based day care to rather be classified under the legal framework and identified as a form of support for elderly, or a service for older persons.

-Social pensions have not been introduced although they were envisaged under several national action plans. It would have amount to an introduction of the so called zero pension pillar, but only for the old persons in financial risk who have reached third age and do not have regular income in the form of contributory pension and who are living in hardship. Social pensions have not been introduced for financial reasons.

- *The Regulation on Earmarked Transfers* adopted in March 2016 enabled transfer of the state budget allocations to local governments intended for the establishment and development of various services for older persons (house help, day care, etc.).

In a number of local self-governments, the families to which older persons belong provide the following services: one-off cash assistance, benefit in-kind, house help and older persons club. In addition, one- third of municipalities and cities provide day care services, soup-kitchen meals for the poor, subsidies to manage utility price and costs, subsidized public transport costs, co-payment for medicines.

Relief and exemption from certain costs that older citizens (65+) and older poor people have to bear (from utilities to public transport costs) have been in place in most municipalities and cities across Serbia, and in particular in Belgrade. Under the City authority decision on social protection for citizens, the older poor recipients of regular cash assistance are provided by the Belgrade City Authorities with 1/5 increase on the given amount, free of charge transport for population 65+, and certain other services granted in Belgrade, including: access to libraries, entry tickets for certain events at a discounted price, etc. Soup kitchens are funded in Belgrade and in all larger urban centres across Serbia.

Early in 2011, to enhance access to primarily social and health institutions, a separate contact centre was launched by the Gerontological Centre for Older Persons in Belgrade, with the purpose to provide information old people might need regarding social care, health care, pension and disability insurance, culture, education, banking at local level, utility and other services, counselling services, crisis support etc. The number is easy to memorize and calls are free of charge (0800 115 116, [infocentar@ugcb.rs](mailto:infocentar@ugcb.rs)).

**The population of Serbia is considerably old according to all the demographic criteria.** The average age of the population is above 40. Demographic ageing is a consequence of both longer living age and reduced birth rate and also mobility of population (wars, economic, political and social crisis in 1990s). According to 2011 Census, in Serbia there is 1.250.000 persons, or 17,4% population older than 65 which is an average recorded in the EU in 2010, and is higher than in most EU Members. The ageing process will likely continue, and will intensify.

Taking the scope and frequency of services in Serbia, systematizing of the data and absence of networking of relevant data bases are among the major challenges that need to be overcome. Currently, numbers and types of social care services provided at local level

(by government and non-government actors) directly depend on timeliness of data collection by local level and regular forwarding of the data to Republic Institute for Social Protection which has capacities to maintain a unified data base. However, such cooperation is not on the remarkable level, given that reporting mechanisms are missing. Social care institutions (centres for social work and residential care) are legally bound to report annually to the competent ministry about their activity and operation. However, only in cooperation with local self-governments, social care institutions and civil society organisations, and with their readiness to regularly submit data on all the changes in this field, the regularly updated data base is possible to establish on local social services.

Only few old persons have been provided with the service of foster care offered under the social care system (contrary to foster care for children where we have managed to achieve the significant success and performance, acknowledged by the UNICEF). According to the Social Welfare Law, placement in residential care is provided for older persons who are not in a position to live in family or cannot obtain community-based services and foster care (Art. 52). Residential care is provided by social care institutions established by the Republic of Serbia, and Autonomous Province of Vojvodina, in compliance with the Regulation on the Network of Social Care Institutions, and the service providers may be non-governmental organisations as well.

When the process of licensing of all welfare service providers in Serbia is complete, it is expected that a complete data base on social services will be set up which will include all the service providers both in public and private as well as civil sector, which will give a complete picture of the number of services provided across Serbia.

Capacities of public sector institutions under the overall social welfare system which are intended for older residents are all operational locally at the level of 140 centres for social work, 37 gerontological centres and retirement homes.

	2015
Number of beds in residential institutions for older persons in Government sector	9.059 <sup>1</sup>

*Data source: Decision/Regulation on the network of social protection institutes ("Official Gazette of the RS, no. 16/12 and 12/13)*

In 2016, a new residential facility for persons on palliative care treatment was opened in Gerontology Centre Subotica. The facility is of 760 square metres, and 66 users will be placed in it. It is being equipped.

The cases of older persons who have been exposed to some kind of violence have been regularly recorded, within the social care system, in compliance with the Family Law. The data of the Republic Institute for Social Protection, in 2015, shows that 2,272 cases of violence against older persons, who have been provided with a social service, have been registered in Social Welfare Centres.

In 11 years of the social protection inspection existence, 74 homes for older persons were closed, in total, and only in second half of 2014 and in 2015, 37 homes for older persons were closed (33 illegal homes were closed and four homes who had work permit).

<p><b>Foreign adult citizens/persons without citizenship registered in SWC in 2015 by age and type of service they were provided with from the Social Care system</b></p>
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<sup>1</sup>Around 5,000 beds in private homes for older persons should be added to this number

Services and measures	Age structure			
	Youth	Adults	Older	Total
Number of foreign adult citizens in family care	0	0	0	0
Number of foreign adult citizens in residential care	0	1	0	1
Number of adults in reception centres	6	8	5	19
Number of adults with temporary foster care	0	1	1	2
Number of adults who received lump-sum financial assistance	12	40	2	54

Source: Republic Institute for Social Protection

Number of adult users of accommodation registered in SWC (the ones who are taken over and new users) in 2015, by type of accommodation, age and sex of users								
Accommodation type	Youth		Adults		Older		Total	
	M	F	M	F	M	F	M	F
Family care to kinship foster family	100	136	69	59	32	56	201	251
Family care to another family	272	328	240	201	117	222	629	751
Residential care	376	280	3382	2925	3675	6248	7432	9453
Care/accommodation into a small home community	4	1	11	13	1	5	16	19
<b>Total by sex</b>	752	745	3702	3198	3825	6531	8279	10474
<b>TOTAL</b>	<b>1497</b>		<b>6900</b>		<b>10356</b>		<b>18753</b>	

Source: Republic Institute for Social Protection

Number of adult users registered in SWC who, during 2015, used accommodation services in reception centre by age and sex of users								
Accommodation type	Youth		Adults		Elderly		Total	
	M	F	M	F	M	F	M	F
Reception Centre	27	42	332	307	131	154	490	503
<b>УКУПНО</b>	<b>69</b>		<b>639</b>		<b>285</b>		<b>993</b>	

Source: Republic Institute for Social Protection

Number of users who were, in 2015, directed to community for usage of daily services					
Service type	Users age				TOTAL
	Children	Youth	Adults	Elderly	
Daily stay for children and youth with developmental disorders	552	475	0	0	1027
Daily stay for children and youth with physical disabilities	32	19	0	0	51

Daily stay for children and youth with behavioural problems	144	60	0	0	204
Daily stay for adults with disabilities	0	0	401	1	402
Daily stay for older persons	0	0	0	1511	1511
Help at home for children and youth with developmental difficulties and disabilities	180	50	0	0	230
Help at home for older persons and adults	0	0	1380	9018	10398
Shelter for street children	55	0	0	0	55
Shelter for adults and older persons	0	0	7	0	7
Child Personal Escort	460	0	0	0	460
Other services supporting the users' stay in family and immediate surroundings	154	25	227	632	1038

Source: Republic Institute for Social Protection

<b>Number of users who were, in 2015, directed to usage of support services for independent life</b>				
<b>Service type</b>	<b>Users age</b>			<b>TOTAL</b>
	<b>Children and Youth</b>	<b>Adults</b>	<b>Older persons</b>	
Supported housing for youth who are becoming independent	54	0	0	54
Supported housing for persons with disabilities	3	5	0	8
Personal assistance	92	61	29	182
Other types of support necessary for active participation of users in society	210	208	87	505
<b>TOTAL</b>	359	274	116	749

Source: Republic Institute for Social Protection

<b>Number of users who were, in 2015, directed to usage of counselling therapeutic and social educational services, implemented outside of SWC or in a special unit of SWC</b>					
<b>Service type</b>	<b>Users age</b>				<b>TOTAL</b>
	<b>Children</b>	<b>Youth</b>	<b>Adults</b>	<b>Elderly</b>	
Family therapy	563	675	4153	215	5606
Mediation	167	64	264	35	530
Other counselling and educational services and activities	1672	668	2825	470	5635
<b>TOTAL</b>	2402	1407	7242	720	11771

Source: Republic Institute for Social Protection

**Number of users of residential care services provided by the SWC by funding source in 2015**

Service type	Number of users by funding source					
	From local self-government budget	National budget	User pays full service price	User participates in price	Other funding sources	TOTAL
Residential care for children and youth	2	122	5	24	11	<b>164</b>
Residential care for adults and elderly	3	928	362	746	111	<b>2150</b>
Small home community for children and youth	0	13	0	0	0	<b>13</b>
Small home community for adults and elderly	0	1	0	0	0	<b>1</b>
Time out accommodation	18	0	0	0	0	<b>18</b>
Shelter	397	0	0	0	0	<b>397</b>
Other types of accommodation	445	134	19	128	5	<b>731</b>
<b>TOTAL</b>	865	1198	386	898	127	<b>3474</b>

Source: Republic Institute for Social Protection

**Number of domestic and partner violence reports in 2015 by family type and victims age (based on internal SWC team data)**

Family type	Number of violence victims by age				
	Children	Youth	Adults	Elderly	Total
Biological families	6411	1428	8162	2204	18205
Adoptive families	1	0	1	0	2
Foster families (kinship and other foster families)	12	2	0	0	14
Other families	95	58	301	68	522
<b>TOTAL</b>	6519	1488	8464	2272	18743

Source: Republic Institute for Social Protection

**Number of domestic violence reports in 2015 (on the basis of internal SWC team data) by dominant type of violence, age and sex of violence victims**

Dominant type	Violence victim age
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of violence	Children		Youth		Adults		Older persons		TOTAL
	M	F	M	F	M	F	M	F	
Physical violence	926	846	219	576	705	4374	338	724	8708
Sexual violence	20	95	2	26	5	58	2	12	220
Psychic violence	712	789	134	355	614	2326	228	503	5661
Neglect	1457	1433	39	71	46	123	108	212	3489
Economic violence	19	26	26	24	34	102	34	51	316
Other	110	87	7	10	31	44	26	37	352
<b>TOTAL</b>	<b>3244</b>	<b>3276</b>	<b>427</b>	<b>1062</b>	<b>1435</b>	<b>7027</b>	<b>736</b>	<b>1539</b>	<b>18746</b>

Source: Republic Institute for Social Protection

<b>Procedures conducted by the SWC in 2015 in cases of protection of adult victims of domestic violence</b>									
Procedures types	Users age								
	Youth		Adults		Elderly		Total		
	M	F	M	F	M	F	M	F	
Separation of violence victim from family	11	39	19	442	11	55	41	536	
Initiation of procedures in front of the court	9	31	17	266	8	60	34	357	
Provision of financial, legal or professional counselling support to violence victim in SWC	186	1082	678	4440	303	890	1167	6412	
Directing of violence victim to services of other appropriate institutions	32	113	142	863	70	205	244	1181	
Miscellaneous	36	73	47	128	19	50	102	251	
<b>TOTAL by sex</b>	<b>274</b>	<b>1338</b>	<b>903</b>	<b>6139</b>	<b>411</b>	<b>1260</b>	<b>1588</b>	<b>8737</b>	
<b>TOTAL</b>	<b>1612</b>		<b>7042</b>		<b>1671</b>		<b>10325</b>		

Source: Republic Institute for Social Protection

<b>Structure of residential care users by age and sex in 2015</b>						
Age	Male		Female		Total	
	Total in 2015	Number on 31.12.2015.	Total in 2015	Number on 31.12.2015.	Total in 2015	Number on 31.12.2015.
Up to 50 (adults)	176	139	134	113	310	252
51 – 64 (adults)	852	702	644	561	1496	1263
65 - 70 (elderly)	678	504	773	621	1451	1125
71 – 79(elderly)	1187	833	2054	1546	3241	2379

80– 89 (elderly)	1262	812	2877	1823	4139	2635
Over 90 (elderly)	212	117	523	331	735	448
<b>TOTAL</b>	4367	3107	7005	4995	11372	8102

Source: Republic Institute for Social Protection

<b>Users according to pension status, number on 31.12.2015.</b>							
Pension status	Adults			Elderly			Total
	M	F	Total	M	F	Total	
Personal pensioner	64	71	135	1219	1425	2644	2779
Disability pensioner	235	147	382	318	389	707	1089
Family pensioner	91	149	240	91	1424	1515	1755
Agricultural pensioner	8	19	27	122	250	372	399
Dependable person –he/she is not a pensioner	398	299	697	519	752	1271	1968
Miscellaneous	17	17	34	26	52	78	112
<b>TOTAL</b>	813	702	1515	2295	4292	6587	8102

