



PHILANTHROPY
THE CHARITABLE FOUNDATION OF
THE SERBIAN ORTHODOX CHURCH



DISCRIMINATION OF RURAL POPULATION: QUALITATIVE STUDY

With funding from
 Austrian
Development
Cooperation

Caritas
Austria



Diakonie 
ACT Austria


AUSTRIAN RED CROSS

Authors:

Aleksandra Bozinovic-Knezevic

Violeta Andjelkovic

Vladimir Antic

Editor: Dragan M. Makojevic, Philanthropy, Charitable Foundation of the Serbian Orthodox Church

Reviewer: Aleksandra Bozinovic-Knezevic

Publisher: Philanthropy, Charitable Foundation of the Serbian Orthodox Church

Printing house: Bernar Publishing Agency, Serbia

Circulation: 300 copies

Year: 2022/2023

Disclaimer:

Printing of this research was supported by the ADA (the Austrian Development Agency). Its content is the sole responsibility of the publisher, and under no circumstances can it represent the ADA's views.

All statements quoted in this document are the views of the respondents and do not necessarily reflect the opinion of the author or the official opinion of the publisher.


Contents

Abstract.....	4
Introduction	6
Method	7
Research limitations.....	9
Characteristics of the research sample.....	10
Research results	11
Discrimination (the term and understanding)	11
COVID-19 impact on discrimination.....	15
Personal examples of discrimination (private life)	18
Discrimination cases in closest environment.....	23
Discrimination in the healthcare system	28
Discrimination in the social protection system.....	42
Discrimination in the area of labour and employment (income security)	48
Discrimination in educational system.....	53
Legal remedies' application	56
Discussion: Participants' recommendations for reducing discrimination	62
Conclusions	65
Recommendations	67
Social services mapping and monitoring their availability for rural population.....	68
Lucani	68
Kragujevac.....	73
Kraljevo	77
Conclusion.....	80
Recommendations	81
Media content monitoring.....	83
Analysis of collected data	85
Violence / Gender-based violence / COVID-19/ Assistance to women	86
Village/older persons/help for older persons/COVID-19/pensioners	90
COVID-19/village/help for rural population	94
Service information about COVID-19/ information on infection.....	96
COVID-19 (social welfare assistance).....	97
Conclusion.....	98

Abstract

Stigma towards rural population, which often turns into discrimination, is not an isolated social case but an equally present form of discrimination. The prohibition of discrimination is very clearly defined in the regulations of the Republic of Serbia, but, in practice, the situation shows that there is significant discrimination. This research aims to analyze how much the population in rural areas recognizes the violation of rights as such and how familiar they are with the possibilities to exercise their rights. The research was carried out as part of the project "CONEX Balkan: COVID-19 Nexus response for improving the socio-economic situation of marginalized people in 6 Western Balkan countries", and was conducted by Philanthropy, Charitable Foundation of the Serbian Orthodox Church and volunteers and associates in the villages and municipalities of Kragujevac, Kraljevo and Lucani. The project "CONEX Balkan: COVID-19 Nexus response for improving the socio-economic situation of marginalized people in 6 Western Balkan countries", is implemented by Philanthropy in Serbia, in cooperation with Diakonia ACT Austria, supported by the Austrian Development Agency. Besides Diakonie and Philanthropy, project partners in other Western Balkans countries are Caritas Austria, Red Cross Austria, CARE, KHCS Mother Teresa, Budućnost, NEXUS – Vranje, Otaharin, AGROPLAN, EKO-BUDUĆNOST.

Qualitative research was conducted during the period from March 2022 to May 2022. Data were collected through individual interviews. 60 respondents, age 18 to 72, were interviewed, among them 32 women and 28 men. The research showed that the population in rural areas recognizes discrimination in health care and social welfare, labour and employment, the pension system, education, and especially in family and personal relationships. Although they recognise discrimination, people generally do not use the existing possibilities of the system to oppose it. The reasons are multiple: insufficient knowledge of legal procedures, the experiences of others that speak in favor of the fact that it is very difficult to change anything, distrust in the system, and fear of further presenting information about their problems in public, which above all concern private life. What the respondents see as the basic way to protect themselves from stigma and discrimination is to keep silent about their problems or confide in a small



circle of people. They find protection procedures that would be applied in case of a violation of their rights as risk of further discrimination. Respondents, too, recognize that there is a legal prohibition against discriminating against anyone and on any basis, but they rarely see themselves or some of their actions as discriminatory. In some cases, long-term exposure to discrimination, especially within the family and in personal relationships, leads to the internalisation of stigma and impaired mental health. In this context, these individuals additionally lose their capacity for self-representation and exercising their rights.

All of the above prevents the use of existing mechanisms in cases of discrimination against the population in rural areas and requires their empowerment, additional information, and education about rights and obligations in various areas of personal and social life. Also, support for exercising rights and complaining about the work of official service providers with a view to recording and promoting positive examples is necessary. Finally, continuous action at the structural level, with the aim of reducing the general stigma and discrimination against the rural population is crucial.

Keywords: population in rural areas; stigma and discrimination; discrimination; health care and social welfare system; labour and employment; family and personal relationships.



Introduction

Project "CONEX Balkan: COVID-19 Nexus response for improving the socio-economic situation of marginalized people in 6 Western Balkan countries" is supported by the Austrian Development Agency. Activities on the project are directed at improving the socioeconomic position of the rural population.

Assessment of discrimination of rural population aimed to examine knowledge and attitudes towards discrimination, determine possible cases of discrimination before and during COVID-19, as well as conduct systematic monitoring of discrimination if need arises.

Philanthropy would like to thank the team that worked on the preparation of the qualitative study, and particularly the respondents who gave their immeasurable contribution to its realisation by sharing their personal experiences. That enabled obtaining guidelines only for this study, but also for further work on reducing stigma and discrimination against rural population.

Method

In order to provide an overview of different perceptions and experiences related to cases of discrimination, qualitative research was conducted. This method provides better insight into the diversity of experiences among respondents, their understanding of discrimination, and protection options. The research was conducted in rural environments in three municipalities: Kraljevo, Lucani, and Kragujevac.¹ Data collection was carried out from March to May 2022. In total, 60 people participated in the research, conducted as individual in-depth interviews.

The basic eligibility criteria for participation were that the respondent resides in one of the villages in above mentioned municipalities and is an adult. Efforts were made to respect birth, gender, and age during the outreach work. Further text will provide characteristics related to respondents' sample. The sample was purposive, targeted after initially meeting the conditions for participation in the research. The associates respected additional conditions while selecting and calling participants, including age (up to 30 years, from 30 to 65 years, and 65+), gender (men and women), which resonates with categories of the population targeted by the project. On average, six to eight interviews were conducted per day, and depending on the municipality.

The survey organisers' profiles differed. Kraljevo and Kragujevac organisers were associates who conduct activities for the older persons and creative workshops for women in villages. In Lucani, an associate from the Centre for Social Work has been appointed to organise the interviews. During respondents' selection, the diversity inclusion has been denoted even though some of the respondents were already included in some of the project activities.

The interviews were conducted in the premises of villages community areas in Kraljevo and Kragujevac and in the Centre for Social Work in Lucani. Philanthropy Project Coordinator, highly experienced women, conducted all the interviews. All participants were informed about the research goals, participation modality, procedures

¹The mentioned municipalities are also project cites.



for processing and storing data, methods of respecting anonymity and voluntariness of participation in research, as well as confidentiality of data received from the research. After the information was provided, respondents gave written consent to participate in the research and be audio recorded.

Data were collected through individual interviews with respondents, all eligibility criteria for selecting participants were complied. A thematic guide was used for the interviews. This guide included following thematic areas:

- Definition of discrimination;
- COVID-19 influence on discrimination;
- Personal examples of discrimination (private life);
- Cases of discrimination in community;
- Systemic discrimination (health care and social welfare, labour and employment, education;
- Respondents' recommendations for reducing discrimination in rural areas.

The interviews lasted 45-60 minutes and were recorded in audio format. The audio recordings were transcribed verbatim, from word to word, by the Philanthropy staff. The transcribed conversations were coded using a codename key, which was subsequently developed. The code key was designed by using the guide's basic themes, as well as by identifying the themes that appeared in the course of conversations. The topics were further segmented into identified subtopics, such as the impact of COVID-19 on everyday life, position of women in rural areas, gender equality, gender-based violence, and others. After coding, the data were further analysed interpretively.



Research limitations

Study results should be taken with some reservations. Respondents were individuals invited and willing to participate in the conversations. However, some respondents who had agreed to participate did not appear in the end, which leaves the possibility that their experience may differ from those who did participate. Also, the topics were processed in relation to the experiences of the respondents alone, so some significant topics that stayed out of the respondents' framework may have been unprocessed or not processed enough. Respondents were invited by Philanthropy associates, so some of them were Philanthropy's project beneficiaries.

Characteristics of the research sample

- Gender: 32 women and 28 men
- Employment status: 34 pensioners (22 agricultural, 6 family, 3 disability, and 3 age-based pensions), 14 employed, 6 unemployed, 6 pupils and students.
- Education: 4 university education, 4 higher education, 14 high education, 11 trade school, and 27 primary education.
- Age: 8 respondents aged 18-30, 18 respondents aged 30-65, and 34 respondents aged 65+.
- Persons with disabilities: 4 respondents with disabilities; two women and two men, all disabilities acquired during life.
- Nationality: The question about the nationality of the respondents was not asked, but during the interview, two women declared themselves as Roma.
- Project beneficiaries: 35 respondents were participants in the project implementation/beneficiaries of certain services (creative workshops, home-care assistance for the older persons, recipients of humanitarian kits of CVA).

Research results

Discrimination (the term and understanding)

Discrimination is often discussed, but it is not always clear what it implies, as discrimination is oftentimes mixed up with other violations of human rights. At the beginning of each interview, the task was to determine whether there is a clear understanding of the concept of discrimination with the respondent. Participants were politely asked to define the term, to state personal examples of discrimination or examples of discrimination in their surroundings. Among the respondents, the predominant understanding is that discrimination is specific, negative treatment of a person, exclusion, rejection, avoidance, denial of service to a person or inability to exercise rights, or something similar, based on certain personal features. Again, respondents also defined other types of human rights violations (mobbing, corruption, various forms of violence, improper behaviour of public authorities).

During this part of the interview, no additional questions were asked when defining the concept of discrimination. Respondents were encouraged to express their own views on the concept of discrimination, without any additional influence on them,. Some of the provided definitions of discrimination are:

(M, 61)

- Discrimination is when someone insults you because of something. That they insult you, that they will not help you when it is needed, simply what every person, if they have a little bit of kindness, would do.

(F, 50)

- Underestimation, a different attitude, a completely different behaviour.

(F, 32)

- When they treat you as if you are less worth.

(M, 34)

- Discrimination is when other people or authorities act to neglect or endanger you.

(F, 19)

- Well, for example, when they make fun of me when I dress nicely and look good, when I take care of myself, then they say to me: "Oooops, new style".

(M, 68)

- Different standards towards you compared to others. When we have two standards, and there should be one. And that one is prescribed by law, but you do not respect it.

(M, 69)

- When they underestimate you because you are sick, they think – if you are sick, you are useless.

(F, 60)

- Discrimination is the absence of empathy. When ignorance and disrespect prevail.

(M, 62)

- When you are arrogant, when you do not care about others and their needs.

(F, 72)

- When you are less worth because you are a woman.

(M, 70)

- Discrimination is when respect is no longer important. People used to know what is right and no one talked about discrimination. People used to know what is shameful, and now, no one cares anymore. They compete to insult each other today.

(F, 45)

- When they somehow keep you aside, and usually your own closest ones, no matter what you do and how hard you try, somehow you are excluded.

(F, 72)

- Discrimination of the elders, that is what I am experiencing – it does not matter if you can do many things, you are old, you are no longer fast and beautiful, and you need to be run over.

(F, 55)


- When you are bullied and tortured at work.

(M, 72)

- Discrimination is the avoidance of those from the cities; they come only for the elections. They do not want to talk to us about local community renovation.

Speaking about the prohibiting discrimination legislation, several respondents mentioned the Law on the Prohibition of Discrimination, while the others did not have a clear notion of legal regulations related to the discriminatory behaviors. However, regardless on the familiarity with this topic, most respondents assess that laws are neither well-introduced to the population nor applied.

According to the opinions of the respondents, the alternative to solving issues legally is acquiring knowledge and return to traditional values. As one respondent denoted:



(M, 69)

- When you are well brought-up and knowledgeable, it is highly unlikely that you will discriminate someone, and, on the other hand, you will know how to respond in case of being exposed to injustice.



COVID-19 impact on discrimination

Taking into consideration the age group, most of the respondents are 65+ years, and were under rather long lockdown (movement restriction) measures during the initial period of the pandemic. Other respondents were devoted to work, children, education (online schooling) and families. Older persons, if living alone, were assisted by relatives and neighbors regarding provision of groceries, they took care of their houses and gardens, they were reading and as stated by majority, were spending most of the time in their yards.

Those living in extended households stressed they complied with health protection measures and took care of older family members, as all media emphasised the importance on taking care of the older persons. Elderly people were mostly isolated in specific parts of houses, especially if the households consisted of employed persons having immediate contacts with other persons.

Paragraph below presents a few thoughts of respondents on how they experienced the beginning of the pandemic emotionally, as well as some cases of discrimination in that period (N.B: bolded text are interviewer's questions).

(F, 72)

- I got the infection and was staying at home, while my neighbor had it and he was walking around the village all the time. Everyone knew this and nobody reacted.
- **Why didn't you react?**
- Because he has a support, you know. He is from the party.
- **Do you think his political party approves his behavior?**
- I don't think so, but they would not punish him. He would not pay a fine, they would take care of it. And this should be punished – just walking around and spreading the disease.

(M, 70)

- The fact we were in lockdown, closed, that is discrimination. We, older persons, were forbidden to move as if we were in the concentration camps. I have a garden and the weather was nice, but how did older persons in the apartments feel like?
- **What sort of feelings did lock down trigger for you?**
- Anger. That was an insane decision, to lock people up.

