**Intervention - The Human Rights of Older Women**

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1. What legal instruments, policies and programmes exist to address the particular challenges faced by older women, and how are they implemented and monitored?

There are two prongs of legislation that are applicable in this set of issues, the ones focusing on women’s rights and gender equality and the ones focusing on the rights of older population. The first group includes the Constitution of the Republic of Serbia, the Law on gender equality, the Law on prevention of domestic violence, the Criminal Code and the Law on prohibition of discrimination, while the second group includes the Law on social protection, Strategy for prevention and protection from discrimination and Ageing strategy (that is in development), as well as the recently written, not yet adopted National Strategy for Prevention and Combating of Gender Based Violence Against Women and Domestic Violence 2021-2025. Most of these documents – except the newest Strategy – do not specifically address older women as a group, though and it can be said that their visibility is low in the current legislation, data collection and reporting.

2. What type of statistical data are collected on older women, if any, and is it disaggregated by age, gender, and other relevant factors? How are older women defined for the purposes of law, policy and data collection?

This differs depending on the part of the system. The system of social protection, through its Centres for Social Welfare and other means, collects different data on older population and in this case, it is not uncommon to find data disaggregated by gender and age, although it is still quite rare to have fine-tuned analysis that would, for example, work with five-year cohorts. On the other hand, the healthcare system does not recognise the need for data disaggregation and what’s more, older women are often bundled with pregnant women, young mothers, and women with disabilities, in a group labelled as “marginalised women” which tends to be quite confusing in terms of creating and implementing data driven policies. The data collected by the police is the most systematised, disaggregated by gender and age and has additional information about the relationship with the perpetrator.

3. Please indicate how older women take part in participatory mechanisms?

There aren’t any notable organisations of older women in Serbia. There are organisations of older persons and some of them are lead by women, but their participation in any mechanisms related to public policy is not regular and they usually cover the whole spectrum of older population in their advocacy activities. The representative of the Red Cross of Serbia, as a cluster organisation that works in ageing and with older persons, has participated in the work on development of the abovementioned National Strategy for Prevention and Combating of Gender Based Violence Against Women and Domestic Violence 2021-2025 and her role was specifically to ensure the perspective of older women is represented in the Strategy. The Strategy will be entering public discussion in April and will be adopted by summer.

4. What are the specific challenges and concerns faced by older women, including on the basis of their accumulated life experience as compared to older men, in enjoying their economic, social and cultural rights (for example in terms of social protection, health, education, work, adequate standard of living, land and property ownership)? Please provide related data and statistics, including disaggregated data, where available.

A research study done by the Red Cross of Serbia in cooperation with SeConS Development Initiative in 2018[[1]](#footnote-1) showed that there are notable gender differences in Serbia expressed in terms of material deprivation. In the population under the age of 64 severe material deprivation is somewhat more prevalent in the male than female population, while among the over 65 population there is a greater representation of severely materially deprived women than men. The oldest women are also the most exposed to severe forms of material deprivation. As an illustration, the research showed that almost a third of women over 65 in Serbia do not own more than one pair of shoes. Older women report deprivation of different kind more often than men. They are more often unable to spend small amounts of money on their own without consultation with others, to afford to go to sports or cultural events, to gather for a drink or a meal with friends or family, to replace worn-out clothes. 20% of older women report not being able to spend their money independently, versus 13.9% of older men. At the same time, the burden of costs of living is greater for older women (22.6% vs. 16.7% for older men) as their income is on the average lower than for their male peers and as they are more likely to live in single households. Perhaps most notably, among the population over 65 not covered with any kind of pension, there are 8% men and 17% women.

5. What forms of gender-based discrimination and inequality experienced by women throughout the life cycle have a particular impact on the enjoyment of their human rights in older age?