Source: Republic Institute for Social Protection

<b>Users by the place of residence prior to residential care</b>						
Users' residence	Total number in 2015			Number on 31.12.2015.		
	M	F	Total	M	F	Total
From the district where the institution is placed	3202	5235	8437	2236	3727	5963
Out of district in which the institution is placed	1165	1770	2935	871	1268	2139
<b>TOTAL</b>	4367	7005	11372	3107	4995	8102

Source: Republic Institute for Social Protection

<b>Users by the registration of residence address on 31.12.2015.</b>	<b>Number</b>
Registered to institution address	792

Source: Republic Institute for Social Protection

<b>Users by the reason of placement into institution (only one dominant reason needs to be mentioned), total number in 2015</b>							
Reason for placement	Age structure, total number in 2015						Total
	Up to 79			80 and over			
	M	F	Total	M	F	Total	

User does not have close relatives children, marital/non-marital partner	391	460	851	163	408	571	1422
Users' family is not ready / does not have conditions to take care of him/her	446	590	1036	198	474	672	1708
Difficulties in organising everyday life due to old age and illness	1132	1677	2809	713	1779	2492	5301
Domestic violence	27	60	87	7	52	59	146
Social and financial vulnerability of family (and users)	439	394	833	99	194	293	1126
Personal choice of users	383	393	776	267	419	686	1462
Other	77	56	133	26	48	74	207
<b>TOTAL</b>	<b>2895</b>	<b>3630</b>	<b>6525</b>	<b>1473</b>	<b>3374</b>	<b>4847</b>	<b>11372</b>

Source: Republic Institute for Social Protection

<b>Users by the method of accommodation payment (on 31.12.2015.)</b>			
Accommodation payment	M	F	Total
User pays the whole amount	468	443	911
User + relatives	801	1786	2587
Relatives – full amount	225	541	766
User + budget	677	1221	1898
Budget entirely	857	875	1732
Provider of support (Lifelong Support Contract)	11	27	38
Other (mention what in narrative manner...)	68	102	170
<b>TOTAL</b>	<b>3107</b>	<b>4995</b>	<b>8102</b>

Source: Republic Institute for Social Protection

<b>Number of users for whom plan of service was developed in 2015</b>	
Age	Number
Adults	1214
Elderly, 65- 79	3461
Elderly, 80 and over	3562
<b>TOTAL</b>	<b>8237</b>

Source: Republic Institute for Social Protection

<b>Number of complaints registered by institution internal team concerning the violence against users in 2015</b>

Victim age	Number of reports/complaints
Adults	4
Elderly, 65- 79	21
Elderly, 80 and over	4
<b>Total</b>	<b>29</b>

Source: Republic Institute for Social Protection

**Users, violence victims, by the type of violence they were exposed to in the Institution in 2015**

Dominant form of violence	Up to 64		65-79		80 and over		Total		Total
	M	F	M	F	M	F	M	F	
Physical abuse	2	0	16	1	1	1	19	2	21
Sexual abuse	0	0	0	0	0	0	0	0	0
Emotional abuse	0	0	0	1	0	1	0	2	2
Neglect and indolent behaviour	0	0	0	0	0	0	0	0	0
Exploitation	0	0	0	0	0	0	0	0	0
Something else	0	1	0	0	0	0	0	1	1
<b>Total by sex</b>	<b>2</b>	<b>1</b>	<b>16</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>19</b>	<b>5</b>	<b>24</b>
<b>TOTAL</b>	<b>3</b>		<b>18</b>		<b>3</b>		<b>24</b>		

Source: Republic Institute for Social Protection

**Structure of users by the type of “designated bully” in 2015**

Designated bully	Young person (18-25)		Adult (26-64)		Older person (65+)		Total	
	M	F	M	F	M	F	M	F
Employee	0	0	0	0	0	0	0	0
Other user	0	0	3	1	16	3	19	4
Persons out of the institution	0	0	0	0	0	0	0	0
Somebody else	0	0	0	0	0	0	0	0
<b>Total by sex</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>1</b>	<b>16</b>	<b>3</b>	<b>19</b>	<b>4</b>
<b>TOTAL</b>	<b>0</b>		<b>4</b>		<b>19</b>		<b>23</b>	

Source: Republic Institute for Social Protection

**PLACEMENT IN SOCIAL CARE INSTITUTIONS (Information system of MOLEVSA)  
July 2016**

Category	Number of persons	Total funds	Budget funds
Homes for children and youth:	629	20.949.925,00	19.866.103,05
<b>Home for adults and older persons:</b>	<b>7.673</b>	<b>274.990.782,00</b>	<b>93.709.179,58</b>
Homes for persons with developmental disorder:	5.197	165.592.921,00	109.334.726,25
<b>TOTAL :</b>	<b>13.499</b>	<b>461.533.628,00</b>	<b>222.910.008,88</b>

## ACCOMPLISHMENT OF VIENNA DECLARATION OBJECTIVES

### Goal 2: Participation, non-discrimination and social inclusion of older persons are promoted

#### Human Rights and non-discrimination

In 2012 four HumanaS network members (the Red Cross of Serbia, Amity, Victoria and Pensioner Association) participated in creation of Strategy for Protection and Prevention Against Discrimination and Amity lead the thematic working group for older people. The following year Amity also participated in the creation of the related Plan of Action.

In 2012 Amity campaigned for age sensitive budgeting at national level in Serbia. In 2013 the Association monitored the work of 15 private and 5 public institutions for residential care of adult and older persons and provided a set of recommendations to improve legislation and define standards for protection of beneficiaries' human rights. Amity provided a series of training seminars in eight Serbian cities on More Efficient Prevention of Dementia and Care for Older People Living with Dementia in 2013. Since 2014 the Association is a member of the Working Group of the National Convent of Serbia on the European Union for Chapter 19 (social policy and employment) where it advocates for better management of institutions of residential care to improve the quality of life of older people. In 2014 Amity also started a campaign "For more consistent protection of older people's human rights". The campaign was finalised in 2015 and it included: two workshops on intergenerational solidarity (96 participants); one workshop for 40 older people on recognising older people's human rights and reacting to their breaches; two workshops for 54 healthcare and social welfare professionals on improving the protection of older people in practice; production of a documentary film on human rights of older people that was broadcasted on nine regional televisions in Serbia; creation of a Guide on Human Rights of Older People focusing on family law, social protection and healthcare – the guide was printed and distributed in 47 underdeveloped municipalities of Serbia.

In 2015 and 2016 Amity provided comments to the EU Delegation report on Serbia focusing on the rights of older people.

In 2016 Association Amity organised: six forums for 200 older people on topic: "Discriminatory behaviour towards older people and strengthening older people to react"; three workshops for 174 professionals from public institutions on topic: "What are

discriminatory behaviours towards older people and how to prevent them". The same year the Association organised five education courses (one accredited) for 309 professionals on covering a plethora of topics related to human rights of older people in residential care, discrimination of older people, elder abuse as well as the quality of services in residential care.

As part of the 2013-2015 project "Improving access to human rights of older people in the Republic of Serbia" that the Red Cross of Serbia implemented in partnership with HelpAge International from the UK with financial support by the European Union delegation in Serbia, the Red Cross organised interactive workshops for older people on human rights with examples of exercising one's rights or of situations where access to rights is reduced and there is a need to improve it. These workshops were designed as training of trainers: the older people, members of self-help groups formed in the same project attended the training sessions and were subsequently tasked with educating older people in their communities on the same topic, to encourage older people to recognize when their human rights are not accessible, to access the institutions of the system and ensure free exercise of their rights. All 572 members of self-help groups were included in this training and with another 89 young Red Cross of Serbia volunteers also attending the training sessions, the total number of directly educated persons is 661. These educated trainers then organized 96 local level education sessions and reached 1992 older persons. During the two years of the implementation of project, the self-help groups' members have helped or assisted persons in their local communities to access their legally granted rights: assistance with accessing human rights related to health protection was provided to 997 older persons through members of self-help groups; assistance with accessing human rights related to social protection was provided to 221 older persons through members of self-help groups; assistance with accessing the rights related to pension and disability insurance was provided to 87 older persons. Advocacy was one of the crucial activities of self-help groups and here are some of the notable actions: petition for re-establishing a library, petition to erect a soundproofing railway fence, fixing the pavements, fixing the public drinking fountain, installation of a speed bump... The members of self-help groups, older persons made their requests to local governments in most cases but in some cases they addressed even the ministries.

In 2015 the Commissioner for Protection of Equality and the Commission for Human and Minority Rights and Gender Equality of the National assembly of the Republic of Serbia organised a public hearing "Ageing – from privilege to discrimination" for the members of the assembly. A Red Cross of Serbia representative presented Global Age Watch Index.

15 June, World Elder Abuse Awareness Day has been regularly marked by civil sector in Serbia ever since 2007 following the Red Cross of Serbia initiative. Since 2011, the United Nations General Assembly has included this date in the official UN calendar and since 2012, the marking of this date in Serbia is a joint effort spearheaded by the Red Cross and civil society and joint by representatives of public institutions, academia and independent public bodies.

The Red Cross of Serbia also coordinates Age Demands Action campaign activities in Serbia where every year at specific dates (World Health Day, World Elder Abuse Awareness Day, International Day of Older Persons) a delegation of older people visits national-level decision and policy makers and discusses important topics while at municipal level similar delegations visit local decision makers to talk on the same topic. Regularly up to 100 branches of the Red Cross of Serbia organise public events and meetings of older people with local decision makers to mark the Age Demands Action, an international initiative globally coordinated by HelpAge International in 60 countries. In 2013, the campaign included a public exhibition of photographs of older active people in the main street of the Belgrade's pedestrian area, focusing on multiculturalism, diversity, activism, freedom of

spirit, covering rural and urban settings as well as people living in institutions and at home. Approximately 10,000 people per day saw the photo exhibition. The exhibition lasted for 2 weeks.

## **Lifelong Learning**

The project „Golden Age “was implemented by Adult Education Society in 2012 in the following Serbian municipalities: Belgrade, Backa Palanka, Novi Sad, Uzice, Leskovac and Bor. Its objective was to reduce discrimination of older people and improve their active participation and inclusion in public life. The activities encompassed workshops for older people as well as intergenerational workshops, IT education for older people, distribution of printed materials on intergenerational solidarity and active ageing, training for care providers on prevention of elder abuse, workshops with local level social partners on social inclusion of older people, collecting and publishing national examples of good practice in reducing discrimination and social inclusion.

Regional Andragogic Academy was a three day event in 2012 for 25 experts from the region discussing education of older people.

Adults Learning Festival in 2012 promoted the lifelong learning concept through panel discussions and a thematic stage play and is summarised in a video-feature “Testimonies on Learning”.

EU-supported project BeLL – benefits of Lifelong Learning in 2013 included a research on benefits of learning at the adult age.

Adults Learning Festival in 2013 continued promoting lifelong learning and included a public campaign of collecting testimonials on learning, producing a multimedia package “Allow me to Teach You”, featured on the newly created webpage of the Adults Learning festival.

Adults Learning Festival in 2014 was organised in four Serbian cities: Belgrade, Bor, Kragujevac, Backa Palanka as a seven-day event. It included a public campaign “New Year’s gift to my city – Learning City”, as well as public interactive events focusing on ideas and good practices as well as promoting the existing places for learning in the community and creating new initiatives for learning in the community.

An internet portal was created in 2015 to promote non-commercial initiatives and opportunities for learning. It especially focuses on marginalised groups among adults and has a database of more than 1800 providers of education services in Serbia

Adults Learning Festival in 2015 was an activity that spanned several months including activities such as networking and educating a group of organisations important for community learning in order to strengthen their capacities and improve their sustainability. At the same time, testimonials on learning in the community were collected from adults and compiled as video-package. At the one day event in Belgrade, the organisations were presented to the public alongside the “Centre for Community learning” concept of non-commercial educational initiative relying on support of gerontology centres and the Red Cross.