(F, 72)

- I was going out even though they forbid it. I went to the field and garden and the police was passing by at 5pm – this was the curfew starting time. I was looking at a watch, stooped to hide, and kept working when they were gone. Then I was going through my neighbor's garden to my house. The lockdown was injustice. It is not enough we are old and alone, but also locked down. I was going out carelessly, I didn't mind, let them write the fine. If I were not going to the field, everything would grow into weed. I need to feed myself and sell something. I am alone.
- **So, you were consciously breaking the rule?**
- Yes, absolutely. The police were writing some fines in the village.
- **Were they also going to the fields to work?**
- No. They were going out to drink. They would wander around in others persons' gardens, trying to find their houses in the middle of the night (laughter)... And they were saying you could not get infected outdoors, being at distance for example, and I am alone in the field. But you cannot know these things, I swear by the Holy Cross... and those who were introduced the measures were confused with measures...

(M, 18)

- We did not respect those measures. I organised parties and some of the neighbours reported us to the police. The police would come, tell us to leave, so

we would remain silent for a while and then party again. The curfew was a nonsense. COVID-19 is just an intensified and massive flu.

- **Where were your parents then?**
- In Belgrade. My dad works there and my mom does not live with us.
- **Were you organising parties when your father was home?**
- No, he would not allow me. He has a different opinion on COVID-19. He respects measures, he was vaccinated.

(F, 63)

- Measures and movement prohibition were not respected in the villages.
- **Why do you think this happened?**
- People here live differently than in cities. They have to go to the field. If you wear a mask here, people laugh at you. Maybe, in the first few months, but after that people wore masks only when going to the city, to the doctor's or bank.

(M, 70)

- During the lock-down, everything was intense here. The villagers did not want to wear masks and keep distance and they fooled around, until a young woman died of COVID-19. Then all the people got scared. But, this was for a short period of time. People memorize things shortly.
- **Are they all the same?**
- Most them, yes. Those who got infected or had someone who died were not the same and they acted differently. It is the same as with all other things. If it haven't happened in my house, I don't care about it.

It can be concluded that opinion on unnecessary of lockdown was prevailing and that after restrictions were reduced, just a small part of the population followed up the protection measures. There were bigger gatherings happening such as weddings, birthdays, attended by large number of people. The measures were not followed up in these situations, so many people got infected.



All the respondents agreed that people were more solidary during the challenging times by delivering food to older persons, going grocery shopping, taking care of children when parents had to work or got infected. Also, the respondents these reactions would occur for short period of time and then people would go back to their regular routine.

Personal examples of discrimination (private life)

More than half of respondents stated they never experienced discrimination in their private lives. One may assume that some felt embarrassed to openly speak about their private life, specifically because this research was conducted in small communities where most people know each other. Those sharing personal examples mostly complained on pressures they are exposed to within the family, by their partners, children or closest relatives, and most commonly, it referred to psychological, mental and emotional violence, and, in some cases, a physical one.

Some of the statements were very authentic and respondents showed evident emotions while sharing out, so in those cases no further explanations or questions were asked. Respondents were asked to share discrimination cases which happened in the last 5 years of their life.

(F, 69)

- I have been a widow for three years now. My husband was an alcoholic and a womaniser. He would go to the bar and drink the entire earnings in three days. Then I needed to handle everything, along with three daughters. I was giving birth until the third child. When the third female child was born, my husband's family said: a squaw – and they never came to see her. He did not beat me, but when he would come home, he would break things and throw them all over the house and garden. Luckily, my sister lives next to me so I would run away to her house. I spent half of my life waiting for him to come back. Now, all of my daughters are married, he is gone and I sleep peacefully...

(F, 72)

- I've put up with difficult things in my first marriage, mostly psychological ones. He was always supervising me. I was working in a company with clients, I just had to have a proper hairstyle, my nails done. He monitored the exact time when I was leaving the work and had to come home. If I was late, interrogation would start, as if we are in the police station, he would swear. Then, when he slapped me while boozy, children were already bigger, an older son reached his maturity and the younger one was a high school graduate, I packed my things and left. And let me tell you, I saved myself. Luckily, I was financially independent so I could leave. He would mentally destroy me. I blame my children for never being on my side. I am looking at both of them now – they are same as their father...

(F, 45)

- I married very young, I was not even 20. As soon as I gave birth to the first child, my husband told me I should not work because we had everything we needed. My husband is mama's boy, it always acts like mama says. Today after so many years, my children are already adults, two of them at universities in Belgrade, I am still a stranger in this house. I am always presented I won't have the last word in this family. If I put a remote control at the table, someone will come and move it. I got an autoimmune disease. I wonder why I put up with all those things. When someone outside my family look at us, everything seems to be ideal: a big house, beautiful children, huge household, we have it all. Never envy anyone, you never know what people are going through.

(M, 72)

- My son hit me. The police came. Shameful, scandalous. When he drinks, he gets crazy and beats anyone who crosses his path. He was in the prison and that was the only moment I was restful. I was not worried in which shape he will come to house. My daughter is nice, she works in Kragujevac, but she is only interested in her phone. She cooks and do my laundry, but we are strangers. We barely speak.

She is blaming me I supported my son and not her. She is right. I thought she would marry and leave me, and he would stay with me. But, all popped out differently.

(M, 69)

- When I got sick and lost my eyesight, which happened gradually, I had a few surgeries in Belgrade. Some of my cousins thought blindness is infectious so they ran away from us as if it is plague. I asked one cousin why he was not stopping by anymore at our place; he said he did not have time because he worked a lot. Then I told him to find some time and come. I even told him I was lucky for not seeing his ugly face anymore. Actually, I am protecting myself this way, with a black humor. I am still the same person, I just cannot see you anymore.

(F, 55)

- My husband had an affair with our first neighbor. The whole village knew it. I would die of shame. We were social benefits' recipients. I was cleaning houses and he would never do anything but going to his mistress. I decided to get a divorce and went to the local community office where I was informed about everything. I submitted documentation for divorce on Monday, and the next Monday he got a heart attack and died. My son took it badly, he started behaving really bad. I sent him to my sister's in Kragujevac to attend school there. Now, I am working and I feel much better.

(F, 54)

- My children went to Germany, but they do not take care of us that much. They come with expensive cars and only then they bring something. Then they eat and drink here and sometimes we have a call on Viber. When we ask them to help us, they say we have pensions.

It can be visible that respondents state psychological, emotional and physical violence and ways of managing control on the others, especially in partner relationships.

Financial neglect is also present. It is also difficult for them to differ obvious examples of various types of violence.

(F, 35)

- Each penny was counted carefully. I had to explain each bill I made. Then I found a job, put the child in the kindergarten and one day, in front of my father-in-law, I confronted my husband: “If you ever ask me again anything related to money, I am going to take the child and leave. I am giving half of my salary into this household and the other half is mine.” I am visiting my parents and I cannot buy some coffee - no way anymore! I decided to react once I told my mom what I am facing. My mother told me: “Resolve that or come back home. This can’t be better, it will only get worse”. If my mom had not said that, I would have still be dealing with it.

Many statements confirmed that number of people consume alcohol and it has become socially acceptable appearance.

(F, 48)

- All is good when he does not drink. But when he does, he becomes a beast. He offends me and my daughters and says horrific things. And trust me, I would do it all differently if I only had support. But I don’t have it. I don’t belong to this house. Do you know what this means?
- **Yes.**
- I can only go to the city from here, to pick up the children and run away. I could not stay at my parents’ house; they would not receive me. My mother-in-law is always on his side, and when he is drunk, she says he only got a few drinks. I am the happiest person when I am at work. I am appreciated there and nobody there knows how much I worry when I need to go home. My husband is an alcoholic but he does not admit it. He does not drink – he tops up only, he is always under the influence of alcohol.
- **Do you consider changing something?**

- Yes, when my daughters leave to university, I am gone. Anyway, I work at the city, so God help me. So many people left...

However, there were some examples of positive and healthy family relations.

(F, 67)

- I do all the household chores and cook; my mother-in-law is old and both sons are in Kragujevac, and when they come, they help their father with agricultural work. They are very good to us. Every year they save some money for us to go to spa and give me some money for everyday life. It can't complain. I would only like them to get marry. Time is passing.

(F, 18)

- My family is very supportive. My sister and me can talk to parents about everything. Female issues are something we talk about with mum, and when something delicate is happening, our mother explains it to our father, and then we all sit and talk. They supported me to have a break after high school graduation and then decide what to do after. When I had some problems at school because children were discriminating me because of my look, my parents reacted when I told them about it. They went to school and solved it. Indeed, nobody ever looked at me badly at school again.
- **How did they solve it?**
- They went to the psychologist and school principal and my dad asked to meet parents of children who bullied and maltreated me. Then he talked with them. When he came back home, he told me all would be fine from then. And it was.

(M,75)

- My biggest support are my grandsons. They are already 18 and 16. Both of my sons work in Belgrade. My grandsons help me everything with the households, fire-woods. Now we are cleaning the gutters. They taught me how to use phone and Viber. Now the older one will go to the university in Belgrade and I am going to miss him...

Discrimination cases in closest environment

The respondents were asked to state detectable examples of discrimination in their closest environment. It is noticeable that most of the examples were cases of psychological violence, which is typically more often recognised by others, rather than victims. The violence is presented in the most diverse forms.

(F, 47)

- We have a woman living nearby, with a little daughter. She is married for a dangler and a git. She only goes to work and back home immediately. He waits on a gate and does not allow her to go anywhere. Once I heard from my garden that he was questioning her where she spent time, and she was asking him to go to the supermarket, but he would not allow it. Why does she put up with all of that, I don't know? Nobody is born to be maltreated.
- **Have you ever talked with her?**
- No, if anyone tells her - good afternoon, there he comes and gets involved in discussion.
- **You said she was working somewhere. Would some of the younger women try to talk with her?**
- They say she is silent at work as well, barely speaking with anyone. She is an IDP from Kosovo. And all of his family members are the same. This is an inherited thing for them, to maltreat women. His father was the same, a dangler maltreating his mother. They never went anywhere; nobody would visit them.

(M, 69)

- A neighbor of mine was crazy jealous. He never let his wife go anywhere. And she is pretty. Once, I stopped by to take a saw and he was not there. She told me to leave because if he knew I stopped by, she would be harassed for days. And really, he came to me the next day to ask why I stopped by and told me not to go to his house when he was not there. He died before the COVID-19 pandemic. She is still miserable so much. She keeps living in the same manner as if he is alive. She does not go anywhere. She is mentally blocked. For what is worth.
- **Maybe you can invite your neighbor to attend some of the village activities organised by women? She might come.**
- If I suggest this, the village will say I am having an affair with her... (laughter)

(M, 62)

- All kind of things happen in the village, but when you ask about them, it is always silence. No one wants to get involved, everyone minds their own business. There are cases of domestic violence, but no one calls the police. There are cases of neglect of children, they disappear for the whole day, and nobody cares about them. Children wander around the village and rely on the kindness of others for food. It's tough when you depend on the mercy of others. You can see anything, but people turn a blind eye to it. Women in our community are used to enduring and have been taught to do so. When my daughters got married, I told them, "You are not someone else's dinner, you are ours. If anything goes wrong or, God forbid, someone hits you, come back home, these doors are always open for you."
- **You actually helped your daughters learn their value?**
- It's not just me, it's their mother who taught them to stand up for themselves, not to tolerate anything they shouldn't, to respect other people's homes, but there is always a borderline.

(F, 55)

- In our neighbourhood there is a 12-year-old girl living with her father and grandmother, her mother left and lives with someone else. The father works as a day labourer, he has changed jobs many times, and is not satisfied with any of them. The grandmother is old, the child is neglected and left alone. I asked a lawyer acquaintance what we could do for the child, and she said that legally there is nothing that could be done as the court awarded custody to the father. Good people can help as much as they can.
- **Has anyone been helping them?**
- There is a wealthy family that shares their clothes and often gives a girl some food.

(F, 72)

- There is discrimination towards Roma people. We've had a few Roma families here. Ever since I've lived here, those people have had houses, worked in the factory. But since these Kosovars came in 1999, people don't like them. They got some temporary accommodation from the municipality, then they got houses. They're always protesting, asking for something, and they get it. And they're very loud.
- **Why do you call them like that? Do you call everyone who fled from Kosovo that way?**
- No, we don't have our own population who fled, these are not ours, that's why they're Kosovars.
- **I don't understand, what do you mean by “not ours”, who are they?**
- They are Muslims. Everyone here is Serbian, Orthodox. Our Roma celebrate Djurdjevdan, they are ours.
- **So, the population is intolerant towards them because they have a different religion?**
- Yes.
- **Well, that's discrimination.**

- Yes, but it's like that, they're different and people don't tolerate them.
- **Is that also your opinion?**
- I have no contacts with them, I sometimes see them, we don't greet each other, personally I'm bothered that they're somehow arrogant, loud. But again, we have our own people acting the same. You know what, I've lived here since I got married, for 50 years, and only Serbs have always lived here, and I think that's what bothers people. Our people live like in a concentration camp there in Kosovo, and they came here and got everything.
- **Has anyone else noticed that there are other discriminated groups?**
- I'm a retired healthcare worker, I worked here at the primary health care center my entire career... The only thing I know is that there are a few children with disabilities in the surrounding neighborhoods and villages, and I know that they had to go to Belgrade for almost every medical examination, there's nothing available in Cacak. And I wonder if that's discrimination, or there are no pediatricians in Cacak... there is no dentist for them, they are taken to Faculty of Stomatology in Belgrade. I think it's still a shame if your child has a disability... Those children, especially in the villages, spend their entire lives closed, at home. Only if their parents are socially aware and active, then they put them to school.