Perhaps most significant of all is employment/ labour policy and practice which is legally structured equally for all, but in practice the structure of life choices for women and men is not the same. Social norms at play still dictate the direction women and men will be taking at crucial points in their life cycles/ careers, with women still being largely expected to sacrifice their careers to an extent in order to dedicate time to the family and this is an issue that still consistently creates imbalance in power and income gap. These social norms and expectations have some women working lower paid jobs and having large gaps in their working life so their income after the retirement age is on the average lower than for men. Another compounding issue is related to inheritance, where, upon their husband passing, older women are expected to immediately pass their part of inheritance on to their children which again puts them in insecure position in terms of income, property and living arrangements, putting many older women in dependent position.

6. Has the COVID-19 pandemic affected older women differently than older men and how?

One of the main differences between older women and men in the context of COVID-19 pandemic is related to the fact that older women are much more likely to be informal caregivers to their immediate family members, relatives, or neighbours and that the strict restrictions of movement for older persons drastically affected their ability to provide care. Care at home during COVID-19 was one of the pillars of health support to persons with COVID-19/ persons with possible infection, as well as to many other persons needing care, but informal caregiving and its challenges went unrecognised by the healthcare system during especially early period of the epidemic. Later on, informal caregivers were recognised as a group that can apply for special permits that allowed them to move during curfew hours but on the average, informal caregivers have worse physical and mental health compared to their peers not providing care services; they are also at a higher risk of depression.

7. Please share examples of how older women participate in and contribute to economic, social and cultural life, including inter-generational solidarity and support

A very recent example, related to COVID-19 pandemic shows how important it is to remember that volunteering is an activity that makes a large contribution to the society and yet its economic and social impact is not sufficiently measured or recognised: during the state of emergency in Serbia between March and June 2020 older persons were indiscriminately under a very strict curfew seven days per week with only one three-hour slot for grocery run. The Red Cross of Serbia has a significant body of volunteers over 65 who are very active in supporting their peers in need but they were also forced to stay at home as anyone else in their age group. However, they continued volunteering from their homes, using telephones, text messaging services, even online communication applications. They not only provided valuable psychological first aid and psychosocial support to their peers, but they also contributed to data collection and informed the local authorities about the needs of their peers that would otherwise go unregistered and unanswered.

8. What forms of structural and systematic discrimination do older women face (for example through laws, policies, traditional and customary practices, etc.) and what measures have been taken to address them?

The structural discrimination against women does not lie with legislation – which is mostly agnostic when it comes to gender, or has positive bias towards women – but it can still be found in many practices. One was mentioned above – related to inheritance of property where older women are expected to sacrifice their right in favour of their children – but there is another large issue affecting women living in rural areas and putting them in an unequal position. In many rural households despite the fact that both husband and wife work on land – and the wife typically has also all “standard” household duties on top – only the husband is registered as an agricultural worker and it is only him that will be receiving agricultural pension upon reaching the retirement age. This is a widespread phenomenon – most commonly due to this is the way for the household to save some money for the current costs – and is affecting women in rural areas across the country, putting them in an unequal position in the older age.

9. How do intersectional factors exacerbate the combined effect of ageism and sexism, including the perspective of older LGBTI women, older women with disabilities, older migrant women, older women belonging to indigenous and minority groups, etc.?

There is no precise data on this but it can be said, with a degree of certainty that all these factors contribute to social exclusion and poverty that are main manifestations of inequality older women face.

10. What forms does gender-based violence and abuse against older women take and how is such violence prevalent? Please share available data and statistics, including in relation to femicides.