## **Scientific work and research**

In 2012 the Red Cross of Serbia and Commissioner for Protection of Equality organised a research on elder abuse in the family context and published the report “Elder abuse: A study of Domestic Abuse”, as part of the EU-supported project also supported by Age UK. In 2013 the Red Cross did a research with HelpAge International and UNFPA support as part of the international research in 15 countries. The publication with the results was produced by UNFPA and it is entitled “Ageing in the 21<sup>st</sup> Century”. In 2015 the Red Cross of Serbia and Commissioner for Protection of Equality organised a research on financial abuse of older

people and published the report “Introduction to Ageing and Human Rights of Older People: Pilot Research Study on Financial Abuse of Older People”. This was a part of the project implemented by the Red Cross of Serbia in partnership with HelpAge International from the UK and supported by the European Union. The same year the Red Cross of Serbia and Commissioner for Protection of Equality also organised a research on elder abuse and published the report “Well-kept Family Secret: Abuse of Older People”, supported by UNFPA. In 2016 the Red Cross of Serbia and Commissioner for Protection of Equality, again with UNFPA support organised a research into the quality of life of older people in rural areas, covering rural areas of twelve developed and underdeveloped municipalities. The published report “Older People in Rural Areas” includes recommendations related to safety, services, social inclusion and a number of other topics.

Gerontological Society of Serbia has a regular schedule of annual events: scientific conferences (topics in recent years: Ageing and Quality of Life: Transition and EU Accession; Contemporary Challenges in Social Work; Physical Activity and Healthy Ageing), conferences for stakeholders (topics in recent years: Young People’s Attitude to Ageing and Older People; Social protection for Older People; Ageing and Older People in the Media; Active Ageing: Improving the Quality of Life for Blind and Visually Impaired Older People), panel discussions (topics in recent years: Optimal Network of Services for Senior Citizens – Needs and Capacities; Education as a vehicle to Employment and Active Ageing) as well as education seminars (topics in recent years: Improving Competences of Geronto Services Professionals; Loneliness of Older People in Bigger Cities as a Social and Psychological Issue; Exploring the Influence of Media reporting on Public Perception and Attitudes of Older People in Serbia; Socialisation as Psychosocial Support for Older People) The Society also publishes a scientific journal Gerontology – two issues per year – as well as bulletins and monographs (e.g. Contribution to Psychology of Ageing and Older Age), Edited Volumes (Public, Older People and the Media) and brochures.

Since 2010 the Society organises annual ten days long series of lectures on gerontology and geriatrics involving scientists as well as representatives of national and local level administration and the civil sector. It also maintains a Student Gerontology Section, a member of the IAGG – Council of Student Organisations.

Association Amity organised several researches in the reporting period: Analysis of the Implementation of the Law on Social protection; Research on Long-Term Care for Older People in Serbia; Research on the Needs for Day Care centre for People Living with Dementia in Belgrade; Cost-benefit Analysis of Home Based Services for Older People. In 2013 Amity also provided a series of training seminars in eight Serbian cities on More Efficient Prevention of Dementia and Care for Older People Living with Dementia.

In 2012 Philanthropy, the charitable foundation of the Serbian Orthodox Church participated in a research on older people in rural areas in south-western and south-eastern Serbia looking into their needs for social protection as well as the risk of poverty.

### **Goal 3: Dignity, health and independence in older age are promoted and safeguarded**

#### **Services**

Services can be grouped in two large groups: those provided under a licence from the Ministry of Labour, Employment, Veteran and Social Policy through work of gerontocarers and those implemented through the work of volunteers providing home based care and assistance. All these services contribute to meeting the rising needs of older people and help them stay in their homes for as long as possible, delaying the need for residential care. Providing services licensed by the Ministry through gerontocarers trained through an accredited curriculum is a way to ensure safe delivery as well as standardise the contents

on offer and increase the satisfaction of beneficiaries.

The Association for Support and Inclusion Help Net is a licensed services provider and it provided home based services to older people in 2015 and 2016 through projects supported by the Ministry of Labour, Employment, Veteran and Social Policy. The services were provided at the territory of Savski Venac municipality, reaching respectively 24 and 30 older people, living alone or in elderly households. The gerontocarers worked on maintaining the household and clothes hygiene, prepared food, assisted with doctor visits and with purchases of necessary goods.

Philanthropy, the charitable foundation of the Serbian Orthodox Church provides home based services for older, chronically ill persons in Kragujevac. The project activities amount to 100 working hours per month through the work of licensed gerontocarers, in partnership with the Centre for Social Welfare and funded by the Kragujevac City Hall.

Association Viktorija worked in Kragujevac providing services through gerontocarers, mobile services for older people in rural areas, helping organise and maintain self-help groups for older people and supporting older people in volunteering. Since 2015 they also provide community based palliative care services and organise panel discussions on palliative care. Their activities were on a steady rise reaching 220 beneficiaries in 2012 and 1000 in 2016.

Christian Humanitarian Association Bread of Life provides home based services delivered by volunteers to approximately 100 older vulnerable persons in Belgrade. These services include assistance with household hygiene and maintenance, food preparation, assistance with paying bills, health counsel and support as well as provision of food, medication and hygiene parcels, and firewood during winter. In 2016 Bread of Life initiated forming of an informal network of civil society organisations – HumanaS network members – at the municipality of Vracar to address the gap in services needed by older people living with dementia. These services predominantly target families and support them in providing care for their older members.

Volunteering Service of the Belgrade Municipality of Zvezdara is an example of good practice: a public body managing and supporting a volunteer service assisting mainly older vulnerable people. The volunteers – some 200 of them – come from different municipalities and 30% of them are older people themselves. The services are accredited by the national Institute for Social protection and include home based support, as well counselling, workshops and educational activities.

Association Amity also started providing counselling service for older people in 2015 via telephone, email or in person. 100 older persons and their family members in 2015 and 113 in 2016 received counsel.

Caritas in Serbia implements an ongoing programme of providing home based care for older persons as well as persons living with disabilities. The teams in this programme are comprised of nurses and gerontocarers and provide personal care as well as assistance with household maintenance. Caritas also has a daily activity centres programme where, among others, older people are provided with occupational activities and also receive counsel and have their basic health indicators checked.

The Red Cross of Serbia Home Care programme is active in 84 municipalities and provides volunteer-based services to 12,000 older people in their homes, assisting with household maintenance, providing preventive health and psychosocial support and club-based activities. In 2016 the Red Cross of Serbia local branches started managing 187 gerontocarers providing regular home based services to 1390 beneficiaries.

The Red Cross of Belgrade branch has over the past four years provided training for informal carers where more than 100 people were trained in providing informal support and care to their older family members. This is also an ongoing activity in the provincial Red Cross of Vojvodina branch where each year 25 persons are trained to provide training for provision

of informal care to persons with older family members.

The Red Cross of Serbia has also in partnership with the Yanos Public Health NGO from the Netherlands through a project supported by the Netherlands' Ministry of Foreign Affairs established three daily activity centres for older people: in the municipalities of Pirot, Kragujevac and Indjija that are still active, after the end of financial support.

## **Promotion of Healthy Ageing**

The Red Cross of Serbia is a founding member as well as the coordinator of a network of 16 civil society organisations and associations focusing on issues of ageing and older people. The network is called HumanaS and is primarily focusing on advocacy on behalf and with older people and supporting the public sector in creating more modern and efficient policies. HumanaS initiatives rely on vast collective, individual and international experience of the network members. Sensitising the public on issues of discrimination of older people has become a continuing activity of the network. The network consists of: the Red Cross of Serbia, Gerontological Society of Serbia, Caritas, Amity, Victoria, Lastavica, Circle of Serbian Sisters, Charity Foundation of the Serbian Orthodox Church Philanthropy, Association for the Care for Older People, the Pensioners Union of Serbia, the University of the Third Age Network, Christian Humanitarian Association Bread of Life, Rosa, Association of Citizens Okrilje, Help Net and Adult Education Society. (<http://humanas.rs>)

The Red Cross of Serbia is a patron of the Health Festival organised twice per year in Belgrade. These events have more than 10,000 attendees and the Red Cross invests a special effort to ensure not all of them are from Belgrade, providing transport for members of self-help groups of older people from the rest of the country. The Red Cross of Serbia and Amity regularly organise panel discussions and lectures related to active and healthy ageing at these events.

The Red Cross of Serbia through its programmes promotes volunteering of older people as a way to increase their social inclusion and strengthening social cohesion but it is also an activity that contributes to their overall well-being and may lead to their better health. In the Red Cross of Serbia Home Care programme that targets older people and has a significant proportion of older volunteers the average number of invested volunteer hours per year exceeds 68,000.

In Kragujevac 15 Red Cross volunteers manage telephone helpline for older people. They answer the questions of older people and assist with counsel in some of their problems every day between 11 and 15.

"Improving access to human rights of older people in the Republic of Serbia" is a project successfully completed by the Red Cross of Serbia in partnership with HelpAge International from the UK and financially supported by the European Union delegation in Serbia. The project was implemented between 1 December 2013 and 1 December 2015 and included development of Self-Help Groups in 25 communities across Serbia and working on motivating older people to become active members of the society, to identify problems in their surroundings and work on solving them through dialogue with all relevant stakeholders and partners. Thanks to the high level of motivation as well as recognizing the value of this model of work by some local governments, the project ended up having 54 groups and 572 older members. The Red Cross expanded the project to some of its civil society partners: Association Amity participated in the same project supporting two self-help groups, as did association Bread of Life that supported five self-help groups.

The Third Age Movement of Serbia marks the 1 October, International Day of Older Persons by organising a Third Age Olympics, an event taking place in Vrnjacka Banja every year with approximately 1000 participants from Serbia and abroad. Since 2013 the Olympics also include qualifications organised in several cities in Serbia and these events promote active

ageing, healthy life styles and social inclusion of older people. The Olympics also have steadily increasing number of participants from other countries, from the region and beyond. The event also includes art colony activities and the paintings created during the Olympics by older people are later exhibited in different cities across Serbia. Since 2016 the Movement has started co-producing a television programme “Third Age” that is being created and edited by older people and broadcasted every week on channel one of the National Broadcasting Corporation.

#### **Goal 4: Intergenerational solidarity is maintained and enhanced**

In 2015, Umbrella Organisation of Youth of Serbia with UNFPA support organised a conference on intergenerational solidarity. This was a first such event initiated by younger people. Amity and Red Cross of Serbia representatives participated and talked about different aspects of intergenerational solidarity also drawing attention to financial crisis and austerity measures that increase unemployment among both older and younger people.

#### **Major achievements since 2012 in fulfilment of the MIPAA**

##### **Commitment 3: To promote equitable and sustainable economic growth in response to population ageing**

Since 2016, earmarked transfers from the budget of the Republic of Serbia for local self-governments have been introduced to encourage establishment and development of local social services in less developed municipalities.

##### **Commitment 4: To adjust social protection systems in response to demographic changes and their social and economic consequences**

Introduction of quality system into social protection system through services providers and skilled workers licencing system – set of rulebooks, arising from the Law on Social Care, was adopted in 2013, regulating the quality system

- Conditions that must be fulfilled by each service provider have been laid down – speaking of older persons, structural standards emphasise the obligation to adjust the institutions to the older persons needs
- Obligation of continuous professional development of services providers has been laid down
- Procedures stipulating professional procedure and preventing violence, abuse and neglect have been laid down.
- Pluralism of services providers providing accommodation services and community based services
- Enhancement of residential care capacities from 0.7% to 1% covers total population over 65. From 2015 to 2016, residential care capacity was increased from 101 to 160 institutions, from 11047 to 13155 beds. In 2015, total number of residential care users for older persons was 13896 users, and in 2016, 17594 users. The increase is achieved mostly by introduction of private sector as accommodation service provider - in 2015, the number of licensed private homes was 60 (capacity 2078 beds), and in 2016 the number was doubled, 119 licensed private homes with capacity of 4152 beds.

The most common community based service in the last 5 years is domestic aid service for older persons (over 90% of local self-governments provides this service)

- From 2014, violence has been systematically monitored through social protection system, and this also includes recording of all forms of violence against older persons. The importance and peculiarity of violence against older persons' phenomenon is placed in focus of professional and general public due to the efforts primarily made by the non-government sector.

## **Commitment 2: To ensure full integration and participation of older persons in society**

Further advancement of **deinstitutionalisation process** (development of the set of services for older persons in environment and strengthening contact with home surroundings)

Inclusion in community life is confirmed through very alive self-organised activities of older persons' clubs members, which are of huge importance for degree of integration of older persons and as a daily support, public discussions and round tables are organised for lobbying and influencing decision making in local community, municipalities and towns. These activities also include media coverage, which highlights the positive image of older persons as active and interested community members.