(F, 58)

- I know of a case of neglect of parents in my community: abandoned, forgotten, left to their fate. I discussed this with the Centre for Social Work in Kraljevo, I know where their children live; but the Centre says, "You can't do anything, they have to sue their children themselves..."
- **How do they neglect them?**
- They don't visit them, they don't provide any support, they don't take them to the doctors, they live a hundred kilometers away.
- **Have you or someone else contacted them, asked them to come?**
- I haven't, but the president of the village council did, when the older man had surgery... and nothing... That son lied that he would come and so on... They'll show up when these two die. And they have a lot of land. But then again,

sometimes I think, how do we know what's been happening there... sometimes it's not good to meddle in everything.

(M, 74)

- We have an old man in our village who gave his son the power of attorney to take his pension. If you could only see where he lives and how inadequate it is... Philanthropy's home caretaker visits him. And his son, he's a scumbag. He doesn't show up, spends all his money, and the old man is hungry. I tell him, "Revoke the power of attorney, someone from the village would do it fairly for you", but he doesn't want to. He says, "That's my fate". We value tradition a lot, and that's not always good, not everyone has good intentions.

(F, 37)

- Everything is somehow more visible in the village. Small communities do not allow you to keep your intimacy. Many things have become socially accepted and they shouldn't, especially everything related to alcohol. People drink so much, everyone drinks, from an early dawn. While I was studying, I was comfortable with the life where you set limits for yourself. You choose where you will go, what you will do and what you will keep for yourself only. I am also trying to teach my children the same, and villagers look at me awkwardly, but I don't care. And regarding other women, they suffer, work a lot, enjoy little, and it is being considered that women have to do all things on their own and they do not need anything. Women need more support, to raise their self-awareness. Mothers should talk to children more, especially with sons.
- **In your opinion, what is discriminatory in those behaviors?**
- Women are called pejorative names, they are threatened, specifically if alcohol is involved, some get slammed. There is physical violence, and almost nothing changed for all these years I have been living here. I only know one woman that took her child and went to the city, reported domestic violence to the Centre for Social Work, got divorced, found a job, and now the child already goes to school. That's so much better situation...

It is encouraging that respondents of different ages and social profiles clearly recognise discrimination and are interested in or take concrete measures to help discriminated persons.

Discrimination in the healthcare system

The healthcare system is a system with which our respondents, especially the older persons, have the most frequent encounters, due to chronic illnesses. The organisation of work in healthcare centers in the research sites is as follows:

The village in the municipality of Kraljevo does not have an ambulance. Respondents obtain primary healthcare in one of the ambulances of the primary health care units or the Polyclinic. Secondary level of healthcare is provided in the Polyclinic and the General Hospital Studenica. The tertiary level of healthcare is not organised in the city of Kraljevo and relies on the University Clinical Center of Kragujevac and the University Clinical Center of Serbia. In the city of Kraljevo, there are Pharmacy, the Institute for Public Health Kraljevo, and the Institute for specialised rehabilitation Agans in Mataruska Banja.

The village in the municipality of Kragujevac has a general practice ambulance that operates three times a week. The secondary level of healthcare in the city of Kragujevac is organised in such a way that the role of the general city hospital, which does not exist, is taken over by the University Clinical Center Kragujevac. The primary level of healthcare is provided by the Health Center Kragujevac, the Institute for Occupational Health Kragujevac, and the Institute of Public Health Kragujevac.

The medical center in Guca operates daily in both shifts as an organisational unit of the Lucani primary health care center. In addition, there are seven rural ambulances operating one or two days a week. The following specialized services operate in Guca primary health care centre: women's health protection unit (operates three days a week); child and youth health protection unit (operates during the first shift on

weekdays), internal medicine team (operates three days a week), psychiatric team (operates one day a week), physical medicine team (operates three days a week), ORL team (operates three days a week), ophthalmologist (operates two days a week), laboratory, radiology and multipurpose home care services, as well as a dental medicine service. As a secondary level healthcare institution in Guca, there is a gerontology care facility and a facility for more permanent accommodation (residential care).

What most respondents emphasise is that healthcare workers in their medical centers (especially rural ones) are professional, dedicated, and without prejudice. Respondents are referred to doctors and nurses in their medical centers, who are often of great help in further phases of treatment. Some examples of their connection are:

(M, 70)

- Our nurse lives in the village next to ours. When I was sick, she brought me a medication from the pharmacy in Kragujevac. And when I fell off the tractor and was at home, the doctor would come to visit me. We can rely on them.

(F, 72)

- My GP retired before the pandemic. Honestly, when she said she was leaving, I was afraid of who they would send, but this young doctor is so dedicated. She told me that she had studied all of our medical records when she arrived and asked the previous doctor about everything related to the patients.

(F, 45)

- My GP is located in Kraljevo. It's not too far from our village, but it would be good if we had an ambulance like everyone else, instead of being treated like a suburb of the city and having to go into town. I like the idea of having a family doctor. I think it's great because the doctor sees the situation differently. I know people in Bosnia have been having family doctors for years and they're connected to the private sector, so their diagnostics are faster.



(F, 72)

- We used to have more specialists here in Guca, but now there are fewer and we go to Cacak when it's something serious.

(M, 69)

- During the pandemic, almost nothing was functioning. It was good that they extended these electronic prescriptions for medication, so I could pick them up at the pharmacy. But the situation forced us to endure and remain silent, praying that nothing happens to us because only COVID-19 was important. That's why there are crowds and long waiting lists everywhere now. The general practice is fine, but unfortunately, the job doesn't end there; they just send you further to go.

(M, 70)

- The GP is fine, but only after I corrected her. I'm blind, but I'm not deaf. I go to the doctor's with an escort, usually my wife or son. We come there because of me, but she talks to them as if I don't exist. I said to her, "Why don't you address me directly? I just can't see you. I'm not crazy, I understand everything." She said, "I'm sorry, you're right." And since then, every time I come, she asks the escort to wait outside and then calls them in. It's important to be respectful when working with people.

However, the respondents have contacts with other health workers, on secondary and tertiary level of health protection. The experiences differ in terms of examinations' dynamics and type of the health needs.

(M, 52)

- My husband fell off from the tractor and broke his leg. Luckily, a neighbour was passing by and drove him to Kragujevac. They received him and gave him some pain reliefs, telling me to go home and that he would be operated the next day. I left and then the next day they delayed it due to urgent cases; this happened in the next three days. I could see this became serious, they probably expected money. I went to the surgeon with our daughter and he started making excuses he was in a rush. I directly asked how much money he wanted in order to do the surgery and he said he did not want any. And he did the surgery later on, for real. All went well. Afterwards, we brought some pork, cake, all sort of things to the doctor. I am not sure if he would still postpone had we not visited him ...
- **According to the question you asked, I assume you were ready to give him some money?**
- Yes, I saw my man was enduring pain. This is how it works here.
- **Have you been doing this before?**
- No, but I was ready to do so.
- **Even though bribe is the criminal deed?**
- Yes.

(M, 65)

- I was scheduled to do a spine MRI in Kragujevac, a regular check-up. Then, they called the day before to tell me their appliance was broken, and they would let me know when it was fixed. Nevertheless, I went there the next day and I could see that it was working. I submitted my health card and was waiting in a queue. The nurse then told me: "We called you yesterday to delay the MRI." I told her that nobody called me and asked why they were postponing MRI. She was silent and then she went somewhere. She came back with the doctor and told me there were a lot of patients and I had to wait. I told them there was no issue about waiting and I finally got what I wanted. Jerks... They set it up for some of their close ones, and they are thinking we are all naive...

(F, 55)

- The scheduling time for diagnostic procedures is long. I have to wait for six months for an ultrasound at the health center. They want me to give up and go to a private clinic. If you don't go for regular check-ups and something is bothering you, you have to go to private doctors.

(M, 72)

- I regularly go for check-ups with a cardiologist in Kragujevac, and I have no problems with that. They schedule my appointments every six months, and it goes smoothly. Luckily, I have never had surgery, but I hear there are problems if it's not urgent.

(M, 66)

- I had to wait for four years for my gallbladder surgery. They told me to come in 2019, and then they scheduled a consultation in August. They said there were more urgent cases, so I had to wait. I was waiting the whole time during the pandemic, and my condition got worse. I was finally operated in April this year, but only because I went to a private clinic and paid for a consultation with a professor. She told me to get a referral to the hospital and come back. Nothing happens until you pay.
- **Did that professor operate on you?**
- Yes, I paid RSD 12,000 (EUR 100) for the consultation and ultrasound, and then she operated me in public hospital free of charge.

(F, 58)

- The worst thing is when you have to go to Belgrade. They usually send us there from Kraljevo. If you don't have connections, they treat you like a stinky cheese. We always come last.

(M, 70)

- As long as I could still see, I went to Professor Drincic in Belgrade. He was a great person. He knew how to deal with patients! However, as my condition worsened and my sight continued to fade, and they couldn't do anything more for me in Belgrade, I ended up in Cacak. They thought, "He's already blind, there's no point in helping him. What can they do for him in Belgrade?"
- **How do they treat you in Cacak, and what is the ophthalmology department's attitude towards you?**
- I am a hopeless case, but when I could still see something, they tried their best to help me. Nowadays, doctors keep changing, and every time it's someone new. I go there, but I don't even know why. I haven't been there since COVID-19 outbreak.

Regarding the confidentiality of health information, we provide a few examples in which confidentiality has been breached.

(F, 48)

- I felt sick in 2019. I was weak and had a poor blood count. They sent me to do tests in Kragujevac and then to Belgrade, where they diagnosed me with an autoimmune disease. While I was in the hospital in Belgrade, the nurse from the ambulance here spread false rumors that I was suffering from something else. Later, I met her and said, "Do you know I can report you for what you did?" She replied, "People asked me what was wrong with you, and your family didn't want to tell them". I asked her why she had said anything at all, and even what she said was a lie. I didn't report her, but I should have done that. Some people need to be punished.
- **So, how did it end? Do you have any contact with her now?**
- She avoids me. When I make an appointment with the doctor, she takes the register, writes what is needed, and remains silent.

(F, 35)

- I had a gynecological intervention, and there was a nurse from a neighboring village working at the hospital, and she spread the story that I had an abortion. In the village, everyone looked at me sideways, talked about me, and I was sick. Even my husband came one day and asked me about it. That hurt me. It is not possible that a doctor give me one diagnosis and perform an abortion! Anyway, in the village, I am the one who had an abortion. And I would report this nurse, but how can I prove that everything started from her?
- **Have you had the opportunity to confront her?**
- I called her, but she says it wasn't her, and I am sure she was because she first told my maid of honour. I experienced distrust and shame for nothing, just because she is gossipy.

(M, 66)

- My brother had mental health issues. He had a nervous breakdown and was in the psychiatric hospital for a long time. It's terrible how the village spread rumors about him. They spread lies that he attacked our mother, me, and he was the one suffering, the worst for himself, which is why he was in the hospital at the first place. After that, few people were visiting us until he died. And it all started from a nurse who was in the emergency room when they took him. He told those stories in the village...

We also note some positive experiences:

(F, 45)

- Our doctors in Kraljevo are wonderful to me. The nurses and doctors have known me for a long time, and I was in and out of hospitals until they diagnosed my illness. And when I started receiving immunological therapy, they had so much understanding for me. I believe it's all about the person... If you are born wicked, everything is useless.

(F,62)

- When my mother was ill, the healthcare center would send a nurse to us; she was a wonderful person who brought medication and gave advice. Sometimes all one needs is a kind word...

(M, 72)

- When I was in the orthopedic clinic in Belgrade after falling off my tractor and getting injured, everyone was so kind to me. I don't have anyone there, and because of the pandemic, no one was allowed to visit me. So, I would ask the nurses, and they bought me everything I needed. They took care of me as if I was their own family member. They said, "We know what it's like, we do everything we can."

Experiences with dentists are generally positive. Older respondents use the services of dentists in healthcare centers. Most of the older persons have had partial dentures implanted. This service is cheaper in the public sector. Other respondents use the services of private dentists. A few respondents have used the services of dentists as part of Philanthropy's service "Free-of-charge medical examinations for rural population".

Among women, there were those who had negative experiences related to gynecological clinics, which were related to the need to undergo gynecological intervention. Intervention was delayed or redirected to other clinics (usually private ones).

(F,42)

- Just before the pandemics started, I had a gynecological problem, they said it wasn't urgent but needed monitoring. The gynecologist who examined me in the public clinic was uncouth. Rude, making sexual jokes, which made me uncomfortable.
- **If you don't mind me asking, what kind of jokes?**

- Sexual ones; involving my husband; and I'm closed about that topic, I don't like to talk about it. Although I've heard from other women that he's like that with everyone... He also works at a private clinic. Recently, I wasn't feeling well, but I couldn't visit a gynecologist because they said they only take emergency cases. How was I supposed to prove to my nurse that I was bleeding and in pain, and needed urgent care if I couldn't visit the gynecologist? So, I went to visit him privately. And there, at that private clinic, he was polite, kind, and courteous. I told him, "Doctor, you don't remember me, but I'm your patient." He looked at me, looked at the computer screen with my medical records, and said, "I don't remember you, this is your first time here." And I said to him, "You only remember those who pay, you don't remember those in the public sector." He laughed... Anyway, he treated me in private practice. Now I'm waiting to see if he'll remember me when I go back to the public healthcare center... *(laughter)*

Several women pointed out that not enough is being done in terms of disease prevention, that there is a lack of screening, and that the coronavirus pandemic has only worsened the already poor conditions.

(F, 61)

- With the gynecologist, it's great if you get there once a year for a check-up. We haven't had an ultrasound in a long time, there was only mammography in the Clinical Center. Either you lie that you're not feeling well so they send you further, or you go to private practice. The talk about disease prevention is a colorful lie.