According to the research study done last year, 16.1% of women over 65 have been targeted by some form of violence in the past 12 months while 55.4% of them have experienced violence in their lifetime since age 15. Furthermore 7.7% have experienced partner violence in the past 12 months (40.3% over a lifetime), with psychological violence experienced by 7.3%, sexual violence by 0.8% and physical violence by 1.2%. Only one older woman in the sample reported violence.[[2]](#footnote-2) The statistics related to femicide are alarming not only because the overall frequency does not seem to decline over several years but also because older women make an increasing share of murder victims in this statistic. In 2015 women over 65 made up for 11.54% of all murdered women, in 2015 this share climbed to 26% and in 2020 it is at 30.8%. Current husbands and current partners are the most frequent perpetrators – 30.8% in each category – but sons and adopted sons also come in at 7.7% both. More than half of all the murders are in the shared family apartment and in more than 80% of cases there were no previous reports of violence.

11. Please provide examples of how the life cycle perspective is integrated into policies and programmes to prevent and address gender-based violence against women and girls.

There are only recent developments in this area with the mentioned National Strategy for Prevention and Combating of Gender Based Violence Against Women and Domestic Violence 2021-2025 actually including female experts of different profiles and ages in the development process as to ensure perspectives of different groups in the population of women are included, which includes older women as well.

12. Please share information about reporting, accountability, remedy and protective mechanisms available and targeted to older women victims of gender-based violence and discrimination.

The Rulebook on Organisation, Norms and Work Standards of the Centres for Social Welfare is a legally binding document stipulating a lot of accountability measures. Some of the notable stipulations include:

The Centre is obliged to organise its work in such a way as to enable the availability of services to all those who need them, with special attention focused on vulnerable groups (children, the elderly, the disabled, members of minority groups, etc.).

 (1) Internal organizational units shall be formed if at least ten employees with appropriate education are engaged in professional activities in the centre. (2) The basic internal organizational units are: - service for protection of children and youth; - **service for the protection of adults and the older persons**; - Legal Affairs Service; - service for financial-administrative and technical affairs. (…) Services for protection of certain groups of users - children and youth or adults and older persons, may be formed if the centre has at least six employees, three in each service, with one of the experts performing the duties of the head of the service.

When responding to a report of violence in the family, the initial assessment assesses whether there is a history of violence in the family, substance abuse, diseases, support for extended families. It is determined whether the family members are working, whether the family has income and how it is used, whether there is adequate housing and is it the family’s property, is it socially integrated or isolated, what status it has in the community.

In 2015 the Republic Prosecutor issued a binding guideline ordering the appointment of one holder of the public prosecutor's office at the level of all basic and higher public prosecutor's offices, who, as a contact person, will be in charge of work, monitoring and cooperation with other competent institutions and bodies in connection with crimes against sexual freedom and criminal offenses and acts against marriage and the family, which includes domestic violence.

According to the current Law on Prevention of Violence in the Family the group for coordination and cooperation consists of representatives of basic public prosecutor's offices, police administrations and centres for social welfare, from the area for which the group is formed. The group considers every case of domestic violence that has not ended with a final court decision in civil or criminal proceedings, cases when protection and support should be provided to victims of domestic violence and victims of crimes under this law, develops an individual plan of protection and support to victims and proposes public prosecutor's office measures to end court proceedings. The Coordination and Cooperation Group holds meetings at least once every 15 days.

The same law stipulates creation of Individual Protection and Support Plan in cases of family based violence. Through this plan measures and services to be provided to ensure the safety of the person surviving violence are planned. They are aimed to stopping violence, preventing its recurrence and protecting the rights of the survivor, as well as to enable the survivor to be provided with psychosocial and other support in order to support their recovery, empowerment and independence. During the creation of Individual Protection and Support Plans the Coordination and Cooperation Group takes into consideration different risks related to older age such as functional status, cognitive problems, osteoporosis etc.

1. Part of the project unded by Eiropean Union and Austrian Develppment Agency: <https://www.redcross.org.rs/en/resources/publications/social-inclusion-of-older-persons-65plus-in-serbia/> [↑](#footnote-ref-1)
2. Database used was created through research study on the safety and well-being of women in Southeast and Eastern Europe, which was conducted in 2018 with the support of the OSCE Mission to Serbia. [↑](#footnote-ref-2)