Older persons are one of the groups in population structure who are members of some association of citizens more frequently than it is the case with average population. The most frequent ones with the largest number of members are the Associations of Pensioners of the Republic of Serbia, which have its units at local level. Association of Pensioners of the Republic of Serbia has, in the entire territory of the Republic of Serbia, around 300,000 members, which is slightly less than a quarter of the total number of pensioners. Members of the Association of Pensioners are mostly the ones who receive lower pensions. That is why these associations perform other activities and actions of humanitarian nature.

An example of good practice of participation of older persons in society is establishment of a portal "Penzin" [www.penzin.rs](http://www.penzin.rs), which plays an important role in providing older citizens with information on the matters related to exercising of their rights, as well as on conditions for resolution of everyday needs. Launching of this portal largely contributed to enhancement of social inclusion of older persons in Serbia, although other sources of information must not be ignored (sites of ministries, institutions of social and health care, humanitarian and non-governmental **organisations**, etc.). These sources that could be found on internet contributed to older persons' inclusion in the society by providing appropriate pieces of information. "The Third Age Movement", which has been operational in the territory of the Republic of Serbia and Belgrade for several years, gathers a large number of older persons around the concept of active ageing, sport and recreational, but also educational activities. Once a year, in honour of the 1 October, International Day of Older Persons, events such as "Olympic Games of Sport, Health and Culture", competitions and gatherings are organised, and number of participants is increasing every year. In the last several years, in majority of municipalities and cities, the 1 October – International Day of Older Persons has been marked with programmes suitable for older persons (lecturing, preventive medicine services, and recreational, cultural and artistic programmes).

## **The biggest challenges in the future period**

### 1. Securing economical security in old age

In the fight against poverty of persons aged 65 and over, important target groups are women, persons without elementary education as well as those living in rural settlements.

### 2. Encouraging life-long **education**

Rapid ageing of population and increasing average number of individual age of life require life-long education as precondition for higher productivity, higher rate of employment and better social inclusion of older people, as well as active ageing i.e. healthy ageing.

### 3. Promoting healthy way of life and individual behaviour in old age

In this way objective and subjective health condition and independence in old age i.e. older persons' quality of life of would be improved.

## **Conclusion**

There are positive results or steps forward were achieved in accomplishing better standards for old people in Serbian society.

However, in the period to come, there will be challenges demanding from the entire society to have a more active approach to the consequences of ageing, and from the senior citizens to be more proactive, especially in actions aiming to reduce and prevent poverty, to involve the elderly in the labour market, to protect the most vulnerable groups, to develop the concepts of LTC, and to improve lifelong learning and social inclusion.

## **Review and appraisal of national actions to fulfil commitments of MIPAA/RIS: mapping table**

### **Commitment 1**

**To mainstream ageing in all policy fields with the aim of bringing societies and economies into harmony with demographic change to achieve a society for all ages**

As the general precondition for improvement of position of all vulnerable groups and older adult population, a need for **decentralized social protection system** has been recognized. Decentralization as one of the main strategic directions for development includes creation of conditions and mechanisms that will enable local self-governments to take over the responsibility for needs of citizens within the social welfare system, by developing life support services in the community, in the first place.

At the level of adopted national strategic actions (laws), the phenomenon of population ageing is implemented in the area of poverty reduction, social protection, employment, sustainable development, discrimination, family violence, as well as in the field of health protection and patient safety, non-transmissible chronic diseases protection, palliative care, mental health, dealing with issues of refugees and dislocated persons, protection and

rescue in emergency situations, strengthening relations between mother country and diaspora, official statistics development, etc.

The Ministry responsible for social protection supports development of services in the community, not only coordinating large projects which provide funding for these services, but also by giving a real material support to projects of local self-governments and civil society organisations aimed in introduction of new services or support to the sustainability of those already established to provide the assistance to the elderly, disabled, children and other particularly vulnerable population groups.

Within a framework of a special program which started several years ago, the Ministry of Labour, Employment, Veteran and Social Affairs awards funding for development and improvement of quality of social protection system in the underdeveloped municipalities<sup>2</sup> through open competitions. On average, about thirty local self-governments were supported annually.

In 2014, the Agreements on financial aid were signed with 35 local self-governments representatives, governing development of social protection services (this mainly pertains to elderly and disabled persons' home care services and day care for youth with developmental disabilities), improvement of their quality and economic status of the most vulnerable categories, in line with the Program for improvement of the social protection in the Republic of Serbia.

In March 2015, a new competition was opened for the projects of civic associations focused on the social protection system development through establishment of new services and improvement of their quality and protection of rights of the most vulnerable population categories.

## **Commitment 2**

### **To ensure full integration and participation of older persons in society**

The Law on social protection adopted in 2011 launched significant innovations in the system of social protection, bringing into focus the quality of the services provided and respect of human rights and dignity of beneficiaries. Articles 26 through 33 of the Law set forth the principles on which the social protection system is based and which, when applied, guarantee human rights respect and dignity to the users of services. The principles of respect of users' integrity and dignity, pursuant to Article 69 of the Constitution of the Republic of Serbia, principle of prohibition of discrimination pursuant to Article 21 of the Constitution, as well as the principle of the best interest of users and the principle of availability and individualization of social protection are recognized as having particular importance. The principle of respect of users' integrity and dignity that is binding for service providers guarantees that older users are treated with respect for their physical and mental integrity and safety, with observance of their moral, religious, cultural and other personal beliefs. Besides the principles, rights of users of social protection services are also guaranteed by the Law. Among others, right to access to information and rights to participation in decision-making have particular importance for older population.

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<sup>2</sup>Municipalities from development group III and group IV, as well as devastated areas, in line with the Regulation of the Republic of Serbia on establishing a Single List of Regions and Local Self-Governments by Development Levels

A guardianship is a very important legal concept which provides protection to incapacitated persons, unable to take care of their own rights and interests protection. As far as older people are concerned, a particular caution is required when using this legal concept, in order to protect integrity and dignity of such persons. There is a guardianship over persons unable to work (permanent incapacity) and special guardianship (a guardian is appointed only for certain arrangement, for example to collect their pension or similar). CSW data (custody body) demonstrate that just 0.5 per cent of senior citizens are under guardianship, whereas temporary guardianship is more frequent than full guardianship. These data reveal the small percentage of older people under guardianship and therefore indicate that a modern approach to the issue of working capacity is followed, under which working ability is denied to the older person only when it appears inevitable, i.e. by thoughtful and professional application of this legal concept, personal integrity and dignity are preserved. In addition, every tenth user of residential care institution is under the guardianship.

Elderly clubs are traditional form of elderly organization and self-organization that stimulates active aging and participation of older persons in society. According to data collected in the research<sup>3</sup>, clubs covered great number of clients – around 20 thousand persons. They are present in 31 municipalities and cities and available to the population on an open basis, with diversified activities.

Lost or reduced productivity of older persons lead to the decline of self-esteem and dissociation, on the one side and to neglect carried out by population of working age, on the other side. Fundamental principles of humanity, respect of human rights and rights to decent life are objectives which demand integration of all marginalized social layers, including older persons. That can be achieved through family and institutional responsibilities and first of all, through development of consciousness on necessity of older persons' integration, since the ageing is inevitable truth for all human beings.

Real steps taken in the area of integration of older persons are carried out through various projects of organization of appropriate fun, creative, sports and educational activities, whereby older persons are not just consumers, but it is insisted on their active participation, expression of creative and artistic abilities and healthy lifestyle cultivating. Besides national institutions that implement the integration of old persons, non-governmental organizations are also involved in this kind of activity. The aggravating circumstance of integration is the inaccessibility of these programs to older persons who live in the village and therefore are in the worst position. In addition, due to the lack of confidence and prejudices about insuperable generation gap, older persons are not sufficiently aware of the need to get active and include themselves into programs tailored to facilitate their age. Therefore, the major part of the programs dedicated to elderly remains unused.

### **Commitment 3:**

To promote equitable and sustainable economic growth in response to population ageing

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<sup>3</sup> "Mapping Social Care Services within the Mandate of Local Self-Governments in the Republic of Serbia", Centre for Social Policy, 2015.

Mechanisms for the provision of **existential minimum and support to social inclusion within the social protection system** include monetary social assistance (MSA), short-term allowances and benefits in kind. MSA is the right of an individual, or a family, whose total income from their salaries and property is lower than the amount of monetary social assistance established by law. One kind of support does not exclude the other, since the unprivileged elderly people have the<sup>3</sup> right to receive several types of financial aid, if the criteria are met. Within the last 5 years, the total number of MSA users has been varying and there has been a slight decline, whereas the number of persons over 65, who receive MSA is rising (for example, in 2013 there were 12405 65+ users of MSA, while in 2016 there were almost a thousand more such users, which is almost 10%). Law on Social Protection from 2011 has changed the property census for receiving MSA from 0.5 to 1 acres of land, especially taking into account the vulnerability of older farmers who are land owners and therefore increasing their possibility to receive this valuable monetary assistance. The increase of elderly people who receive MSA can partially be ascribed to the change of criteria. Although it is constantly rising, the share of elderly MSA users over age 65 is barely 5% of total MSA users. Having in mind that around 80% of older citizens are pensioners and mostly property owners, this group struggles with meeting criteria for receiving MSA, even though the criteria for MSA have been revised. The state is aware of the space for further development of the mechanisms for reducing the poverty of the impoverished older citizens, besides the MSA. One of the proposals for fight against the poverty of the impoverished older citizens, acknowledged by the National Strategy on Ageing is the introduction of social pensions.

Poverty in Serbia is a considerable social and political issue. European comparable data indicate that since 2012, when the first EU-SILC survey was undertaken, Serbia has been among the group of the countries with the highest per cent of population at risk of poverty, with strongly indicated problem of social inequality. About one fourth of the population is at risk of poverty (1.8 million<sup>4</sup>), and its at-risk-of-poverty- threshold (relative poverty) in PPS is among the lowest in Europe. Taking into account the prevalence of poverty, it is not only an isolated issue affecting only individual social groups but a serious social issue requiring an overall societal action.

Extreme forms of poverty such as absolute poverty indicating the share of population incapable of satisfying basic existential needs are prevalent, which points to limitations various systems are faced with, among which, in the first place, is the social care system unable to provide social care in crisis situations of an adequate scope and quality levels.

According to the recent data available for 2015, more than half a million people are living in absolute poverty, among which most vulnerable are children and young persons, elderly and rural population, in particular in South and East Serbia, several- member households and persons without any qualification or with low qualification levels, as well as those excluded from labour market.

**Table 1.** Absolute poverty profile

<b>2015</b>	Poor	Poor	Total
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<sup>4</sup><http://socijalnoukljucivanje.gov.rs/rs/socijalno-ukljucivanje-u-rs/statistika/relativno-siromastvo/>

	population	population make-up	population make-up
<b>REPUBLIC OF SERBIA</b>	<b>7.4</b>		
<b>Settlement %</b>			
Urban area	5.4	42.9	59.4
Other	10.5	57.1	40.6
<b>Regions %</b>			
Belgrade region	3.9	12.1	23.1
Vojvodina region	6.5	23.1	26.4
Sumadija and West Serbia region	6.6	24.5	27.7
South and East Serbia region	13.1	40.3	22.8
<b>Household %</b>			
1-member	7.9	9.1	8.6
2-member	6.7	16.7	18.7
3- member	5.1	13.6	19.8
4-member	3.9	12.8	24.2
5-member	8.7	16.3	13.9
Six-member and more	15.8	31.6	14.9
<b>Age cohorts %</b>			
Children under 13	9.9	15.3	12.3
Children 14 - 18	10.6	6.2	4.7
Adults 19 - 24	8.0	6.9	6.9
Adults 25 - 45	7.0	22.9	25.9
Adults 46 - 64	6.8	24.4	28.5
Elderly 65+	8.9	24.3	21.7
<b>Breadwinner's education level %</b>			
Uncompleted primary school	21.8	28.9	9.9
Primary school	11.8	27.5	17.4
Secondary school	5.6	40.5	54.0
College	2.5	2.3	7.0
University	0.5	0.7	11.7
<b>Breadwinner's social and economic status %</b>			
Self-employed	10.1	27.1	19.9
Salaried employee	3.4	15.7	34.3
Unemployed	19.0	22.1	8.6
Retired	6.2	28.9	35.0
Inactive	21.7	6.1	2.1

Source: <http://sociojalnoukljucivanje.gov.rs/rs/sociojalno-ukljucivanje-u-rs/statistika/apsolutno-siromastvo/>

Regional data on poverty point to its uneven geographical spread. At-risk-of-poverty rate at municipal level is below 5 per cent in Belgrade municipalities, and over 60 per cent in the municipalities in the South of the country. According to urbanisation level, levels of poverty vary among big cities and rural areas.