As for pregnant women, they were not included in the survey, but mothers of young children were. Their experiences with pregnancy and childbirth were positive. We note two experiences:

(F, 35)

- I gave birth to my youngest child during the coronavirus, on 1 May. Honestly, I was really scared, as were all the people at home. When I went for a check-up a month before delivery, the hospital was like a spaceship. My husband was not allowed beyond the gate. And there, all the women were camouflaged, with masks, gloves... I was lucky that my gynecologist stayed there for delivery. He delivered my other two children as well. A nice man, calm, and the midwife was the same.
- **Did you monitor your pregnancy in a public institution?**
- Yes, I did. For all three children, I didn't do anything in private practice, no one asked for any tests or anything that I couldn't do at the hospital. Thank God, everything was good during the pregnancies. We didn't give any money to anyone, we always brought flowers, cake, and refreshments. No one asked us for anything, although my husband insists that it should always be like that. He says, "Children are not born every day."

(F, 32)

- This was my first pregnancy. I gave birth on March 1, 2020. The lockdown was still not introduced. Since my pregnancy was difficult, I went to private practice for everything, and then that same gynecologist delivered my child in the public hospital where he works. Everything went well, both the baby and I were fine. I went for check-ups in private practice again. I didn't give any money to the gynecologist, as I went to private practice and paid. We bought flowers and candy for the nurse.

We got the answer about giving gifts in the two previous responses by asking the sub-question **"Have you provided extra for doctors and medical staff / have they asked you for money or any other kind of reward for the service they provide?"**

The survey shows that the respondents do not see giving money or gifts as giving bribes.

(F, 35)

- Honestly, I'm always ready to give for the benefit of children, even if they would require; my husband, his family, they always bring gifts to everyone and do everything like that.

When it comes to the work of healthcare professionals in general, most respondents believed that doctors do not have enough time or desire to dedicate themselves to patients. Rarely do doctors talk to patients about their health, diagnosis, or therapy. Some respondents emphasised that doctors simply do not have time for it.

(M, 69)

- Now doctors have to enter everything into the computer. They ask you what's wrong, why you came, but they don't look at you. Because everything you said, it needs to be filed, then entered into the computer, and then if you need to go further, a doctor again searches on the computer where to send you. Because in general practice, nurses now only sit there, call and check when there's an appointment and wait for the paper printed by the doctor... And with specialists, rarely anyone has a nurse, maybe when you go for a surgery, so they examine you. Now I hear from my granddaughter that there's some telemedicine; you don't even go to the doctor, you pay, connect with him online and you talk, showing him if you have something somewhere on your body, and then he tells you what's wrong.
- **What do you think about digitalisation, especially in medicine?**
- I believe that it's okay for some diagnostics, but the doctor needs to be dedicated to the patient, nurses need to enter things into the computer, he needs to talk to you, examine you.

Other participants have claimed that medical staff does not behave professionally towards patients. A conversation between a doctor and a patient about treatment is seen as a doctor's good will, rather than their obligation. Consent to a certain type of treatment is considered a formality, during which a person signs a paper stating that they accept a certain type of treatment and release doctors from any potential blame if the treatment does not have the desired effects. Some participants do not see this kind of relationship as problematic, but rather believe that patients should not interfere in the doctor's work.

(M, 70)

- There is faith in doctors that they will do everything necessary. And we have a lot of people who simply do not want to delve into details about their health, what the doctor says is Holy Scripture for them. On the other hand, we also have doctors who are not willing to tell the patient what will happen next, whether they are going for a scan, surgery, whatever... When you ask, they say, "It's all written here, ask the general practitioner, you have to go to her for a referral to the hospital."

(M, 62)

- I have to praise [my GP]. He is so sensitive that he allows me to participate with him in determining my therapy.
- **How do you determine the therapy together?**
- I tell him everything about how I feel when I use certain medications and when it gets better or worse.

One respondent commented that due to the doctors' attitude towards him, in a situation where his health was compromised, he decided to use private healthcare services.



(M, 59)

- I've been feeling really bad for a while, and this GP thinks I'm joking, so she's taking it slow. But surely, there must be an urgency referral here... and then I see, this is serious, and I go for a private examination; and it's good that I did. If I had been walking around like this every day, I would have ended up on the operating table. Simply put, some people don't listen, you can see that they just want to brush you off and they're completely uninterested. Whenever I asked for a referral to a specialist, she claims there are no appointments, or they haven't been released yet, or she tells me to "drink magnesium"...

On the contrary, some respondents highlight that they have not had bad experiences using healthcare services. Several times, the GPs' good work in primary health care centers has been emphasised as a good example. The behavior of nurses in ambulances and primary health care centers is criticized the most, as it is believed that they receive almost the same salary as nurses in hospitals, but their work cannot be compared.

(F, 72)

- These nurses in ambulances should thank God for their job and salary every morning. Whoever has been in hospitals or has had surgery has seen those little nurses there giving their maximum. In the night shift, one nurse is on duty for one department of 35 people. Someone is constantly crying and asking for something. All credit to them. They should have higher salaries and benefits.

Respondents have had a positive attitude towards medical examinations organised by Philanthropy as part of its project activities. Examinations by dentists, consultations with general practitioners and psychiatrists have been provided for rural population.

(M, 69)

- What you have organised here in the village has been very useful for us. The doctors were devoted to us, this ophthalmologist examined me for 15 minutes. Otherwise, you can't see an ophthalmologist unless it's in private practice. And this young psychiatrist was great. He spoke so nicely to us, as if he was one of us. He understands our problems. Otherwise, we are primitive people. We still think that if you go to a psychiatrist, then you're crazy.

(F, 45)

- The psychiatrist you organised was a great success. He spoke so nicely, and afterwards, individually with us as well. I went home feeling so relieved. We burden ourselves with so much on our shoulders, when we don't need to. You can live your own life.



Discrimination in the social protection system

The experiences participants have with the social welfare system are limited. On one hand, most respondents don't need any kind of social assistance, and on the other hand, respondents are not well-informed about the possibilities offered by the social welfare system. Only a few individuals have contact with the local Centers for Social Work (in Guca/Lucani, Kragujevac, and Kraljevo), and they are recipients of financial assistance, or were directed to Centers due to the issues they face (divorce, child custody, domestic violence). Information about the services that can be obtained through the social welfare system is generally obtained through personal approach, when a specific need arises. The population is informed with neighbours, acquaintances or in contact with person at the Centers for Social Work (CSW). However, experiences vary.

(F, 55)

- I think they have an attitude toward us Roma. As soon as I show up, the clerk says, "Why did you come, what do you need now, weren't you here last week? I don't have a bag of money to give you." And I really do buy medicine and need money for it.
- **Do they generally help you solve your problems?**
- I think it's like this because we are Roma. Whoever can, pushes us aside. That's how it is at the Center, that's how it is at the municipality, that's how it is with the doctors. A neighbour tells me, "You live off the government's expense," and I think to myself – sister, you don't know my struggles.

In the entire study, two persons identified as Roma (although ethnicity was not questioned).

(M, 72)

- I had to go there, otherwise I wouldn't. When my son went to prison, because of the stupid things he was doing, they called me to give a statement whether there was physical violence. It bothered me that the clerk called me grandpa. And so he asked all kinds of things, and kept calling me grandpa. I asked him, even though we were on a first-name basis, whether he would make a formal note. He said, "Of course." And I asked him, "Will you write there that you kept calling me grandpa? I'm not your grandpa, I'm a client, sir." He didn't like that, he was a bit taken aback... I'm old and I've seen a lot, but I know manners, who's grandpa, and who's sir.

(F, 55)

- When I went there because of the divorce, it was really uncomfortable; small child, long conversations, sweating profusely, feeling like everyone there knows everything about you and your troubles. But afterwards, everything was good; the woman who handled our case was iron-handed. My husband could only see the child in the Center.
- **Who made that decision?**
- The court, when we were getting divorced. Because of domestic violence. He was ordered to undergo mandatory treatment. Later he went to rehab for alcohol and saw a psychiatrist, so everything was getting better and calmer. And then the child became an adult and that resolved.

Among the respondents, there were also those who were satisfied with the work of the centres for social welfare. Essentially, they knew how to get a social welfare service, in case Centre rejected them.

(F, 51)

- As for social welfare system, my experience is good. If a social worker has any prejudice towards us or discriminates against us, we turn to a lawyer who must give a statement in the end, after collecting whole documentation, whatever you might need. I needed financial assistance... After the floods, we were in a very difficult financial situation.
- **But which lawyer do you turn to in case of discrimination?**
- To Center's head of the legal department, or to the director of the Center, you write a complaint.

Although there are procedures related to obtaining services, respondents emphasise that the whole process is simplified if you know someone at the Center for Social Work. First of all, information about a specific problem is much better this way, and obtaining a service is less stressful.

(M, 65)

- I went there because of one woman from the village... I know a social worker in Kragujevac who works there, she is the wife of my colleague.
- **What prompted you to go to the Center, what was the problem?**
- Well, she is a single mother, with a young daughter, she works hard, she's a widow, but she needs help to fix up her house and bathroom. I explained the situation to my acquaintance, and she told me what the woman should do. Later, the municipality helped her and fixed her bathroom.
- **Do you think your acquaintance at the Center had an impact on the positive decision?**
- Well, that woman met all the requirements for assistance, I was just a liaison. And yes, I went to my acquaintance because I didn't know how other officials would react, especially since I came there for someone else.

In general, the number of respondents who use social protection services is small. Most commonly, respondents stated that they used one-time financial assistance, reimbursement of travel expenses for medical check-ups, financial benefits for paying various bills (public transport, utilities, electricity, etc.). Some respondents need financial assistance, but they own more than 0.5 hectares of land, which makes them ineligible. However, problems arise when trying to use services such as home care assistance.

(M,70)

- I had a hard time placing my brother, who had a stroke, in a geriatric center.
- **Why?**
- Because it goes through the Center, and they told me: “Why are you putting him in a home, it's better for him to be with you.”
- **And how did it end up?**
- Well, I had to push for it, go there, call them. My brother was in a spa for a while, then at home for three months. A woman from the village was looking after him, and finally, they called and said there was a free place in the nursing home, bring him here.

(F, 55)

- *We took care of the grandma until she became immobile. We work all day, there isn't anyone to take care of her. And we couldn't put her in public geriatric centre, but we placed her with some people nearby. We pay them to take care of her.*

(M, 68)

- My father is here, in the house next to us, and it would be better for him to be in a nursing home, but he doesn't want to go. I asked the Center to at least provide a home caregiver for him. They said, “We don't have home caregivers for rural areas.” How can that be? Don't old people live in the countryside?
- **And how did it end up?**

- Well, Philanthropy hired home caregivers, you employed that woman from our village, this is great for us. She visits everyone who needs help, and she needed a job too.
- **Do elderly people from rural areas go to nursing homes?**
- Not really, only the wealthier ones who work abroad place their family members in nursing homes. Here, several generations still live together and take care of their own when they fall ill. The nursing home was designed to relieve the younger generation of caregiving responsibilities, and to provide better care for the older persons. But it's hard to change people's mindset. It's somehow shameful here for us. Then they gossip about you, "Look at him, he placed his loved ones in a nursing home, just waiting for them to die, so he can take their property."

(M, 70)

- Four months ago, I went to the Center for Social Work to apply for home care provider, as I live with my 87-year-old mother and am sick, receiving disability allowance. It would be good for us to have a woman help us with cleaning, cooking, and shopping. The social worker was extremely kind, but told me that we don't yet have the right to use these services because my sister, who lives far away from us, is legally required to take care of us.
- **Yes, there are regulations that define this.**
- But then your someone from Philanthropy from Kraljevo called me when this woman was engaged as home caretaker and asked if I wanted her to come to us, saying that we don't even have to pay anything, but I was willing to pay.
- **Is it easier for you now that she visits you?**
- Darling, of course, it is. I usually cook, but she comes twice a week and we agree on what she will do next time: whether she will clean or iron. Since she comes from the city, sometimes she brings us some medicine or something we don't have in the village.

There are regulations for engaging a home caretaker which determine who can

receive these services, and which do not take into account existing family relationships that may be disrupted, or family dynamics and lack of free time. Philanthropy provides licensed home care services in the municipalities where this research was conducted, so depending on project opportunities (beneficiaries in villages do not pay for gerontological caregiver services), a significant number of beneficiaries receive this service. In selecting beneficiaries, Philanthropy collaborates with centres for social welfare and representatives of village councils.

General attitude among participants is that older individuals should be able to stay with their families until the end of their lives. Many female respondents emphasised their responsibility for caring for older family members who live with them or nearby, which leads to the conclusion that, in most cases, women are the informal caregivers of older persons.

Respondents who traveled to referred hospitals are eligible for the reimbursement of travel expenses for medical treatment. When they receive a referral in their primary healthcare center for a specific clinic (in Belgrade, for example), the referral is approved by the medical commission of the primary healthcare center, and then it is also approved by the Institute for Social Insurance.

This provides reimbursement of travel expenses for medical treatment in a location that is at least 50 kilometers away from the beneficiaries' place of residence. Typically, the reimbursement period is two to three weeks after the examination. In the past five years, five participants have used this service.

The issue of confidentiality is a particular problem when dealing with the social welfare system. The question of confidentiality is open to debate in both the healthcare and social welfare systems. Some participants have a certain degree of anxiety that their personal problems will be revealed to social services, and they will face consequences because of it. However, other participants do not have such fears and believe that education of social workers and work on reducing prejudices are crucial.

The question arises as to how many participants are aware of the possibility of submitting appeals to decisions made by centres for social welfare. One participant



stated that in case of improper behavior by the centres for social welfare employees, she would approach center's legal department, with complaints against their staff.

Discrimination in the area of labour and employment (income security)

Looking at the labour status, the largest share of respondents are retired (34 respondents). Mostly, they are receiving agricultural pensions (22), followed by family (6), age-based (3), and disability pensions (3). Almost all respondents, except those attending secondary school, participate in agricultural work within their households.

(M, 75)

- **Are you retired?**
- Yes, I receive agricultural pension, 12.100 dinars (EUR 103). What can a person do with that? I spend it on electricity bill and fuel for my tractor.
- **So, you don't enjoy your retirement?**
- No, I still work. I'm a craftsman. Although, I work less now because I'm weaker and my equipment is old. I'll soon reach 60 years of service (laughs)... My tractor is older than you (laughs)...
- **Can you live on this work?**
- Everything is good as long as I'm on my feet and with people... and later, I rely on my daughter to take care of me.

(M, 65)

- I'm still waiting for my pension. I worked in one factory, became redundant, did something on and off with and without a contract, and now I'm on unemployment list, waiting for the age to become eligible for the age-based pension.
- **And other family members, do they work?**
- My wife retired; she was also unemployed. My son and daughter-in-law work, so we have something to live on.

(F, 72)

- I receive a family pension that I inherited from my husband when he passed away. It's 32.000 dinars (EUR 270), which isn't a lot, but since those with agricultural pensions only receive 12.000 (EUR 102), I'm not complaining. I have my own garden where I grow vegetables and fruit. I use the pension to pay bills and buy what I need, and I also give my grandchildren some pocket money.

(M, 70)

- I retired with 45 years of work experience. We've been farming here all along, more when I was younger, now not that much, but we have for our own needs and somewhat to sell: pigs, walnuts, vegetables...

Most female respondents are involved in agriculture and household chores, while majority of those who are employed are men.

(M, 45)

- I work in public service, and we also have a big farm. I take care of the livestock - we have cows, and I wake up early to clean the barn and prepare the milk for sale. My wife does all the housework chores and takes care of the children. She got sick some time ago, so I don't let her do anything too hard. I'm also involved in our village, and we've done a lot of work on the sports field. We have a folklore group and a women's association.
- **Are you a well-organised person?**
- We're well-organized at home, and now that our children have grown up, they help us. You can't expect things to fall from the sky. You have to work, but you also need to work in the village, bring people together, and encourage them to take action.



(M, 30)

- I work in one factory.
- **How do you like it there, what are the working conditions like?**
- I'm doing well, we have organised transportation, I'm doing my job, doing what I was educated for. I'm a mechanical technician and I'm also attending a higher school. I have only two exams left until I graduate. The pay and working conditions are fair, we have a warm meal, transportation, and breaks.
- **It's organised like it used to be...**
- Yes, that's how it used to be at Zastava, my father told me. It's really good, people are fighting to work here. I'm lucky to live nearby and have adequate education.
- **How did you get the job?**
- There was an open call for jobs when the factory opened, and many people who had graduated from technical high school applied. They also chose people who lived close by.

(M, 40)

- I work in one factory. It's like a slave system there. We work in three shifts, the pay is mostly minimum wage, we stand on our feet all the time, and the supervisors are foreigners who just walk around and scream at us. I'm the only one who complains. Although, I'm getting ready to leave. It's all affecting me mentally. It's breaking me completely...
- **And do other workers complain or ask for their rights to be respected?**
- The only one who complains is the one who's thinking of leaving, because, you know, if you complain, you get fired. There are no worker's rights, the authorities protect employers like these. Look at what happened all over Serbia, and no one was held accountable. They get subsidies and when they run out, they leave.

(F, 45)

- After the divorce, I started working in a supermarket. When I was married, my husband wouldn't allow me to work. The conditions aren't great, and I only have one day off, but I've been working for ten years and I somehow manage to take care of myself.
- **What are you fighting for and how do you do it?**
- In the beginning, it was important for me to work, to leave the house, to be with people, and to have my own money. But then they load you with work every day, and when someone gets sick, you have to cover for them, and they don't pay you for that. Instead, they tell you to take a day off, but that day never comes. One day, after two years of working, I couldn't take it anymore. I consulted a lawyer, and she explained everything to me about the labor law. Then, I went to my boss and told her, "I can work, but you have to pay me or let me use my days off." Since then, when I cover for someone, they pay me. It's not much according to the law, but people shouldn't be afraid. They should know their rights. There are other supermarkets in Kragujevac, and if they fire me, I'll go somewhere else.

(F, 35)

- I'm not working anywhere, unfortunately. I applied to many places where they required my qualifications. Even when I was the only one at the employment office with those qualifications, they hired someone else without experience or the required qualifications.
- **Did you complain to anyone about those decisions?**
- I did, to the management of public institution and once to the labor inspection.
- **What was the response you received?**
- They don't deny that I have the qualifications, but they make an internal decision to hire a colleague from the team. And when I asked who they hired for that vacancy, they said they brought someone for an internship. Later, I checked, and they hired someone. It's not worth it. You need connections, a political party membership, or you need to know someone who you pay to.

- **Would you work under the conditions you mentioned if you could?**
- Yes, but I don't have any of the things mentioned.

(F,18)

- I worked this summer when I finished school. My dad found me something in a factory, a few of us worked on packaging. It was a youth job. It was interesting, it was my first time working and getting paid. I took my sister to the seaside, bought my parents a gift and saved money some for later. But after that job, I definitely decided to still study and try to open something on my own afterwards, to be my own boss. I am creative, and in that kind of environment they would just kill my spirit.

As one of the key problems, most respondents emphasize the impossibility of employment, young people leaving or staying in places where they studied.

(M, 59)

- Young people are leaving. The attempt of the authorities to make young people stay in the villages or to return from the city is unsustainable. Even if you give young people property, they need mechanisation. Children here go to a four-year school, they have to travel to a neighboring village from the fifth grade, and they have to go to high school in Kragujevac. The ambulance works two days a week. You need a lot of land, mechanisation and workforce to survive. The destruction of young people in the village is systemic, it lasts...
- **What do you think, can this be changed?**
- Not anymore, only those who have large properties stay, the small households disappear, the village will turn into holiday sites for the rich ones.

Discrimination in educational system

At the time of the interview, only a small number of respondents were involved in the education, except for a few high school students and persons who were both studying and working. The rest of the respondents mostly had children or grandchildren who were involved in the education. Here are some of the problems they personally or indirectly faced.

(F, 51)

- For example, my children sometimes had problems at school.
- **What kind of problems did your children have? Which school did your children attend?**
- They're all in high school now, but since elementary school, there were always some conflicts because they didn't have new shoes or phones. The two of them are twins and they sat together the whole time in elementary school - no one wanted to sit with them. Even the teacher arranged it that way; but the kids would come home, cry, and want to sit with someone else, and then the teacher asks me to have them sit together.
- **And later, in high school, did they have the same problems with their peers or teachers?**
- They don't go to the same high school, and now everything is online, so they didn't complain.
- **Have you done anything about this, talked to someone, or complained?**
- The school called me, but because of the other kids who don't want to sit with mine, I talked to the psychologist. And I told her, "You should be calling the parents of those children, not me, my kids aren't causing any problems."
- **What did she say to you?**
- She said I was acting more reasonably than them and that she had to find a solution. And she found it, at the expense of my children. I could hardly wait for them to leave the school. And I was constantly praying to God that no one would

beat them up or bully them. They are peaceful and have never fought with anyone. We've been telling them, "Go, study, and get out of here..."

(M,18)

- At our school, there are occasional incidents of bullying. Usually, a few kids bully some poor students or kids who are different.
- **How are these kids different?**
- Well, they are Roma, although there are only a couple of them... they call them "Gypsies" and "Stinkers", or a couple of nerds who don't hang out with anyone since elementary school.
- **How do you react to this? Does anyone react, do teachers know about it?**
- Well, I tell them to leave them alone, that they shouldn't care about them. Some kids laugh. The homeroom teacher constantly says that it should stop. One of those boys got a reprimand since the parents of one student complained.
- **Is there any physical violence?**
- Not that I know of. We're not that big of a school, but this psychological bullying is constantly present.

(F,18)

- This bullying starts in elementary school and doesn't stop.
- **Why is that? Who is being bullied and who is doing the bullying?**
- Every school has a group of troublemakers who pick on the weak and different. These are Roma, poor, feminised boys, withdrawn and sick kids...
- **And how does this bullying manifest?**
- They call them various names: Gypsies, Kosovars, faggots, sugar boys, epileptics, they hit them, steal their things...
- **But these are all discriminatory actions, does anyone protest against them? What is being done about it at school?**
- If someone protests, it can lead to a fight, and sometimes they give up on further bullying if parents or teachers react. They know about it at school, they tell us

that it's not allowed, we even had lectures on discrimination and violence, but it still continues.

(M, 62)

- My grandchildren have Roma classmates. They came from Kosovo, I think their parents did, so they call them Kosovars. It seems ugly to me; so many people left Kosovo because of the war, and so did they. Here, I also fled from Lika, but no one calls me a Licanin.

(F, 72)

- Children are a reflection of their parents. Everything they do in school, they learned at home. And parents talk about all sorts of things in front of children, and then they talk about it in school. And they only look at those phones and computers, where everything is evil and twisted. As soon as a child can stand on its own feet, they give him a phone to hold, and a child watches some cartoon, like Masha and the Bear... and when they don't let children watch cartoons, they scream, throw themselves on each other... Here, too, children play outdoors very little, maybe just these little ones. Today, everything is wrong, parents don't spend time with their children. They think that the school should be the one raising their kids. I earned my pension in education, this is all worthless now...

What is particularly worrying is the fact that children conduct peer-to-peer violence and that there is no effective mechanism within the educational system to reduce it. Most of the older respondents point to the negative influence of the media, various social networks, and blame parents for not being sufficiently involved in their children's upbringing.

Legal remedies' application

The respondents emphasise that they are not sufficiently familiar with the laws and generally don't know their rights. They mainly inform themselves about their rights through conversations with family members, friends, or independently, usually when something has already happened.

(M, 43)

- You can't read and search when you don't know anything about it. I can't look for something if I don't know it exists. It's just like that - someone said something, and it's just hearsay...

(M, 30)

- When I had a problem at my previous job, I couldn't use my vacation, and they didn't want to pay me. I read the Labor Law, and it was much clearer to me what my rights were, and later I asked a lawyer how to proceed. So, I can say that I am somewhat familiar with my rights, especially my labor rights. I haven't had any other problems.

However, through this research alone, it is not apparent that the failure to recognise personal rights is a barrier to later practicing them. The respondents actually see the main problem is avoiding the law, which also demotivates them to advocate for the respect of their own rights.

(M, 69)

- The law is exceptional. I do not step away from the law. The law is excellently made for everything - work, life, health. Therefore, the law is perfect. Nothing is being implemented.

After experiencing discrimination, there are other obstacles when it comes to filing complaints, especially in the healthcare system. People who encounter some forms of discriminatory behaviour have certain health challenges. Their main goal is to resolve health issues, and discrimination is just a complicating circumstance that they cannot easily deal with at that moment. The reason is, on one hand, the belief that they can't do anything for themselves in that way, and on the other hand, the fear that they can further endanger their health.

(F, 45)

- I would prefer to replace my GP, but where should I go then? I don't reside in Kragujevac... I have a hard time with her, she doesn't understand my problems. Whatever I try to schedule, there are no appointments available. She says, "Go there yourself and try, I'll give you an open referral." And others doctors make appointments for their patients... And when I told her that, she became even colder, but she made an appointment for me. I just think it's about the person. Earlier, that same doctor was doing everything for everyone, I went for my parents so many times.

(M, 65)

- When the doctor asked me for money to operate on me, I could have sued them, for example. But I was so tired of everything. I just wanted the surgery to be over with and to go home... How many people do you know in Serbia who have sued a doctor or hospital and won a lawsuit? They protect each other.
- **Who operated on you and how was it resolved?**
- I called my daughter and told her what was going on. She came from Belgrade, went straight to the head of unit, made a fuss, and he operated on me.
- **You reacted, actually reported him...**
- It was my daughter, she wanted to take it further, but I didn't allow it. I just wanted it to be over with, and now I go to that head of unit for checkups.
- **Have you ever met that doctor in the hospital?**
- Yes, he passed by me, pretending not to know me, even though I was his patient for 20 years. No one dealt with him, they protect each other.

(M, 30)

- When I had that problem at work, I decided to quit and leave, but to charge them for my work. I politely asked them to let me take the vacation I didn't use or to pay me for it. They acted crazy, didn't want to, so I called the labour inspection. They ordered them to pay me off within seven days, and they did. Some things still work... although I think people are deprived of their rights in this country.

(F, 35)

- I complained about being rejected for a job. I didn't get the response I was expecting, but at least it was somewhat easier for me. No one can prevent me from submitting a complaint.

From conversations with respondents, it can be concluded that reporting discriminatory behaviour doesn't really result in anything useful. Namely, once the damage is done, no sanctions against the perpetrator can erase it.

(F, 35)

- The worst thing is when something bad happens, how to fix it afterwards, because you can seek your own justice, but the damage has already been done...

If we are talking about reporting discrimination in the healthcare system, the principles are generally known. In conversations, it was emphasized that the first step should be to turn to the Ombudsman for patients' rights in the healthcare institution. Although, even that first step can be problematic:

(F, 58)

- I went to the Ombudsman for patients' rights. She used to be placed in the Primary Health Care Center, but now it's in the municipality office. There's a woman sitting there, she's for Kragujevac.
- **What was the reason for your visit and how did you know where to go?**
- They kept postponing my ultrasound in the Primary Health Care Center because supposedly because only one doctor works there. That same doctor works in private practices in the afternoons. I read the notice on the wall on whom and how to complain.
- **And how did the process with the Ombudsman go?**
- You give a statement there, and he writes it in two copies. The first is for you, the second is for herself. She has to respond within seven days. The response came to my home address, saying that only one doctor works there and he comes from another institution, so I have to wait. And when I asked the Primary Health Care Center for confirmation that they couldn't do the ultrasound within 30 days, so I could schedule same examination in private practice and have the costs reimbursed, they wouldn't give it to me. The head of department won't sign it, he claims they have one doctor only, it can't go any faster.

In addition to the Ombudsman for patients' rights and inspection, respondents also mentioned the Commissioner for Protection of Equality, the Serbian Ombudsman, and the court as the ultimate authority.

(M, 69)

- I think there are definitely several steps. The Ombudsman for patients' rights, then the Commissioner for Protection of Equality, and then, what's the name, the Serbian Ombudsman. There are also various inspections. Depending on the problem, as a last resort.

(F, 45)

- And then there's the court in the end. If you have the nerve to fight with them.