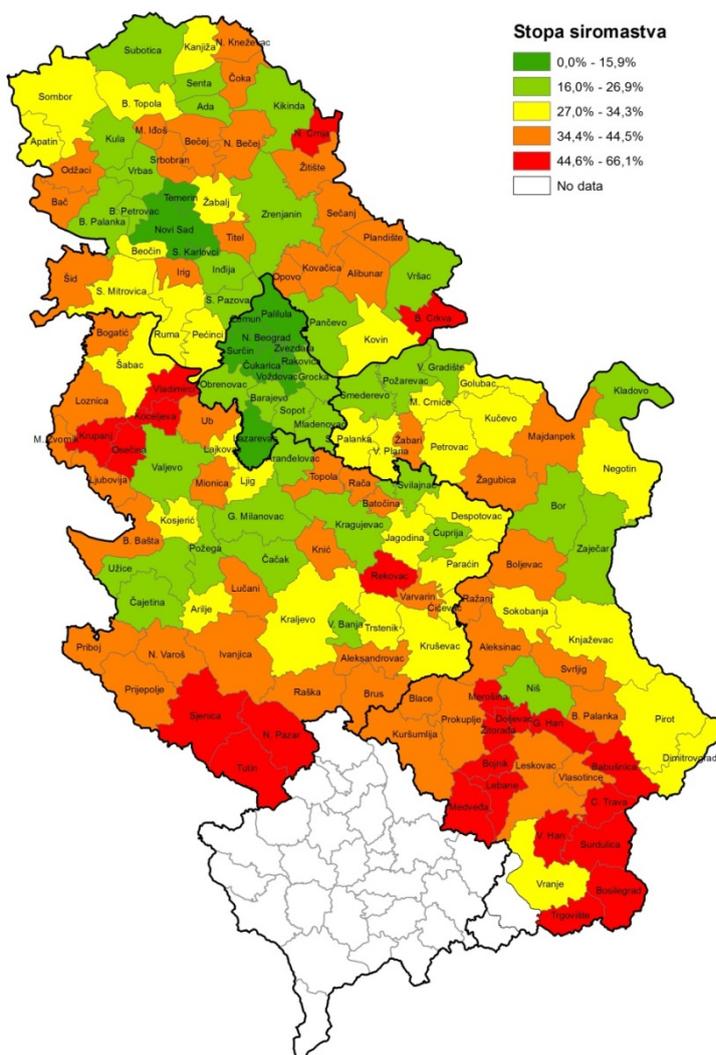
Further, the data on absolute poverty uphold that fact that poverty in strict urban areas is two-times lower and that it is predominant among the poor in the South and East Serbia.

**Table 2.** At-risk-of-poverty rate as per urbanization level

Cities	14.2
Suburbs	24.3
Rural areas	36.7

Source: Eurostat, EU-SILC survey

**Figure 1.** At-risk-of-poverty rate at municipal level



Source: SB, RSO, Poverty maps in Serbia, <http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2016/10/Mapa-siromastva-u-Srbiji.pdf>

A string of factors keeps families in poverty. Among them are underdeveloped safety net and absence of labour market access. Considerable income gap is also a significant poverty risk factor.

In Serbia, the effectiveness of social transfers (measuring percentage of reduction in at-risk-of-poverty rate) is below the effectiveness of the social transfers in EU (in a hypothetical

case of absence of social, the risk of poverty would be 31,4 per cent instead of 24,6 per cent. The effect in EU countries is 34,4 per cent). In consequence, social care fails to pull a significant share of the affected either out of the risk of poverty and often out of absolute poverty.

Although beneficiaries are on the rise, as well as allocations for primary measure of social security (cash social assistance-CSA), in the recent years, the level of social care for the poor requires further effort. For example, the coverage of CSA beneficiaries who are exposed to poverty risk is only 15 per cent. Also, the adequacy of benefit is unsatisfactory (monthly sums should be increased by 33-45 per cent to reach at-risk-of-poverty threshold). The care for most vulnerable and support measures have been unevenly developed and undertaken at local level. For example, in 2015, in 12 local government units no social care service for which local government is in charge was provided, whereas a spectre of 10 different services were on offer in big cities such as Belgrade, Nis, Kragujevac, and Novi Sad in the same year<sup>5</sup>.

Primarily used, comparable statistical tools often fail to indicate to the depth of vulnerability of particularly vulnerable groups in one society. In the Republic of Serbia, older population is characterized with above the average vulnerability and is recognised as such in mainstream definitions of vulnerable groups in the country (for more information see: 2nd National Report on Social Inclusion and Poverty Reduction of the Government of Serbia<sup>6</sup> prepared by the Social Inclusion and Poverty Reduction Team).

Underdeveloped social care services, in particular house help and day care for older persons is a significant challenge for the society on the whole. Such a challenge along with other challenges coupled with demographic ageing and household structure changes emphasise the need and requires response from decision-makers at all levels.

Significant advances regarding cash allowances remain the area of high priority for decision-makers. Not only in terms of coverage, but also in terms of adequacy of benefits, as it is recognised by the Employment and Social Policy Reform<sup>7</sup>.

Social pensions for the elderly people at greatest risk in society are potential tool the effects of which need further analysis. Therefore, the recommendations of the analysis titled „Social Care in Old Age<sup>8</sup>“undertaken by the Social Inclusion and Poverty Reduction Team“need to be followed-up.

Undoubtedly it is the older generation who has borne the brunt of the economic crisis outbreak in 2008 in form of a set of fiscal measures adversely affecting their consumption power. To date there has been no analysis undertaken regarding the effects of consolidation that took place in past years, and what are its effects on older population. Without such analyses it is not possible to produce credible arguments on the deteriorated status of older population in comparison to other population groups as a consequence of the crisis, although there are very justifiable concerns that it is old population who suffered consequences of the crisis to a very significant degree.

#### **Commitment 4**

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<sup>5</sup><http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2016/12/Mapiranje-usluga-socijalne-zastite.pdf>

<sup>6</sup><http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2014/11/Drugi-nacionalni-izvestaj-o-socijalnom-ukljucivanju-i-smanjenju-siromastva-final.pdf>

<sup>7</sup> <http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2016/06/SIPRU-ESRP-2016-Srpski.pdf>

<sup>8</sup> [http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2014/06/sipru\\_DTNSC\\_web\\_jan.pdf](http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2014/06/sipru_DTNSC_web_jan.pdf)

## **To adjust social protection systems in response to demographic changes and their social and economic consequences**

The Social Welfare Law (2011) and by-laws have been in effect for five years now. The Law introduced the system based on the principles of **pluralism and licensing of social service providers and of social care practitioners**. The application of the **pluralism of social service providers principle** has led to the **significant increase in the share of private sector and civil society organisations (CSOs) in service provisions** and therefore in securing long-term care of older persons. **Groups of social care services have been identified and the way for the development of new services has been opened, minimum quality standards introduced** which service providers must follow to obtain a licence, the focus has been at **community-based services; cash social assistance (CSA)** has been redesigned; levels of financing of all the social welfare rights and services have been defined, **and establishment of social and health care institutions has been enabled,**

Most social welfare benefits are intended for wider target groups. The system recognizes **specific characteristics of older beneficiaries**<sup>9</sup> and takes them into account when eligibility criteria are designed. The social welfare services are highly responsive to the characteristics of older population and some have been primarily developed as a response to older people's needs (house help) and some have been to this age group of population (placement in homes for the elderly, day care, etc.). The social welfare system in most cases recognizes the older beneficiaries as those who need support due to their health condition and/or disability or due to poverty and social exclusion, or because they are victims of abuse. The social welfare system responds to the needs of older people by the following measures: cash social assistance (CSA) caregiver's allowance, inclusion in community (house help, day care centres, clubs, etc.), counselling services, placement services or counter-violence measures.

**In Serbia, the stumble block of social care system is a centre for social work** founded at municipal level (170 centres in total in Serbia) with duly kept records on all the recipients of formal support under the system of social welfare (entitlements and benefits, services and measures). The refereed to records are also maintained on informal service providers and support programmes for older population. Recently, in five years, constant rise is recorded in **a total number of beneficiaries registered with the CSW**. Therefore in 2016, the number of beneficiaries increased by 16 % in comparison to 2012. This total rise in number of beneficiaries is followed by the rise in a number of old persons in the population. The share of beneficiaries who are 65+ in a total number of beneficiaries of social work services provided by the centres for social work is 15%-16%, almost representing a total share of older persons in the total population. However, it does not follow the continuing rise of older persons in a total population in Serbia, which only in the last five years rose from 17.4 %to 19.2%. Taken at the level of population in Serbia, within the ten years<sup>10</sup>, 7%-8% of older population has been covered by an entitlement, measure or social welfare service, which is the share of population that is constantly on the rise. If the total population of old

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<sup>9</sup>E.g. the 2011 Law on Social Welfare has introduced amended rules for means testing. The eligibility to cash social benefit has been changed from 0.5 acre to 1 acre of land, thus recognizing particular vulnerability of older farmers and as a result increasing their options for participation in this critical relief.

<sup>10</sup>There are a number of services for older people which is provided at local level and is remained unregistered by centers for social work. Thus, it is justifiable to presume that a number of older persons using any of the social welfare supports are higher.

persons covered by the social welfare system is taken into account, their number is on the constant rise (4.058 in 2011 to 108.359 in 2016<sup>11</sup>). However the share of older population has remained the same because the old people share in population has been on the constant rise in Serbia.

In the five year enforcement period, the process of the **community-based services** providing support for older persons to stay in their environment, which are integral to long-term care system in Serbia, has been continued. These services are developed and funded locally. The approach has been in its budding phase present in Serbia for the last 30 years in the system of social welfare. The focus has been on the introduction of the quality assurance and control in social welfare provision. The wide range of currently standardized services, the three are particularly relevant for old persons: house help, day care centres, and shelters. According to the research undertaken by CSW titled “Mapping of Services of Social Care Under the Competence of Local Governments in the Republic of Serbia”, ( 2012 and 2015), *house help for adults and older persons* is the most represented community-based social service with 85% of local governments in Serbia for 15-16000 older beneficiaries annually. This service has been a long-term one under the system of social care which has reached high territorial coverage. On the other hand, the capacities of service providers have been limited, so that the service was available for 1.1% of beneficiaries in the total population of 65+. The other community-based services have been under development and have lower level of accessibility. The shelter for older persons is a service of short-term placement with the purpose to primarily ensure safety in crisis situations. There are approximately 10% of beneficiaries who have been the recipients in the previous period, and 7-8% beneficiaries of day care centres at municipality level.

<b>Municipalities with community-based day care services</b>	<b>2012</b>	<b>2015</b>
Municipalities offering house help	124	122
Municipalities offering day care for older persons	12	10
Municipalities offering a service of shelter for adults/older persons	18	13

<b>Community-based day care service beneficiaries</b>	<b>2012</b>	<b>2015</b>
House help for older persons	16,004	15,043
Day care beneficiaries	1,022	561
Shelter beneficiaries	1,089	805

Inadequate resources are reported as the main obstacle to an increased accessibility of the services. Insufficient level of awareness and knowledge by local governments on the competences regarding social welfare, in particular on the allocation competences regarding this group of services is the second reason for the existence of the obstacles. Social Welfare Law (2011) defined **earmarked transfers** – a mechanism designed to enable allocations from national level for social welfare services at local level in the municipalities the development level of which is below the national average. This important mechanism which is to ensure accessibility and continuity of services even in poverty-stricken municipalities was established in 2016, and its impact is to be evaluated in future.

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<sup>11</sup>Source: CSW Annual reports

**The social welfare system is open for the development and adjustment of the new services to the system of so called innovative services which are supposed to adequately respond to specific needs of older recipients. Civil Society Organisations involved in programmes and activities such as food on wheels, house help specialized for rural environment, house care and assistance, multipurpose visiting nurse, mobile Multisectoral teams, etc. have particularly been active in the development of innovative services.**

**Placement of older people in home for elderly** is a service designed within the range of services intended for older persons, from community-based services to residential care. Pluralism of service providers under social welfare system has been secured under the Social Welfare Law enacted in 2011, providing basis for residential care for older people in private sector and significant increase in the capacities of residential care for older persons in Serbia in general. Quality assurance control of these institutions has been instituted through minimum service standards and licensing which is up and running as of 2013. In 2012, public placement facilities were of the capacity of 8.863 residents in 40 institutions, with gradual minimal extension by 2016 to 41 institutions with the capacity of 8.960 placements. The number of residents in public sector averages around 11.000 beneficiaries annually. The facilities are mostly filled up to the full capacity, i.e. about 90%. In the recent five years, private sector as a service provider of residential care experiences significant growth. Only in 2015, 60 private sector residential care facilities were licensed, and in 2016 the number doubled, with 119 licensed private homes and doubled accommodation capacity. Only in 2015 and 2016 the total annual accommodation capacity rose from 101 to 160 institutions and from 11.047 to 13.255 available placements respectively. The total number of the residents under institutional care for old persons numbered 13.896 in 2015 and 17.594 residents in 2016. Given that in 2016 according to the data available by the Republic Statistical Office, there were 1.4 million of old persons who were 65+, the existing capacities of residential care currently is about 1% of the older population, which is significantly lower than the European average, and event of the countries in the region. Therefore one of the strategic strands to encourage further private sector to develop capacities and enhance residential care simultaneously paying attention to geographically balanced distribution of the residential care institutions and their better accessibility for older persons in territorially scattered and demographically older regions.