As a barrier to reporting or filing a complaint about discrimination, court costs were also mentioned:

(M, 65)

- Now you have to pay a court fee for everything and it's not small; ordinary people can't afford it. That's one reason why misconduct goes unpunished. If we had authorities and a system, and if someone paid compensation to someone just once, like hospitals do in the Western Europe, you would see how everyone would then respect the laws. But as it is, even if you protest, nothing will come out of it.

(M, 57)

- All those commissioners and defenders are authorities; it's all the same to me. They say they're independent. What independence when they are on state funding! They issue some recommendations, and if you don't follow them - nothing happens. If you have money, you should immediately go to a civil lawsuit with a lawyer. If you don't have money, shut up and endure, or if it gets too much for you, then you fight with fists.
- **That's violence and you are responsible for that.**
- Yes, but I believe that if a person tries everything and it doesn't work, they should threaten with violence.

As they were not always sure about procedural protocols, the respondents said they would seek advice from a legal expert or lawyer if necessary. Some respondents also mentioned that they would ask Philanthropy for help.

(F, 72)

- I would like to consult with someone from Philanthropy. I trust Philanthropy, and if I had something sensitive and confidential to ask, I would ask them. Philanthropy organises various lectures for us and fight for us. They have gathered and strengthened us.

(M, 59)

- Well, I would ask you or (name of employee at Philanthropy). You know where to go and what to do. You have written everything to me about disability allowance. You need to know whom to ask...(laughter)

When discrimination appears, not everyone is ready to enter into any legal process; on the one hand, due to insecurity about whether the law will be applied, and on the other hand, due to fear that the community they live in will become aware of their specific problems.

There were not many respondents who initiated any legal action due to the violation of their basic civil and human rights. Some respondents also mentioned their own form of reconciliation with the situation, i.e. the existence of discrimination, and the lack of will and strength to engage in any legal process. However, there are also successful cases of complaints and the implementation of legally guaranteed rights. The associations that provided adequate advice and support to individuals who faced discrimination played a crucial role in these processes.

Anticipated stigma and discrimination largely direct the actions of those who are exposed to them and affect the development of various response mechanisms: hiding the attribute to which the stigma is attached, resistance to social stigma, and the internalisation of stigma, i.e. the development of self-stigma.

A life that involves exposure to self-stigma significantly affects the quality of life of individuals. Stigma and self-stigma contribute to the disruption of mental and physical health (lower self-confidence, weaker motivation for self-protection, alcohol use, development of depression, excessive self-criticism). In order to reduce self-stigma and empower rural populations, it is essential to have CSOs that provide support, but also inform beneficiaries about their rights and possibilities in the existing system, in order to reduce the level of fear and anxiety and to empower them enough to advocate for their rights and thus reduce discrimination.



Discussion: Participants' recommendations for reducing discrimination

In the final part of the interview, participants shared their views on reducing discrimination in their communities and in general.

(F, 35)

- In my opinion, there are two ways. One is through upbringing at home, and the other is through education, but also through sanctions. And people should focus more on their own homes, rather than others'.

(M, 72)

- As far as we living in the villages are concerned, discrimination will never disappear. It has always existed, it just wasn't called that way. Some people can get away with things. We need to change our character. You need to raise children, teach them tradition and honesty.

(F,58)

- Women need to be educated. These young girls rebel, but women endure and work a lot and nobody treats them well. Since birth, girls should be taught not to keep quite and endure.

(M,55)

- It is difficult to teach rural population something new. Young children should be taught from kindergarten what and how to act, but also those in health care and other institutions need to learn about discipline and respect laws.

(F,33)

- Education, accessibility to information: our people are not information literate. We need to know where to get information and how to act. Brochures don't exist; they should be available in municipalities and medical centers. We have rights, but we don't know what they are. We need to know exactly what our rights are and not be deprived of them.

(M,18)

- We, as young people need to bring changes. It has always been like that. We should react to every injustice towards anyone.

(F,58)

- Everyone needs to improve themselves. We all make mistakes towards someone at some point. But be a decent person, admit it and fix it, don't let it happen again.

(M,45)

- We don't have a system, everything collapsed, values along with it. What is being propagated is shameful.

(F, 72)

- Children need to be brought up properly. Here, in the countryside, especially the boys. They are allowed to do anything they want. Girls should be strengthened.

(M, 69)


- Discrimination should be punished. There's no point in giving recommendations. All those commissioners should be given the ability to punish.

(F, 57)

- It all depends on individual. All people I know are decent, well-educated and honest, they take care of themselves and help whomever they can, there is no discrimination.

(M, 39)

- In the village, the weakest is always discriminated against. Everyone talks about him, spreads rumors, but it's done by those who do not have any work. People need to be occupied with work, the village lacks that. Strengthen the farms, and then you will strengthen the person, and there's no gossip.



(F, 67)

- You (Philanthropy) should come to us more often, gather us, and give lectures. Then we gather, we talk, and someone from us gets inspired and does something for themselves and others.

(M, 55)

- Education from an early age, law enforcement; and particularly, I stress this specifically, constant pressure on the system to apply the law and respect people.




Conclusions

The population in rural areas is exposed to stigma and discrimination by the wider environment, including public institutions. It is noticeable in conversations with respondents that there is less anonymity in rural areas, and there is no clear boundary for privacy protection. Respondents perceive discrimination quite broadly and include other social phenomena in it, but when it comes to giving examples of discrimination, their understanding is adequate. They are generally aware of the rights that apply to all citizens, including themselves. There are not many cases of reporting discriminatory behaviour, nor can any specific area of discrimination be highlighted. Experiences show that people mostly feel powerless in front of the system. On the one hand, the reason is that it is difficult to prove discrimination cases, given the nature of the evidence required. On the other hand, the cost of entering the prosecution process is high for most; it requires money and time.

The respondents largely lack strength to use the existing legal system to protect themselves from discrimination and to practice their civil and human rights. If they are constantly or for a long time exposed to stigma, it leads to the internalisation of stigma and further deterioration of mental health. Thus, weakened individuals are not always in a position to initiate and carry out appeal procedures or to advocate for the practicing their rights, especially if they are of poor health. Along with all of this, the existence of mistrust in the system and insufficient knowledge of their rights and ways to enforce them puts rural population in a position of reduced ability to enjoy basic human and civil rights.

Philanthropy's outreach work in general, and especially the interviews conducted for this study, has raised many questions that require further investigation, particularly in areas where discrimination exists, but is less vivid and discussed (such as women's rights to inherit property, inability of older persons to access bank loans, psychological, mental or emotional abuse and violence, discrimination and neglect of older persons in



rural areas, status of informal caregivers of older persons, lack of recognition of mental health issues, inability of intersectoral cooperation, etc.).

It is also important to note that Philanthropy's specific field work in rural settings (home care providers, field volunteers, monitoring of activities conducted, etc.) brings Philanthropy in contact with persons living in extreme poverty, excluded from the community for various reasons, without a network of social contacts and with a wide range of problems that require quick action in resolving them.

CSOs work in such cases is sometimes crucial for the implementation of basic human rights of these individuals and their integration into society and public service provision. Outreach work, as specific type of work, should be recognised and standardised by society, especially by the social welfare system, as it improves the quality of life of vulnerable persons and groups, enabling them to enjoy basic human rights, and also addressing the issues of stigma and discrimination.

Recommendations

In order to meet the legal needs of rural communities, action is needed at both individual and structural levels. At the individual level, efforts should be made to empower the population through various support programs, including educational and psychological ones, as well as family and personal support, all aimed at familiarising them with their rights and obligations in different areas of social life. Special attention should be paid to the numerous prejudices still present, especially those related to male-female relationships. Information and education should be accessible in various ways, from face-to-face contact to publications and electronic media content. Regardless of the level of knowledge on their rights and ways of their practicing, due to the specific situations in which individuals find themselves when their rights are violated, there is a need for both counseling and practical support in practicing different rights.

In an effort to empower individuals to practice their rights, it can be useful to record and promote positive experiences and examples of basic human and civil rights. The structural level would involve creating an environment free from stigma and discrimination, as well as an environment that ensures law respect and enforcement. This level of action largely depends on government bodies, as well as their cooperation with CSOs active in this field. Without action at the structural level, working to improve individual knowledge and skills will not contribute significantly to creating a secure environment, free from discriminatory behaviour.



Social services mapping and monitoring their availability for rural population

Social services mapping and monitoring their availability for rural population, as well as interviews with social workers and caregivers, were carried out simultaneously with interviews with rural residents.

Data were disaggregated by municipality, service structure, and service availability. It should be noted that data on the exact number of social service users living in rural areas were not available.

Lucani

Financial resources are provided from the national budget and the budget of the municipality of Lucani. The total number of beneficiaries of the Center for Social welfare in Lucani is 1798, which represents 10 percent of the population. The largest increase of service beneficiaries is in the category of older population. The municipality and the Center for Social welfare do not have an established home care assistance, so this service is provided through Philanthropy, within the CONEX project, from April 2021 to March 2023. The service is free of charge for beneficiaries. The municipality can, if it has the means, announce a public tender for the provision of home care assistance services by a licensed service provider.

- Rights and services financed from the national budget: financial assistance, disability allowance, vocational training for children and youth with disabilities, foster care, residential accommodation, emergency intervention service.

- Rights financed from the budget of the municipality of Lucani: one-off financial assistance and other types of financial assistances, assistance to children and parents, costs of specific health services, childbirth allowances, assistance to unemployed new mothers, emergency situations, funeral costs, firewood costs, damage repair costs, accommodation in institutions outside the public social welfare system, school kits for children, school supplies, free school for 3+ children in the family, financial assistance for medically assisted reproduction for women up to the age of 47.

- Services financed from the budget of the municipality of Lucani: personal assistance for a child with disabilities, social housing.

- Rights provided by the Republic of Serbia, relating to financial support for families with children: compensation for maternity leave, leave for child's special care, compensation for unemployed mothers, parental allowance for first, second, third and fourth child, child allowance, compensation of costs of staying in preschool institutions for children with disabilities, compensation of costs of staying in preschool institutions for children who are beneficiaries of financial assistance.

All the aforementioned types of support also apply to rural populations. However, as previously stated, rural populations only use the Centre for Social Welfare services when necessary, such as in cases of divorce and child custody processes, reporting and prosecuting family violence, or submitting requests for financial or in-kind assistance. Regarding practicing rights, these are mostly mentioned in the domain of financial support. The main problem for rural populations is owning more than 0.5 hectares of land, which makes them ineligible for financial assistance. In addition to the aforementioned, rights related to financial support for families with children are also realised.

Professional from the Center for Social Welfare in Lucani and a home care providers engaged in Philanthropy's project shared their views on the needs of rural populations for social services and provided recommendations for improvement.

Professional worker

- I have been living and working here for years, and the decline of villages and people is becoming more and more visible. The villages in this area are very scattered. In some of them, there are older people who live alone in very poor conditions. Now, someone might say, why don't you help them? We do what is in our power, but we have many legal obstacles. Most of these people have low agricultural pensions or no income at all, but they own more than 0.5 hectares of land and cannot get financial assistance. The fact that Philanthropy now engages home care provider through CONEX project is incredibly important for older persons in our villages. Nobody visits them. To make matters worse, more than a third of these older persons have offspring, but nobody visits them. Now, what kind of relationships do they have, who knows? I have called some of them, but I mostly encounter a wall of silence. The truth can be very painful sometimes. Given all that, home care support is invaluable, especially for people in rural areas, and especially for those who live alone.
- **What about other services?**
- In my opinion, older persons are the most deprived. They need home care the most, and in the greatest extent possible. As much as it can be, free of charge for them. Really, they have nothing to pay with. Local authorities need to repair their homes, at least for those who have no one, no heirs, no children... nobody. If the area was less scattered, a club for the elderly could be created, where they would gather at least once a week. And those medical examinations organised through CONEX project, that is great, representing combination of social and health service.
- **What about other categories besides the elderly?**
- We are a small municipality, there are more and more elderly, young people are leaving. We have a certain number of people with disabilities; there are few of them in the villages. There are few children, the older ones go to high school in Cacak. As far as women are concerned, they are relatively organised. There is CSO "Women of Dragacevo". They engage in handicrafts and food production.


They participated in some competitions and received some grants, and now, through CONEX project, they have attended vocational trainings as well.

- **In your opinion, what needs to be improved in the field of social welfare and related services, and how?**
- To support older persons to the extent possible, to educate women so that they can become independent and work, have some income, and start businesses. Young people leave because living conditions in rural areas are difficult, there is no continuous support. When you have a well-organised society that cares about its inhabitants, then the Centre for Social Welfare has less work to do. That is to be a goal. To do less financial assistance and provide a wider range of services that contribute to a quality and dignified life.

Home care provider

(Note: One home care provider for older persons is engaged in CONEX project, visiting 14 beneficiaries twice a week for 2 hours, in one village of the municipality of Lucani)

- **You live in a village near Guca and have worked as a home care provider for older persons before, when local authorities funded that service. Have you completed an accredited training program?**
- Yes, I have always lived here and worked before, but not in such a wide area as now. I completed the training program through the municipality a long time ago.
- **Could you please tell us about the situation in the villages? You visit older persons, but how do you see the overall situation, which category of rural population is most vulnerable, and what services are needed?**
- Well, I visit and support older persons who live in remote village, some half an hour walk from first neighbours, having no contacts with family members. Only occasionally, someone passes near their homes. I buy food for them, bring medicine, and take them to the doctor's. Some of them have children, but they do not visit, do not communicate or are in conflict... everyone has their own story. They are all old and sick. They all received firewood, and everyone heats their



homes. The oldest ones who are alone are in the worst position. It would be best for them to go to a nursing homes, as they cannot take care of themselves. They either do not have a pension or have an agricultural pension, which is very low. Others live with their families. Children, predominantly daughters and daughters-in-law take care of the elderly. It is different for those living with families. Women work a lot, household chores, in the fields, and around the livestock. Children go to school and mostly don't come back as of high school age. Some young people work in local factories, mostly men. Older persons have highest needs, that's how I see it. But we need more home care providers for older persons, but again, I know it all depends on the money. The municipality no longer pays for it. It would be great if the CONEX project continues.