**The control and regulation mechanisms** (inspection and supervision): Quality assurance system and inspection provide legally based quality control option over service providers. In the second half of 2014 and in 2015, 37 homes for older persons were closed down (illegal or with operation licence) resulting in the significantly stepped up protection of older citizens from abuse. As the quality assurance is established based on minimum standards for the provision of services and licensing of service providers and that private sector has become significantly involved in service provision, it is expected that in future the rise in the number of homes and increase in accommodation capacities will respond to the needs of older persons in Serbia.

New wave of pension system reform, more precise part of the system relating to the

mandatory pension and disability insurance, was carried out in 2014.

Formulation and implementation of fiscal consolidation process were the main reason for changes and amendments of regulations relating to the pension system. Taking into account high share of pension expenditure in GDP and significant deficit in funding pensions' payment, it was expected to find measures related to the pension system among the first steps of fiscal consolidation. The aim of adopted measures is decrease of influx of new pensioners aimed at decrease of deficit in system funding and creation of preconditions for long-term economic sustainability of pension system.

The mandatory pension and disability insurance reform continued with **changes and amendments of the Law on Pension and Disability Insurance**, which were adopted in July 2014 and came into force on 1 January 2015. The adopted measures relate to the following:

- Gradual **raising of women's retirement age and its equalising with men, in the following way**: increase from 60 to 63 years, in period between 2015 and 2020 (for six months in a year), and then from 63 to 65, for two months in a year;
- Introducing the right to **early old age retirement** with permanent reduction of early old age retirement pension amount by 0.34% (at annual level 4.08%, up to 20.4%) for every month of earlier retirement prior to reaching general retirement age;
- Defining additional precondition for reduction of retirement age for obtaining the right to retirement age for insurant on the working posts for which the insurance span is credited with extended duration (so-called "extended duration insurance span"): that they completed at least 2/3 of experience on those working posts, comparing to the total insurance span;
- Making definitions for certain categories of insurant (MOI, SIA, etc.) more rigorous, which means excluding all insurants working on administrative and technical jobs, as well as faster dynamics of increase of old age precondition for retirement of these categories at annual level.

Furthermore, in accordance with the Law on **Temporary Arrangement of the Pensions Payment Model**, pensions exceeding 25.000 dinars have been decreased, starting from pension for November 2014. In order to protect pensioners' standard, around 39% of all beneficiaries were affected by this measure. Decrease relates to the part of pensions exceeding 25.000 RSD.<sup>12</sup>

Additional changes and amendments of the Law on Pension and Disability Insurance, brought in December 2014, define the model and dynamic of pensions' adjustment in accordance with the rules set out by the Budget System Law. By changes of the regulations it has been defined that pensions will be adjusted only when pension expenditure in GDP falls below 11%. In the meantime, due to positive fiscal trends, pensions have been increased twice, by 1.25% in December 2015 and by 1.5% in December 2016. Furthermore, in November 2016, 5,000 RSD was paid to all pension beneficiaries as a lump sum.

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<sup>12</sup> Detailed preview of pensions decrease model:

- Pensions which, according to the decision, exceed 25.000 RSD, and do not exceed 40.000 RSD, decrease relates to the part of pensions exceeding 25.000 RSD, has been cut by 22%.
- With pensions which, according to the decision, exceed 40.000 RSD, in addition to the described decrease for the part between 25 and 40.000 dinars, part of pensions exceeding 40.000 dinars has been additionally cut by 25%.

By changes of the law from 2016, the limits for pensions decrease have been increased by 1.5% to 20.375 и 40.600 RSD.

The effects of measures undertaken and current trends in this area:

- Total pension expenditure as % of GDP has been decreased from 13.2% in 2012 to 11.8% in 2016 (12.8% in 2013, 13.0% in 2014 and 12.1% in 2015);
- Financial situation in the Pension and Disability Insurance Fund of the RS (PDIF) has been improved. Grants-in-aid to cover missing resources of the Pension and Disability Insurance Fund of the RS in 2012 covered 43.4% of PDIF expenditures, and it was decreased to 31.1% in 2016.<sup>13</sup> Expressed in percentages of GDP, grants-in-aid have been decreased from 6.8% in 2012 to 4.1% of GDP in 2016.
- Number of older population receiving pension is increasing. In 2012, 83.4% of population of age 65 and over received pension, while that percentage increased to 86.4% in 2015.
- The rate of replacement from wage to pension is decreasing from the level of 71.5% (in 2010). Regardless of the fiscal consolidation process, replacement rate from wage to pension in period between 2013 and 2015 was around 63.3%, and in 2016 it was increased to 64.5%.
- On the other hand, ratio of average pension and wage decreased from 55.6% in 2012 to 52.2% in 2015, and 51% in 2016.
- Influx of new pension beneficiaries has been decreased, so the total number of pensioners is decreasing.

#### Number of old age pensioners and total number of pensioners, December 2013 – January 2017

	година	старосне	укупно
децембар	2013	1.021.216	1.722.649
	2014	1.053.258	1.739.162
	2015	1.064.380	1.735.942
	2016	1.070.104	1.728.138
јануар 2017.	1.069.883	1.725.639	

Source: PDIF Statistics

Based on PDIF data, in December 2016, there were 2.468.221 insurants in total, whereof 1.728.138 pensioners; it means that little bit more than 1.4 insurants are on one pension beneficiary. Almost one fourth of Serbian citizens are pensioners (24.4%).

Majority of pension beneficiaries are old age pensioners – 1.07 million or 62% out of total number of pensioners. The number of disability pension beneficiaries is 303 thousands (17.5%) and survivor pension is 355 thousands (20.5%). The largest number of pensions' beneficiaries is in employees insurance – 1.45 million or 84%, including almost 40 thousands military pension beneficiaries. 85 thousands (5%) pensioners belong to independent activities insurance, and 193 thousands (11%) is in insurance of farmers.

Number and share of old age pensioners are constantly increasing. More rigorous

<sup>13</sup> Pensions make around 85% of PDIF expenditures. Additionally, expenditures are funds for payment of other rights from mandatory pension and disability insurance, then for health insurance of pensions' beneficiaries, as well as expenditures for fund operation.

preconditions for old age retirement slowed down the influx of new old-age pensioners, which along with constant decrease of number of disability and survivor pensioners, resulted with decrease of total number of pensioners, starting from 2015.

- New pension beneficiaries structure changes faster – share of new old-age pensions' beneficiaries is increasing. Share of new old-age pension beneficiaries, men over 65 and more in total number of new old-age pensioners has been increased from 49% in 2012 to 69% in 2015<sup>14</sup>. Introduction of early old-age pension and more rigorous conditions for exercise of this right, as well as changes related to retirement of insurants with extended duration insurance span obviously made retirement impossible to a number of insured persons, and discouraged the others from that intention.
- Consequently, effective retirement age is constantly increasing<sup>15</sup>. For men in 2015 it was 63.5 years – 2.8 years more comparing it to 2008. This parameter for women in 2015 reached 60.3 years, which is three years more comparing to 2008. Effective retirement age for both gender in 2015 reached 62.5 years.

Central registry of compulsory social insurance was established in 2010, and from 2014 has been under jurisdiction of the Ministry of Finance. Records on insurants from the social insurance should be fully taken over by the Central registry. Database on insurants is being formed, and until now the Central registry has been only partially functional (electronic submission of insurance application and resignation and change of data on insurance, etc.). The second phase will allow electronic exchange of data on contributions for compulsory social insurance.

### **Commitment 5**

To enable labour markets to respond to the economic and social consequences of population ageing

In the conditions when older persons are faced with the reduced access to labour marked and precariousness of employment due to modernization of work processes and lack of knowledge, skills and competences the demand of which is conditioned by development and transfer of new technologies (process of restructuring of economic operators and an increase in a number of older persons with the status of redundant workers), the enhancement of their employability, investing in knowledge, skills, motivation and labour market mobility and promotion of employment and self-employment are critical.

According to the latest LFS data available by the Republic Statistical Office, and in effect as of 28 February 2017, a significant drop in the number of unemployed persons falling within the age cohorts 45-54 and 55-64 is recorded, along with the improvement of all the basic labour market indicators for age cohort 55-64.

*Table 1. Age structure of unemployment persons, age cohorts 15-64 and 15+*

<b>Age cohort</b>	<b>Q1 2016</b>	<b>Q2 2016</b>	<b>Q3 2016</b>	<b>Q4 2016</b>	<b>2016 (average in .0000)</b>
<b>15-24</b>	98,3	84,7	67,2	<b>70,0</b>	80,1
<b>25-34</b>	188,5	151,4	161,7	<b>142,4</b>	161,0
<b>35-44</b>	147,3	121,1	106,5	<b>95,0</b>	117,5
<b>45-54</b>	106,2	88,2	76,4	<b>68,9</b>	84,9

<sup>14</sup>Data for 2015 also includes early old-age pension beneficiaries.

<sup>15</sup> Average age of new old-age pension beneficiaries in referent year.

<b>55-64</b>	61,0	49,0	36,6	<b>33,0</b>	44,9
<b>Total 15-64</b>	601,3	494,3	448,3	<b>409,3</b>	488,3
<b>Total 15+</b>	602,2	495,5	450,1	<b>409,8</b>	489,4

Source :LFS, RSO

**Unemployment rate** for age cohort 55-64 is **6,6%** and represents reduction by 4.8 per cent points relative to 4Q 2015.

**Employment rate** for age cohort 55-64 is **43,9%** and represents an increase by 6.4 per cent points relative to 4Q 2015.

**Activity rate** for age cohort 55-64 is **47,1%** and represents an increase by 4.7 per cent points relative to 4Q 2015.

Table 2 Basic labour market indicators, age cohort 55-64

Age cohort 55-64	Q1 2015	Q2 2015	Q3 2015	Q4 2015	2015 (average)	Q1 2016	Q2 2016	Q3 2016	Q4 2016	2016 (average)
Activity rate %	40,5	41,6	43,7	43,4	42,1	44,8	47,3	48,3	47,1	46,9
Employment rate %	34,9	37,1	39,4	37,3	37,3	39,2	42,7	44,9	43,9	42,7
Unemployment rate %	13,8	10,8	9,7	11,4	11,5	12,7	9,7	7,1	6,6	9,0
Inactivity rate %	59,5	58,4	56,3	56,6	57,9	55,2	52,7	51,7	53,0	53,1

Source: computed on the basis of the LFS data, RSO

In 2016 on average, there were around 455.000 employed persons falling within the category of population 55-64, of whom around 180.700 are women and 274.400 men.

It should be noted that the number of employed women belonging to this age category is considerable lower than the number of the employed men, the reasons for which is the lower pensionable age for women.

Table 3 Employment 55+

Age cohort	2016 (average)	Q1 2016	Q2 2016	Q3 2016	Q4 2016
55-64	455,2	420,9	456,9	477,9	465,3
65+	139,9	122,3	148,4	152,5	136,4

Source: Republic Statistical Office (RSO)

Simultaneously, around 139.900 employees who are 65+, whereby significantly lower participation of women is also recorded.

If registered unemployment is taken into account there were 700.947 unemployed persons registered with NES on 31 December 2016, among whom 201.414 (44,69% women) were unemployed ageing 50+.