Social services in the city of Kragujevac are provided through the Center for Social Welfare "Solidarity" and the Center for Development of Social Welfare Services "Kneginja Ljubica".

- At the Center for Social Welfare, citizens have access to various types of assistance: financial assistance, increased and one-off financial assistance, disability allowance, special financial compensation, and financial assistance for vocational training, fostering and institutional accommodation of children and youth is provided until the completion of regular schooling or until the age of 26, as well as accommodation for adults with disabilities "Male Pcelice", Gerontological Center, and Shelter for Adult and Older Persons "Sveti Joakim and Ana" (licensed social service under the jurisdiction of Philanthropy).

- Rights and services in the field of social welfare provided by the Republic of Serbia include one-off financial assistance, providing supplies for beneficiaries placed in social welfare accommodation facilities, travel and meal expenses, funeral expenses, and a free meals in soup kitchen.

- Services in the field of social welfare under the jurisdiction of the city of Kragujevac are provided through the Center for Development of Social Welfare Services "Kneginja Ljubica". The institution is funded by the city of Kragujevac, as well as by beneficiaries' participation fees and donor funds and projects. The following social protection services are provided by this institution: day care for children and youth with disabilities, day care for children from families at risk, day care for children with behavioral problems, day care for adults with disabilities, home care for older persons, counseling on marriage and family, social housing, social housing for young people leaving social welfare protection, personal assistance for PwDs, respite centre, shelter for children and youth, and shelter for victims of domestic violence.

- Remaining rights provided by the city of Kragujevac include: the right to discounted transportation for certain categories of citizens, transportation for PwD in specialised vehicles, preferential parking permits, and power costs discounts.

Several CSOs operate in the city of Kragujevac and provide social welfare services, including:

- Red Cross: soup kitchen and a day care center for older persons.
- Oasis of Safety: strengthening gender sensitivity and equality in fighting family violence and GBV, prevention and health preservation. In one of the villages where Philanthropy conducts activities (Luznice), this CSO carries out the project "Support for Women from Villages for a Life Without Violence." They have a licensed hotline service for children and women facing family violence.
- Center for Independent Living of Persons with Disabilities: provides personal assistance for PwD.
- Association for Assistance to Persons with Autism: various activities aimed at supporting persons with autism to integrate into community.

Professional worker of the Centre for Social Welfare Kragujevac

- **Could you please explain to what extent people from rural areas use the Centre for Social Welfare services?**
- Rural population uses financial assistance if they meet eligibility criteria related to property and land ownership. They approach the Centre for Social Welfare during divorces and child custody procedures. Furthermore, there are cases of violence, and we have been providing shelter for several persons in our shelters.
- **Who are these people, what is their situation, and do they have anyone to rely on?**
- Their houses are in poor condition, they have no firewood during winter, and they have no or have minimal income. Usually, they receive financial assistance, and given that they are older persons, their health condition is getting worse over time. Some of them are alcoholics. Home care providers do not offer services in villages, and that is now under Philanthropy's provision.
- **So, do you have less contact with rural population?**

- Far less than with the urban population. They mostly come because of some obligation; divorce, placing parents in a housing for older persons, some specific situations with children, neglect or violence.
- **What do you think needs to be done to make services more accessible for rural population, and how much do they need them?**
- The greatest need is for home care support, and it will only increase. Young people have their own lives, children go to preschool or elementary school in the village, after that they move to the city or travel. Also, there will always be some interventions related to violence and neglect. In my opinion, alcoholism is a big problem. Drinking alcohol is socially acceptable, and that is why we have those tense family situations. However, fighting against alcoholism requires involving the wider community. Taking care of the older persons is a priority.

Home care provider

(Note: living in one of the villages and visiting 13 beneficiaries in three villages. Visits take place once a week for 2 hours)

- **You live and work here. You have known most of beneficiaries for years. In your opinion, who needs assistance the most and what do people in your community need?**
- It's the older persons who are in the worst situation. They live alone, don't have basic things, I sometimes cook for them, bring firewood, get their medicines when I go to Kragujevac, go to the doctor's for prescriptions for them. Their pensions are small, or they receive financial assistance. And many of them have children who don't visit them. Some of them live with their children, but their children don't work; they drink, argue, shout and spend money.
- **What about others, besides older population?**
- There are those lazy ones who don't work, so the village feeds their children, and the children are doing well in school.
- **Who needs help and what kind?**

- The older persons and those children. I went to the Center for Social welfare for that one child to ask what could be done. The leave home and is gone for a few days, and the child is left alone with a immobile grandmother.
- **And what did they tell you at the Centre for Social Welfare?**
- They visited the family, but the mother was home then - and nothing happened.
- **What do you think can be improved and how?**
- There is little that can be done there. The Centre provides some support, Philanthropy provides kits, sometimes something is distributed in the village, but houses need to be repaired, people need to work, older persons need pensions and better conditions. There's nothing to be done about it. Live and be quiet while you can.

Social services in the city of Kraljevo are provided through the Center for Social Welfare and the Center for Local Services.

- Rights and services financed from the national budget include: financial assistance, disability allowance, right and assistance for vocational training, family accommodation services for relatives, foster and other families for children, foster care for children, young people, adults and older persons.

- Rights and services financed from the budget of the city of Kraljevo include: home care, accommodation services (for adults and older persons in shelters, temporary accommodation for victims of domestic violence, respite accommodation, temporary accommodation in crisis situations), supported housing for young people who are leaving social welfare system, personal assistance for PwD, and personal assistance for children with disabilities. All of these rights are realized through the Center for Local Services of the city of Kraljevo.

- Rights provided by the city of Kraljevo include: financial assistance for unemployed mothers, one-off financial assistance for the first-born child, financial assistance for families with multiple children from Kraljevo, assistance for children with disabilities, reimbursement of costs for medically assisted reproduction for women, free-of-charge bus transportation for vulnerable categories within the territory of the city of Kraljevo, the right to subsidised prices for utility services for families of war veteran and families of war victims, discount cards for families with 3+ children.

- Rights provided by the Republic of Serbia related to financial support for families with children include: paid maternity leave and leave from work for child care, leave from work for child's special care, child allowances, reimbursement of costs for preschool education for children without parental care, children with developmental disorders, children with disabilities and children who are beneficiaries of financial assistance, as well as parental allowance.

CSOs based in the city of Kraljevo that provide social welfare services are:

- Family Support Center, which provides psychosocial, educational, counseling and occasional humanitarian assistance to dysfunctional families where the needs of children are not adequately met;
- Phenomena Kraljevo, active in fighting gender inequality and GBV. The organisation has a licensed SOS hotline for children and women exposed to family violence.

Professional worker

- **Do you know to what extent rural population utilises their rights and services?**
- They utilise them less the urban population. Certain number of residents use financial assistance; these are families that have been functioning like this for years. They also come to the Centre for Social Welfare when facing divorce and determining custody over children.
- **And the older persons, to what extent are they services' beneficiaries?**
- They receive financial assistance or some kind of urgent intervention. We have a daily center for the older persons in Beranovac, foster accommodation for older persons, while home care is provided in the urban area.
- **In your opinion, what is missing as a social welfare service for rural population? Do they have specific needs compared to urban one?**
- The need is the same, but some of the services are not provided in rural areas. Above all, the home care is needed, but the villages are scattered, and the salaries for home care providers are low. These funds are allocated from the city budget, and the service provider must be licensed. Other problems are the same for everyone - a lack of labour force, population outflow, birth rate decline. A systematic solution is needed.

Home care provider

(Note: in the area of Kraljevo, Philanthropy has engaged two home care providers who visit 10 beneficiaries in 3 villages, 3-5 times a week)

- **How long have you been working as a home care provider?**
- I completed the training a long time ago, but I have been unemployed for a long time, so I was really happy when Philanthropy was looking for staff.
- **So, were you in the category of long-term unemployed?**
- Yes, I have been unemployed for 20 years. Getting a job means a lot to me. And I love working with the older persons, it fulfills me. I think I know how to work with them.
- **How much does your visit mean to them?**
- Everyone likes to talk. They are lonely. Even though they have children, they are working and don't have time for their parents. Older persons are happy with every visit. Most of them live alone. We arrange with them what they need, and sometimes I bring them something. They are really looking forward to my visits.
- **In your opinion, what is the biggest need of people in rural areas that has not been fulfilled?**
- Above all, for the older persons to be taken care of. To stay in their own homes as long as possible. It is rare for rural older persons to go to nursing homes. Home care is a great thing, but we can't go to everyone, there are criteria. There are big needs, but there are only two of us. Through the Center for Social welfare the service is available only if you live in the city. And what we are doing is only until there is money. Or if the municipality finally realises that there are older persons living in the villages as well.
- **And what about others persons, besides older ones?**
- If you expect that the authorities would organize something, it will not happen. Here, people are directed to Kraljevo for everything. Only those who have to go to the Center for Social Work would go there, nobody else.

Conclusion

Monitoring social welfare services in all three location proves that the main challenge is lack of home care support in rural areas. The needs are massive, but not recognised, nor is the service established, except through the civil sector at the project level (CONEX project, Philanthropy). Trained and licensed home care providers exist in all three municipalities. Over time, the need for home care services will increase. Older population is growing, in many cases they live alone, and they want to stay in their homes for as long as they can. There are not enough nursing homes, and the income of rural older persons is very low (especially if they have an agricultural pension), so they cannot afford to pay for help. A big problem arises when signs of dementia appear. Even in cities, services for older persons are underdeveloped and long waiting lists exist for all of them.

Regarding other population categories, no special services that need to be developed, improved, or established are particularly highlighted. Respondents point out that rural population contacts the Center for Social Welfare only when necessary. Certain rights, especially in the field of financial support for families with children, are successfully implemented, regardless of place of residence (rural or urban area).

Smaller number of PwD claimed they knew their rights and successfully exercised them, while parents of children with disabilities mostly move to the city when their children reach school age for accessing day care service for children with disabilities.

Overall, there is no continuity in providing services. Cooperation between local self-governments and CSOs which are licensed service providers is necessary. It is necessary to develop new social welfare services that follow the needs of the population and contribute to a better and more dignified life for everybody. The current system is not efficient enough and does not cover the real needs for social welfare services.

Recommendations

- Services have to be harmonised (private and public ones), especially those for older persons.
- Social welfare services have to be additionally developed and made equally accessible for all.
- It is necessary to explore financial sustainability of service provision. Namely, in three targeted municipalities, local self-governments provide only certain services, their scope depends on the budget and they do not target larger number of beneficiaries' groups, nor they are continuous.
- Services need to have steady intensity and accessibility. Currently, intensity and model of services provision differ depending on the type of service. Not all services are available continuously and to the same extent, requiring an analytical approach to equality and comprehensiveness.
- Services supporting PwD's independent living need to be developed. Personal assistance service (the only service explicitly mentioned in the UN Convention on the Rights of Persons with Disabilities) is established in Kragujevac through a licensed private service provider. However, supported housing, which is of crucial importance for the deinstitutionalisation process, is not present in any of these three municipalities.
- Accessibility indicators show the need for further improvement and comprehensive development of services in rural areas.
- Home care is highlighted as a key service that needs improvement. The service is not provided continuously, nor in a sufficient number of hours. On average, less than five hours of support are provided weekly in total.
- All sectors need to be provided space in service provision. Public institutions dominate among providers of social services. For-profit providers of home care services are also present on the market. However, rural population is reached only by CSOs.

- The reporting system on social service providers and the number of services provided need to be continuous. There is no clear picture of all services, who provides them, whether some are in the pilot phase, etc. Continuous mapping and monitoring would lead to more adequate use of earmarked transfers and further development of services.
- Optimisation of distribution and accessibility of public social welfare services need to be conducted. There is no analysis of social services needed coverage, or what would represent an optimal level. This information could be a starting point for local self-governments when making strategic plans and decisions on establishing and improving existing services, as well as inter-municipal services.
- All services not financed solely by local self-government funds, but in mixed jurisdiction, should be developed with national professional support (especially services aimed at persons with disabilities).

Media content monitoring

The analysis of media content in the territories of cities/municipalities Kragujevac, Kraljevo and Lucani covers a period of almost four years, from 2019 until 2022. The collected data in this conclusion focuses on analysing the situation of vulnerable groups, with an emphasis on older persons, women, persons with disabilities, and others living in rural target areas of these three areas. The analysis had a special focus on the period before, during, and, conditionally speaking, after the COVID-19 pandemic.

The conclusion focuses on the aim of the analysis, identifying elements of discrimination, discriminatory speech, and hate speech; the accessibility of information and discriminatory reporting on above mentioned groups. The way in which the groups are represented was analysed, the degree of clarity with which information was provided to these groups, and the contribution that the aforementioned local self-governments had in improving the quality of life of these groups (in this case, the contribution would also include improving existing infrastructure and building new infrastructure, as well as other aspects of aid, whether material or other).

The conclusion of the analysis aims to show to what extent and in what way the actions of these factors have affected these groups, based on data collected in the form of interviews/reports in communities; the approach of public and private service providers to aid and the representation of the groups covered by the analysis in the media. In order to best illustrate the true state of affairs, efforts were made to ensure that the

collected data met transparency criteria, as well as provide general and comprehensive data on the target groups' conditions.

266 texts were reviewed from portals of ten different media outlets, including the website of the local self-government. The websites from which information on this topic was collected include www.rtk.co.rs, www.kragujevac.rs, www.rtvkraljevo.com, www.kraljevackenovosti.com, www.krug.rs, www.lucani.rs (official presentation of the local self-government on the internet), www.zapadneinfo.net, www.lucani.info, www.blic.rs, and www.kurir.rs.

Individual number of news published on portals/state gazettes covered by monitoring:

1. www.rtk.co.rs – 111 texts
2. www.kragujevac.rs – 24 texts
3. www.rtvkraljevo.com – 55 texts
4. www.kraljevackenovosti.com – 6 texts
5. www.krug.rs – 28 texts
6. www.lucani.rs – 2 texts
7. www.zapadneinfo.net – 12 texts
8. www.lucani.info – 18 texts
9. Blic – 8 texts
10. Kurir – 2 texts

Analysis of collected data

Analysis of the content covered by electronic media monitoring revealed that the information available to citizens had an adequate informative character, it contained information that was useful to the target audience. The analysis shows that the e-news was critically oriented towards any form of violence, especially domestic violence and violence against women; that the older and vulnerable persons were informed on how to obtain adequate assistance; and that population in rural areas was informed about infrastructure works that would improve their quality of life. Additionally, affirmative topics related to persons with disabilities and their social integration were covered.

The analysed media content could be grouped according to the target audience they address. Therefore, they can be divided into media articles that cover the following topics:

- violence, education on fighting violence – especially during the COVID-19 pandemic, violence against older persons;
- general information useful to the target audience;
- older persons and contemporary challenges and COVID-19;
- poverty;
- distribution of humanitarian aid;
- importance of home care service;
- local governments' actions aimed at helping specific individuals;
- mental health;
- informative articles on where and how target audiences can receive support, unemployed women, and activities aimed at them;
- general and service information/important phone numbers during COVID-19.

Violence / Gender-based violence / COVID-19/ Assistance to women

Media outlet: Radio-television Kragujevac

Title: "Increased violence against women during the pandemic"

Date: 24/11/2021

Link: <https://rtk.co.rs/tokom-pandemije-povecano-nasilje-nad-zenama/>

Informative text about violence against women during the COVID-19 pandemic and how to combat it.

Media outlet: Radio-television Kragujevac

Title: "Only 10 percent of women who have experienced violence receive support"

Date: 26/11/2019

Link: <https://rtk.co.rs/samo-10-odsto-zena-koje-su-dozivele-nasilje-dobije-podrsku/>

Informative text about violence against women and the help they seek and receive.

Media outlet: Radio-television Kragujevac

Title: "Unemployed women over 45 to be included in active employment policy measures"

Date: 02/11/2021

Link: <https://rtk.co.rs/nezaposlene-zene-starije-od-45-godina-obuhvatiti-merama-aktivne-politike-zaposljavanja/>

Informative text about support for unemployed women and measures adopted at the local level to help them access work.

Media outlet: Blic Portal

Title: "Neda has been blind since birth, but darkness has never been able to defeat her: she does everything she wants and loves and has one big desire"

Date: 01/12/2021

Link: <https://www.blic.rs/slobodno-vreme/neda-je-slepa-od-rodenja-ali-mrak-nikada-nije-uspeo-da-je-pobedi-radi-sve-sto-zeli-i/hmysqs2>

Text promotes work and social activism of blind young women.

Media outlet: Blic Portal

Title: "The youngest female miller in Serbia produces flour for foreign markets! She inherited a 200-year-old mill"

Date: 22/03/2022

Link: <https://www.blic.rs/vesti/drustvo/najmlada-vodenicarka-u-srbiji-pravi-brasno-za-inostranstvo-nasledila-vodenicu-staru/jqxbj4h>

Text promotes work of young woman involved in rural entrepreneurship.

Media outlet: RTV Kraljevo

Title: "Half a million dinars for economic empowerment of women in the city of Kraljevo"

Date: 24/09/2019

Link: <https://rtvkraljevo.com/2019/09/24/gradu-kraljevu-pola-miliona-dinara-za-ekonomsko-osnazivanje-zena/>

Informative text on supporting women and economic empowerment measures implemented at the local level.

Media outlet: Krug portal

Title: "Violence against women present in the pre-elections campaign"

Date: 25/04/2022

Link: <https://www.krug.rs/politika/u-kampanji-je-nasilje-prema-zenama-bilo-i-te-kako-prisutno/>

Text analyses the topic of violence against women, despite the large number of women who appeared on political lists.

Media outlet: Radio Television Kragujevac

Title: "For increased participation of older women in public and political life"

Date: 05/08/2021

Link: <https://rtk.co.rs/za-povecano-ucestvovanje-starijih-zena-u-javnom-i-politickom-zivotu/>

Text promotes the affirmation of older women in public and political life.

Media outlet: City of Kragujevac

Title: "Panel Discussion: Stopping Violence through Responsible Work with Perpetrators in Serbia"

Date: 01/11/2022

Link: <https://kragujevac.ls.gov.rs/vest/12711/tribina-zaustavljanje-nasilja-kroz-odgovoran-rad-sa-pociniocima-nasilja-u-srbiji.php>

Text analyses the problem of violence against women through analysis of perpetrators and working with them.

Media outlet: City of Kragujevac

Title: "Online campaign for 16 days of activism against violence against women"

Date: 25/11/2020

Link: <https://kragujevac.ls.gov.rs/vest/23267/onlajn-kampanja-16-dana-aktivizma-protiv-nasilja-nad-zenama.php>

Text analyses activism against violence against women from the perspective of local self-government.



Village/older persons/help for older persons/COVID-19/pensioners

Media outlet: Kraljevacke novosti

Title: "Education is crucial for the proper use of herbicides and pesticides in Serbian agriculture!"

Date: 25/06/2021

Link: <https://www.kraljevackenovosti.com/edukacija-je-presudno-vazna-za-ispravno-koriscenje-herbicida-i-pescitida-u-poljoprivredi-srbije/>

Text analysis educating rural population on proper use of pesticides.

Media outlet: Portal Krug

Title: "Portal Krug's mission accomplished: Grandma Malina from Vranes gets a safer roof over her head (VIDEO)"

Date: 28/01/2022

Link: <https://www.krug.rs/projekti/misija-portala-krug-kompletirana-baka-malina-iz-vranesa-dobila-je-sigurniji-krov-nad-glavom-video/>

Text on supporting vulnerable older person living in a village.

Media outlet: Radio-Television Kragujevac

Title: "Old village Erdec on the doorstep of Sumadija"

Date: 20/11/2019

Link: <https://rtk.co.rs/staro-selo-erdec-u-sumadijskom-pragu/>

A video article on one Kragujevac village.

Media outlet: Radio-Television Kragujevac

Title: "47 vulnerable persons have been accommodated in the Shelter for adults and older persons St. Joachim and Anne"

Date: 29/03/2022

Link: <https://rtk.co.rs/kroz-prihvatiliste-za-odrasle-i-starije-sveti-joakim-i-ana-do-sada-proslo-47-korisnika/>

Text presents available assistance for vulnerable adults and older persons.

Media outlet: Radio-Television Kragujevac

Title: "10 minutes: home care providers in service of older persons"

Date: 15/08/2021

Link: <https://rtk.co.rs/10-minuta-gerontodomacice-u-sluzbi-starih-lica/>

Text shares the benefits and importance of home care providers.

Media outlet: Radio-Television Kragujevac

Title: "Vaccine third dose primarily for older persons"

Date: 12/07/2021

Link: <https://rtk.co.rs/trecu-doza-vakcine-prvo-za-starije/>

Text highlights vaccination against COVID-19 as a priority for the older population.

Media outlet: Radio-Television Kragujevac

Title: "Philanthropy provides support for the oldest in the village"

Date: 23/03/2021

Link: <https://rtk.co.rs/covekoljublje-pomaze-najstarijima-na-selu/>

Text about supporting the oldest population in Kragujevac villages.

Media outlet: Radio-Television Kragujevac

Title: "How to help seniors overcome depression?"

Date: 20/12/2020

Link: <https://rtk.co.rs/kako-pomoci-starijima-da-prevazidju-depresiju/>

Text, accompanied by a video, presents a psychiatrist's views on ways for overcoming depression of older persons.

Media outlet: Lucani info / Voice of Western Serbia

Title: "Humanity in action: Dragacevo sunshine for lonely older women Dobrila"

Date: 09/11/2020

Link: <http://www.glaszapadnesrbije.rs/vest335885.html>

Text on providing assistance to an older woman living in a rural area.

Media outlet: RTV Kraljevo

Title: "Retired persons can apply for free-of-charge rehabilitation until 7 September"

Date: 20/09/2020

Link: <https://rtvkraljevo.com/2020/09/02/do-7-septembra-penzioneri-mogu-da-se-prijave-za-besplatnu-rehabilitaciju/>

Service information on applying procedures for free-of-charge rehabilitation.

Media outlet: Radio-Television Kragujevac

Title: "Mozart betting shop donates humanitarian kits for persons age 65+"

Date: 14/11/2020

Link: <https://rtk.co.rs/kladionica-mocart-donirala-pakete-pomoci-za-starije-od-65-godina/>

Text about a private company donating aid kits to individuals over 65.

Media outlet: Radio-Television Kragujevac

Title: "Private pharmacies open early for older persons"

Date: 28/03/2020

Link: <https://rtk.co.rs/i-privatne-apoteke-otvorene-od-ranog-jutra-za-najstarije/>

Service information on working hours of private pharmacies during the COVID-19.

COVID-19/village/help for rural population

Media outlet: City of Kragujevac

Title: "Seven million dinars for business improvement of Cumicanka cooperative"

Date: 24/11/2021

Link: <https://kragujevac.ls.gov.rs/vest/30798/sedam-miliona-dinara-za-unapredjenje-poslovanja-zadruga-cumicanka.php>

Text about public aid for rural households.

Media outlet: City of Kragujevac

Title: "Minister Nedimovic presents support measures for small agricultural businesses"

Date: 24/04/2021

Link: <https://kragujevac.ls.gov.rs/vest/25996/ministar-nedimovic-predstavio-mere-podrske-za-mala-poljoprivredna-gazdinstva.php>

Text about national public funded support for rural population.

Media outlet: RTV Kraljevo

Title: "Rogic's Barn Burned by Lighting Strike "

Date: 03/08/2021

Link: <http://rtvkraljevo.com/2021/08/03/rogicima-izgorela-stala-od-udara-groma/>

Text presents challenges rural population face.

Media outlet: Portal Blic

Title: "He Just Grabbed Her and Pulled Her Out of the Thicket " Wolves sow fear around Kragujevac, attacking even during the day, several sheep and lambs killed (PHOTO)

Date: 30/07/2022

Link: <https://www.blic.rs/vesti/drustvo/on-je-nju-samo-capio-i-izvuko-iz-vrzine-vukovi-seju-strah-kod-kragujevca-napadaju-i/kjbbhhw>

Text presents challenges rural population face.

Media outlet: Zapadne info (Western Info)

Title: "Lower taxes for agricultural land in Lucani"

Date: 15/11/2021

Link: <https://zapadneinfo.net/?p=10598>

Text presents tax relief measures.

Media outlet: Official website of the municipality of Lucani

Title: "Extended deadline for citizens to apply for subsidies for energy efficiency"

Date: 21.10.2022

Link: <https://www.lucani.rs/aktuelnosti/vest/?id=21>

Text on energy efficiency subsidies local government awards to residents.

Service information about COVID-19/ information on infection

Media outlet: RTV Kraljevo

Title: “Differences between Cold, Flu and Coronavirus”

Date: 16/03/2020

Link: <https://rtvkraljevo.com/2020/03/16/razlika-izmedu-prehlade-gripa-i-koronavirusa/>

Text on useful information related to COVID-19 pandemic.

Media outlet: Kraljevačke novosti

Title: “Five Kilometers of New Gas Pipeline Being Built in Kraljevo”

Date: 15/06/2020

Link: <https://www.kraljevackenovosti.com/grad-se-pet-kilometara-novog-gasovoda-u-kraljevu/>

Text about infrastructure improvement.

Media outlet: Zapadne info

Title: “Reconstruction of Lucani Roads Starting – Soon a New Asphalt from Dlin to Ovcar Banja”

Date: 27/05/2022

Link: <https://zapadneinfo.net/?p=13923>

Text about infrastructure improvement.

Media outlet: Portal Kurir

Title: "Announced Water Restrictions in Western Serbia: Here's when they start in Arilje, Cacak, Pozega, Lucani, and Gornji Milanovac"

Date: 28/07/2022

Link: <https://www.kurir.rs/vesti/srbija/3980869/najavljene-restrikcije-vode-na-zapadu-srbije>

Service information.

COVID-19 (social welfare assistance)

Media outlet: RTV Kraljevo

Title: "Soup Kitchen in the Time of Corona"

Date: 29/03/2020

Link: <https://rtvkraljevo.com/2020/03/29/narodna-kuhinja-u-doba-korone/>

Text on soup kitchen during COVID-19 pandemic



Conclusion

Based on the analysis of media content, one may conclude that electronic local media and electronic newsletters of local self-governments in the cities of Kragujevac and Kraljevo and the municipality of Lucani were generally ahead of widespread electronic media, i.e. portals in Serbia, when it comes to conveying information that clearly concerned the target groups covered by this analysis.

The analysis has shown that the examined data could contribute target groups in rural areas in improving their living standards, especially after the beginning of the COVID-19 pandemic in Serbia. Although part of the analysed electronic content is comprehensive in nature and concerns all social groups, not just the groups observed in this analysis, it can be concluded that such a so-called "umbrella" effect is positive, as all are affirmed in this way.

In that context, emphasising the position and issues of vulnerable groups in the crisis period further emphasises the importance of social equality in media reporting. It is also significant that some media such as Radio-Television Kragujevac or Krug portal used video content in their reporting, thus contributing to a more vivid presentation of information important for older persons and vulnerable individuals.

The comprehensive conclusion of media content analysis in the areas of Kragujevac, Kraljevo and Lucani, which deals with the position of vulnerable groups (older persons, women, persons with disabilities, and others living in rural target areas of these three local self-governments) is positive. Consequently, it can be concluded that there were no media content that affirms and encourages discrimination and hate speech, but media reports served to inform, encourage, and emphasise the importance of social solidarity and equal treatment for all.

Media features proposed ways to fight discrimination. Target groups learned about empowering their economic wellbeing through subsidised projects, grants provided by local authorities and private companies, in order to strengthen their own personal resilience, but also their positions within community they live in.