Table 4 Registered unemployment, characteristics, age cohort 50-64

Unemployed aged 50+ registered with the NES (as of 31. December 2016)	50 - 54		55 - 59		60 - 64		Total	
	Total	Women	Total	Women	Total	Women	Total	Women
I	25,892	13,594	24,634	12,066	16,244	4,592	<b>66,770</b>	<b>30,252</b>
II	4,460	2,024	3,859	2,006	2,020	543	<b>10,339</b>	<b>4,573</b>
III	16,822	7,170	18,564	6,320	10,160	1,196	<b>45,546</b>	<b>14,686</b>
IV	28,641	17,703	21,237	12,263	6,792	1,855	<b>56,670</b>	<b>31,821</b>
V	1,091	231	1,447	159	966	24	<b>3,504</b>	<b>414</b>
VI-1	2,806	1,722	3,491	1,740	1,906	305	<b>8,203</b>	<b>3,767</b>
VI-2	202	113	165	73	77	14	<b>444</b>	<b>200</b>
VII-1	3,107	1,722	3,659	1,819	2,790	588	<b>9,556</b>	<b>4,129</b>

VII-2	119	66	113	62	98	19	<b>330</b>	<b>147</b>
VIII	23	13	17	5	12	1	<b>52</b>	<b>19</b>
<b>TOTAL</b>	<b>83,163</b>	<b>44,358</b>	<b>77,186</b>	<b>36,513</b>	<b>41,065</b>	<b>9,137</b>	<b>201,414</b>	<b>90,008</b>

Source: National Employment Service (NES)

If multiple harder-to-employ characteristics are taken into account, in 2016, of the total number of unemployed persons aging 50+, 23,584 (41.55% women) were cash social assistance recipients, 13,177 (32.11% women) were unemployment benefit recipients, 6,234 (34.58% women) were also persons with disabilities, while there were 25,838 (41.05% women) of 50+ who were redundant workers.

The average unemployment period for persons ageing 50+ took 67 months in 2016.

Under employment policy paper (**i.e. National Employment Strategy Policy 2011-20**) an underlining strategic employment policy document, unemployed population aging 50+ are identified as a harder-to-employ, i.e. the prioritized category regarding their participation in active employment policy programme. The active employment programmes and policies are targeted at older persons as actions that are taken under the process of active ageing and life-long learning (LLL) and are intended to be instrumental in the acquisition of new forms of knowledge, skills, attitudes or values which in the outcome should spur activation and mobility at labour market as well as employment and self-employment.

**National employment action plan** (NEAP) is the basic instrument whereby identified strategic employment policy priorities and objectives are translated into tangible hands on programmes and actions that will be undertaken in the year as scheduled.

**NEAP 2016** (*Official Gazette of RS, 82/2015*) recognizes unemployed persons ageing 50+ as a category of persons requiring additional support in the process of reintegration into labour market. In other words, active employment policy programmes and measures are targeted at enhancement of employability for persons 50+ (in addition to their prioritized participation in all the employment programmes and measures, including:

- Participation of persons who are 50+ in the active employability enhancement policy measures;
- Employment of 50+ category by aid of subsidy / incentives offered for the employment of harder-to-employ category of job seekers;
- Promotion of entrepreneurship among 50+ population (subsidy amount is additionally increased for persons in the category of redundant workers);
- Public works engagement of 50+ job seekers who are in social need.

According to the data available with the National Employment Service, in 2016, **24,493** job seekers, of which 10,973 were women belonging to the referred to category of population participated in AEPs), which was 17,33% of a total number of the harder-to-employ population participating in the measures. Also it represented an increase by 1,63% (even when the coverage by active employment policy measures of the unemployed in 2016 contracted in comparison to 2015).

Table 5 Involvement of 50+ in ALMs in 2016

ACTIVE EMPLOYMENT POLICY MEASURES	50+	
	Total	Women
Active job search training	<b>4,490</b>	<b>2,193</b>
Self-efficiency training	<b>793</b>	<b>545</b>
Job loss stress management workshop	<b>407</b>	<b>265</b>
Job clubs	<b>228</b>	<b>149</b>
Job fairs	<b>11,613</b>	<b>5,088</b>
Start-up training	<b>2,606</b>	<b>979</b>
Apprenticeship	<b>9</b>	<b>6</b>

Traineeship	22	11
Training for labour market needs	168	108
Trainings on an employer's request	33	25
Functional primary adult education	172	109
IPA 2012 trainees	1	1
Self-employment subsidies	921	318
Subsidies to support employment of harder-to-employ categories of population	1,077	480
Income support for cash social assistance recipient	7	2
Public works	1,804	641
Wage subsidy for a person with disability without professional experience	137	53
Support measures for persons with disability	5	0
<b>TOTAL</b>	<b>24,493</b>	<b>10,973</b>

Source: 2016 Performance Agreement between the Ministry and National Employment Service

In 2016, 41.295 (39,18% women) cases of entering employment by persons who are 50+ and were registered as unemployed with the National Employment Service, whereas **9.229 (41,12%)** persons in this category found employed thanks to the NES job mediation and matching services.

### **Commitment 6:**

To promote life-long learning and adapt the educational system in order to meet the changing economic, social and demographic conditions

Adult education is integral to education system of the Republic of Serbia, enabling the adults life long learning, acquisition of competences and qualifications required for their personal and professional development, work and employment, as well as socially responsible behaviour.

Adult education is undertaken as formal education, informal education, and informal learning.

Adults are free to choose the avenue of acquisition of education and training or qualifications in line with their capabilities, including:

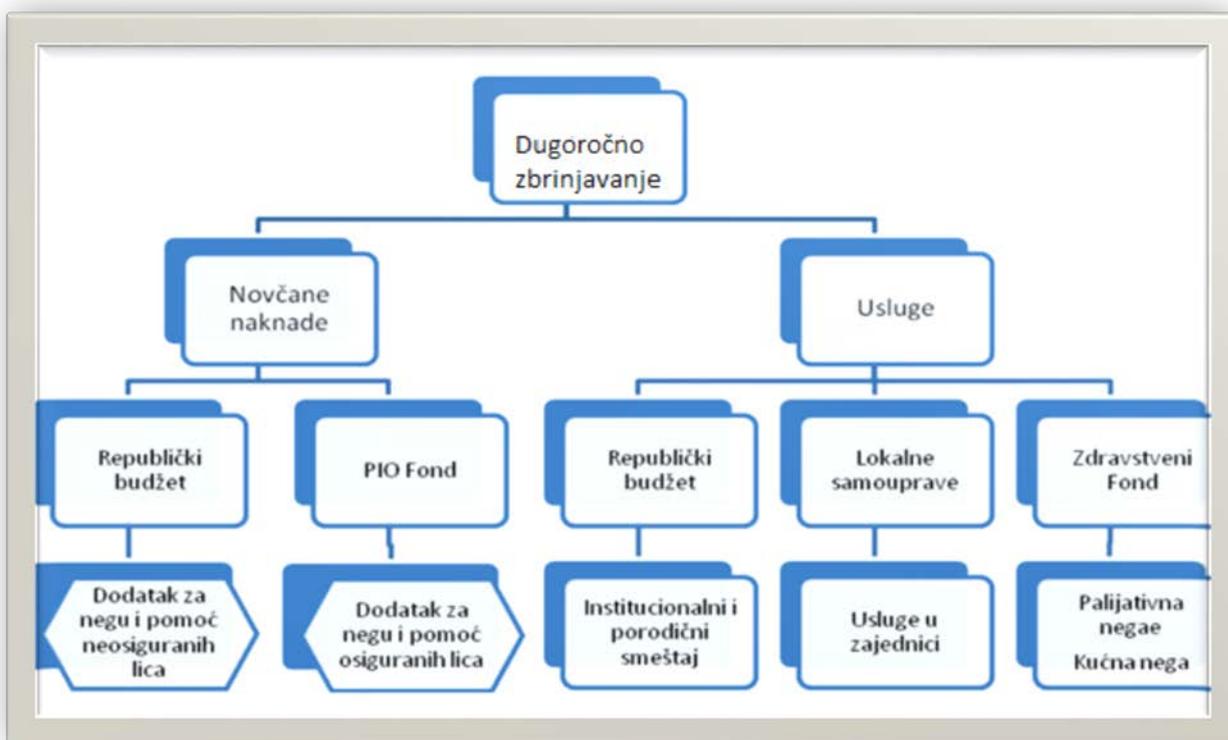
**Formally** – within the school system, by enrolling in certain programme of education as a regular student (only for those under 17 years of age), or as an irregular student (if above 17 years of age) and/or

**Informally** within the training system at **publicly recognized adult education activities organiser** (whether it is an institution or other organisation)

**Formal adult education includes** organized learning processes which are delivered based on primary and secondary curricula and syllabi, and based on other forms of vocational education programmes tailored to the adults` needs and competences and to the labour market needs

**Informal adult** education organized learning processes for adults based on special programmes for acquisition of knowledge, values, attitudes, competences and skills focused on personal development, work, employment and social activities of adults Approved programmes of informal adult education are conducted in elementary and secondary schools and other organisations with the status of publicly recognized adult education organiser for the concrete activities of adult education in line with the subject law and by-laws.

**Minister of education, science and technological development approved by-laws regulating in greater detail informal adult education and involvement of institutions and other organisations** (such as public agency, public enterprise, organization competent for employment affairs, company, entities dealing in occupational rehabilitation, registered



entrepreneurs, trade unions, professional societies, adult education organisations, people's, workers' and open universities, third age universities, professional advanced training organisations and centres, foreign language schools, ICT schools, human resource development and training organisations and centres, drivers schools and centres, chamber of commerce, career orientation and guidance, employers' association

Figure 2: Benefits, services and responses comprising long-term care system in Serbia<sup>16</sup>

cultural and educational centres, culture centres, and other subjects registered for educational activities under laws governing classification of economic activities), **in undertaking of adult education activities under the Adult Education Law.**

### **Commitment 7:**

**To strive to ensure quality of life at all ages and maintain independent living including health and well-being**

In Serbia, long-term care is in part regulated through cash benefits, and in part as an institutional care and home care provisions at local level. The provision of such a care within health care system is underway.

**Caregiver's allowance and increased caregiver's allowance** are cash benefits provided to recipients under the social welfare system and pension and disability insurance system. The beneficiaries are persons who due to their health condition and disability are not able to carry out their basic daily activities, independently of their material status. The amount of the benefits is adequate in relative terms. However, eligibility of the recipients is inadequately determined based on medical criteria. Therefore, a transition to using scales of assessment, or in other words, functional criteria to determine recipients needs would be

<sup>16</sup>Taken from "Social Welfare in Old Age: Long-Term Care And Social Pensions" Gordana Matkovic and Katarina Stanic, 2014

an acceptable option. As a result, the scope of older persons which is now assessed as unfavourable would be extended. Also, an effort needs to be made to inform potential beneficiaries on their rights and assistance offered with applying to receive the benefit. .

**Caregiver's assistance and care** is one of the most often used interventions of social care by older persons. They make 40% of a total number of caregiver's assistance and care beneficiaries under the social welfare system

Community based long-term care have not been sufficiently developed and accessible. Palliative care is provided to the recipients placed in institutional care, whereas the one under health care service is in the pipeline. The need for liaising between social care and health care is recognized. In particular, a network of social care and health care institutions need to be defined and established under the Social Welfare Law, which is essential for long-term care beneficiaries. Also, further efforts are required for establishing various aspects of support to members of family who are informal carers of their older members.

**Violence against old people** is placed in the focus of professional and general public thanks to primarily non-governmental sector. Social work centres under social welfare system are services which play the key role in the protection against violence, which monitor incidence of violence against old persons in the context of domestic violence. The role is founded on their role of guardian authorities and functions of protection of the best interest of the beneficiaries who are victims of various forms of violence, and the competences under the Social Welfare Law, Family Law, General Protocol for Action and Cooperation of Institutions, Bodies and Organisations in the Situations of Violence against Women within the Family and in Intimate Partner Relationship. Since 2014, the incidence of violence has systemically been monitored. In particular, it includes registering all the forms of violence against older persons. However, there are no reliable data available on the extent of violence against older persons in Serbia. However, based on the research conducted on older population, the assessment on number of older persons who are victims of violence are between 4% and 10% of a total number of older persons. The registry under social welfare system is not overall indicating that the record keeping of cases of violence is not sufficiently coordinated. In addition, a total number of registered cases of violence indicate that there is no sufficient awareness by victims of violence to effectively detect violence. Also, downplaying by the victims, expert community and the public of the seriousness of violence is recorded. However, the recognition of such a phenomenon in the context of older persons has remained marginalized. In five years, in a totally registered number of cases of violence that took place in centres for social work, 13 – 15% of cases are related to the violence against older persons.

In addition to the centres for social work there is an obligation imposed on residential care institutions (homes for old persons, shelters) to register, report and undertake defined actions and measures related to victims and perpetrators of violence taking place in the institutions themselves. Such record keeping and legally proscribed activities are mandatorily carried out by all the licensed social services providers.

National Programme on Preservation and Promotion of Health Care of Older People (hereinafter referred to as: Programme), adopted in accordance with the existing and

projected demographic trends, social situation and health status of older population, includes elements of health and social care. Integrated concept of the provision of health care for older persons including primary, secondary and tertiary health care, social support and social welfare services, occupational and supporting activities is about the interlinking of all the actors in protection of older persons with view to developing the society for all ages and promotion of good quality living and active ageing.

The most frequent health condition among older persons in the Republic of Serbia is high blood pressure, followed by blood lipids, diabetes, depression, chronic respiratory disease and asthma. According to 2013 survey on health of population in Serbia one in three inhabitants had walking difficulties, and one in nine with sight, and almost every fourth had hearing difficulties.

Health care services are provided at three levels, in particular:

- 1) at the primary level, in 159 health care facilities, health care is provided by the service of adult health care, home treatment and health care, and palliative care as well as multiple visiting nurse service, and by the Belgrade City Institute for Gerontology and Palliative Care,
- 2) at the secondary level in 41 general hospitals health care services are provided at geriatric wards, and long term treatment and care wards;
- 3) at the tertiary level, health care is provided at Clinic and Hospital Centre "Zvezdara" at the Elderly Medicine Clinic Ward "Profesor dr. Petar Korolija" (100 beds of which 98 in-patient facilities and two beds in day care hospital), and at Clinical and Hospital Centre "Dr. Dragisa Misovic" at Geriatric and Palliative Care Ward with 8 beds for elderly patients.

In 2014, in Serbia, a total number of beds without day care hospitals were 39.333, of which 13.146 beds for internal diseases treatment. The average bed occupancy rate (BOR) at the level of all health care institutions was 65,7%, general hospitals 58,7%, clinics 67,1%, clinics and hospital centres 59,2%, clinical centres 70,9%.

In Serbia, in 2014 the admission-to-hospital rate has for the first time been decreased since 2003 to 14.7%

The average length of the hospital-admission-rate was 8.8 days, which is by 0.1 day decrease in comparison to 2013.

Bed turnover or utilization capacity rate, as an average number of hospital incidences and/or a number of discharged patients as per one bed was 27.3 patient per a bed in 2014.

Based on the number of beds, and the average bed occupancy, number of discharged patients and average period of treatment which was eight days on average at internal medicine wards, and 13 days at continued treatment, it may be concluded that the Programme may be implemented within the existing capacities.

The capacity of the public social residential care for older persons is 12.088 beds. The institutions provide placement for functionally dependable beneficiaries, half-dependable and undependable patients. According to the decisions issued in 2014, 100 private old peoples' homes in Serbia Proper, a total placement capacity was 2.825 beneficiaries, of which 90 % of the total number of beneficiaries placed in private facilities are persons who are not able to move. In the Autonomous Province of Vojvodina there are 24 private homes for elderly, with the capacity of 591 beneficiaries.

### Social support to older persons

Health care for older persons need not be relegated to health care services, but should be the care of an overall community. Therefore, inter-ministerial cooperation is required, as well as the involvement of local government authorities, education and social care institutions, including associations.

To prevent ageism in health care service provision, old persons need to be involved in decision-making. Also, periodical review and revisiting of recommendations, instructions and guides of good practice in clinical treatment of old persons are required.

Furthermore, the overall personnel of health care and social care institutions for older persons needs to be duly trained and possess specialized knowledge as well as proven and positive attitudes to specific needs in old age, and to promote intergenerational solidarity at the level of an overall community.

The support and assistance for families of chronically ill and functionally dependent old persons is yet another critical aspect of social care for elderly persons. In particular, care provision for such patients requires considerable engagement and effort and leads to chronically stressed out members of family. Thus, they are in need of assistance and support in provision of daily care for their elderly members of family, from assistance in the effective receipt of health care and exercising of social care via absence from work to be able to provide care and financial support, to often needed expert assistance with gravely ill and immobile old people, including the institutions for short-term placement to ensure due respite to caring members of family. The need to organise services to provide psychological and social consulting at local level to the member of families who take care for older persons with mental handicap.

#### **Commitment 8:**

To mainstream a gender approach in an ageing society

The Republic of Serbia has ratified all the international and regional treaties and conventions that set up standards in the fields of human rights, women's rights and gender equality. It has also developed a broad anti-discrimination and human rights legal framework. The current gender equality strategic framework consists of the National Strategy for Gender Equality (2016-2020) and the Action Plan for its implementation (2016-2018) and the Strategy of Prevention and Protection against Discrimination and its Action Plan (2014-2018). Moreover, the Law on Gender Equality (Official Gazette of RS, No 104/09) which was adopted in 2009 obliges all public authorities to develop active equal opportunity policies in all areas of public life. A new Law on Gender Equality is drafted and is expected to be adopted in the forthcoming period. The new Law on Gender Equality is expected to enhance gender equality policies and understanding of the concept of gender equality as set by the international standards. Besides the overarching policy and legal framework, gender equality clauses are part of legislation in the area of employment, social protection, education and other. For example, National Strategy on Ageing (2006-2015) promoted gender equality and included affirmative measures for improving the status of older women. The National Gender Equality Strategy (hereinafter: Strategy) is the fundamental strategic document of the Republic of Serbia adopted to advance gender equality in the period from 2016 through 2020. The adoption of the Strategy is based on the Constitution of the Republic of Serbia which guarantees human rights envisaged in ratified international treaties, the generally accepted provisions of international law and legislation (Article 18, paragraph 1), provides for equality of men and women and the development of an equal opportunities policy (Article 15) and prohibits discrimination on any grounds, including gender-based discrimination (Article 21, paragraph 3). The Strategy identifies three main strategic objectives: to promote culture of gender equality and changing traditional gender patterns, to increase equality of women and men and improve the status of women and to apply systematic integration of gender mainstreaming in decision making, implementation and monitoring of public policies. The Strategy particularly focuses on improving the position of vulnerable groups of women, such as Roma, older women, women from rural

areas, women with disabilities etc. Older women are recognized as a group at high risk of multiple discrimination and are included in number of measures. The Strategy identifies the improvement of economic and labour market status of women as one of the objectives and it envisages creation of measures that will contribute to the formal employment of women, in particular older women and members of vulnerable groups. Also, women in rural areas are recognized as a vulnerable group so one of the measures specified in the Strategy proposes creation of conditions for rural women, including older women and other vulnerable groups, to acquire unimpeded access to adequate living standards and to earning income, and envisages securing a monthly income (pension, social welfare or similar) for rural women over 60 years of age. Moreover, the Strategy specifies that it is necessary to develop measures for combating different forms of discrimination predominantly faced by rural women, particularly women from vulnerable groups, such as Roma women, women with disabilities, older women and other.

The Government of the Republic of Serbia has expressed commitments to enhance gender equality and promote women's position by adopting a systematic approach to gender mainstreaming. The Strategy envisages that gender equality should be a part of planning, formulation and implementation of laws, policies and measures and that the impact of public policies on women and men should be considered throughout all phases. Therefore, the Social Inclusion and Poverty Reduction Unit created the Guidelines for Social Impact Assessment with a goal to provide evidence for decision makers regards the strengths and weaknesses of possible policy options based on the assessment of their potential impacts. A social impact assessment focuses on the effects for the population, i.e. employment and social groups, with a particular attention to gender aspects.

#### **Commitment 9:**

#### **To support families that provide care for older people and promote intergenerational and intergenerational solidarity among their**

The Government of the Republic of Serbia will make a decision on establishment of the Council for enhancement of intergenerational cooperation and solidarity.

The Council's tasks will be the following:

- 1) Connects two important, but vulnerable, social groups of youth and elderly in the Republic of Serbia;
- 2) Affects awareness raising on the relevance of intergenerational cooperation as a form of support among these groups;
- 3) Utilises working and creative potentials of these vulnerable groups, which result in establishment of cooperation and their participation in development of society, economic and public life;
- 4) Encourages and involves all relevant stakeholders who would act at all levels, creating better possibilities for active ageing and strengthening intergenerational solidarity;
- 5) Encourages efficient mutual support and cooperation between different age groups, which would jointly design innovative solutions for improvement of life quality of both older persons and children and youth, which would result in enhancement of social cohesion and solidarity among them;
- 6) Launches appropriate initiatives for development of cooperation with state authorities, professional, humanitarian and occupational organisations and associations, which would improve life quality in old age, childhood and youth;
- 7) Launches initiatives for changes and amendments of regulations, which lay down

- the matters relevant for social security and life quality of these age groups;
- 8) Suggests enhancement and directing of international cooperation in this area;
  - 9) Takes stands, gives opinions and through recommendations suggests appropriate solutions for undertaking suitable measures, which would contribute to enhancement of intergenerational cooperation;
  - 10) Considers the matters of scientific and professional disciplines enhancement in the area of caring for older persons, preschool children, school children and students;
  - 11) Monitors the situation regarding accomplishment of objectives of social protection of older persons, children and youth;
  - 12) Evaluates the effects of measures being undertaken and informs the Government of the Republic of Serbia;
  - 13) Initiates and supports different programmes and activities of intergenerational solidarity and cooperation and their implementation in overall society, economic and public life.

The Council will submit the reports to the Government.

**Commitment 10:**

To promote the implementation and follow-up of the regional implementation strategy through regional co-operation

On 21 and 22 May 2013 in Belgrade the fifth meeting of the European Bureau of the United Nations Working Group on Ageing took place. The meeting, hosted by the Ministry of Labour, Employment, Veteran and Social Policy was attended by 12 experts on ageing from 9 European countries. The Serbian civil sector was represented by the Red Cross of Serbia. The Red Cross of Serbia participated in the meetings of the UNECE Working Group on Ageing in the UN headquarters in Geneva, representing the civil sector every year of the reporting period (2012-2016).

In 2013 a representative of the Red Cross of Serbia participated in the Expert Group Meeting organised by UN DESA in New York. Milutin Vracevic, MD, talked about Abuse of Older Women.

In 2014 at the 5<sup>th</sup> session of the Open-Ended Working Group on ageing in the United Nations Headquarters in New York the Red Cross of Serbia was represented by Milutin Vracevic, MD and Natasa Todorovic. Milutin Vracevic participated in a panel on Violence and Abuse Against Older Persons and talked about financial abuse of older women. (<https://social.un.org/ageing-working-group/fifthsession.shtml>)

In 2016, the Red Cross of Serbia with regional partners started the implementation of a three-year project Taking Action on Social Inclusion of Older People. The project, supported by the European Union and coordinated by the Red Cross of Serbia brings together civil society networks in five regional countries (Albania, Bosnia and Herzegovina, Macedonia, Montenegro and Serbia) in supporting social inclusion and participation of older people. (<http://tasop.org>)

Since 2014, the Red Cross of Serbia is affiliate of HelpAge International and is active at national level in all their global campaigns and initiatives. Also the Red Cross of Serbia is the national representative for Serbia in International Network for Prevention of Elder Abuse (INPEA). The Red Cross of Serbia representative Natasa Todorovic spoke on behalf of INPEA at the 10th World Conference on Elder Abuse, Dublin, Ireland, 22 April 2015, about activities of countries in European region. <https://youtu.be/EHeiWsFeuUc>

Regional Andragogic Academy was a three-day event in 2012 for 25 experts from the region discussing education of older people organised by the Adult Education Society.

In addition to the mentioned meetings, Serbia as a state member supports the cooperation between the UNECE countries in the field of ageing. Serbia regularly participates in all international events on ageing through its representatives.

## CHALLENGES

Challenges can also be identified in the fields of adjustment of services to individual users' needs, improved method of defining criteria for users' selection, entry of services evaluation elements from users' perspective, intensifying support to civil society organisations as providers of social protection services, as well as in the area of enhancement of standards and care quality in residential institutions.

Availability of long-term care service is bigger in urban than in rural areas of the country. The biggest challenges in practice are in improving availability of social protection services in rural, distance areas, as well as in increasing level of information on the rights of older citizens. Availability of health and social services for older persons is significantly reduced in the northern part of Kosovo and Metohia.

There are insufficiencies in regulations which would be binding for persons involved in elderly care to undertake certain actions and especially, to establish cooperation (cooperation between departments; cooperation between public and unprofitable and private sector, cooperation between national and local level; cooperation between persons involved in urban and rural area).

Data on volume and types of subsidies for housing expenses, which are allocated by certain local self-governments have not been systematised yet.

Support to informal caregivers and bigger support to the family which takes care of older and sick people is also one of the challenges for the forthcoming period.

