

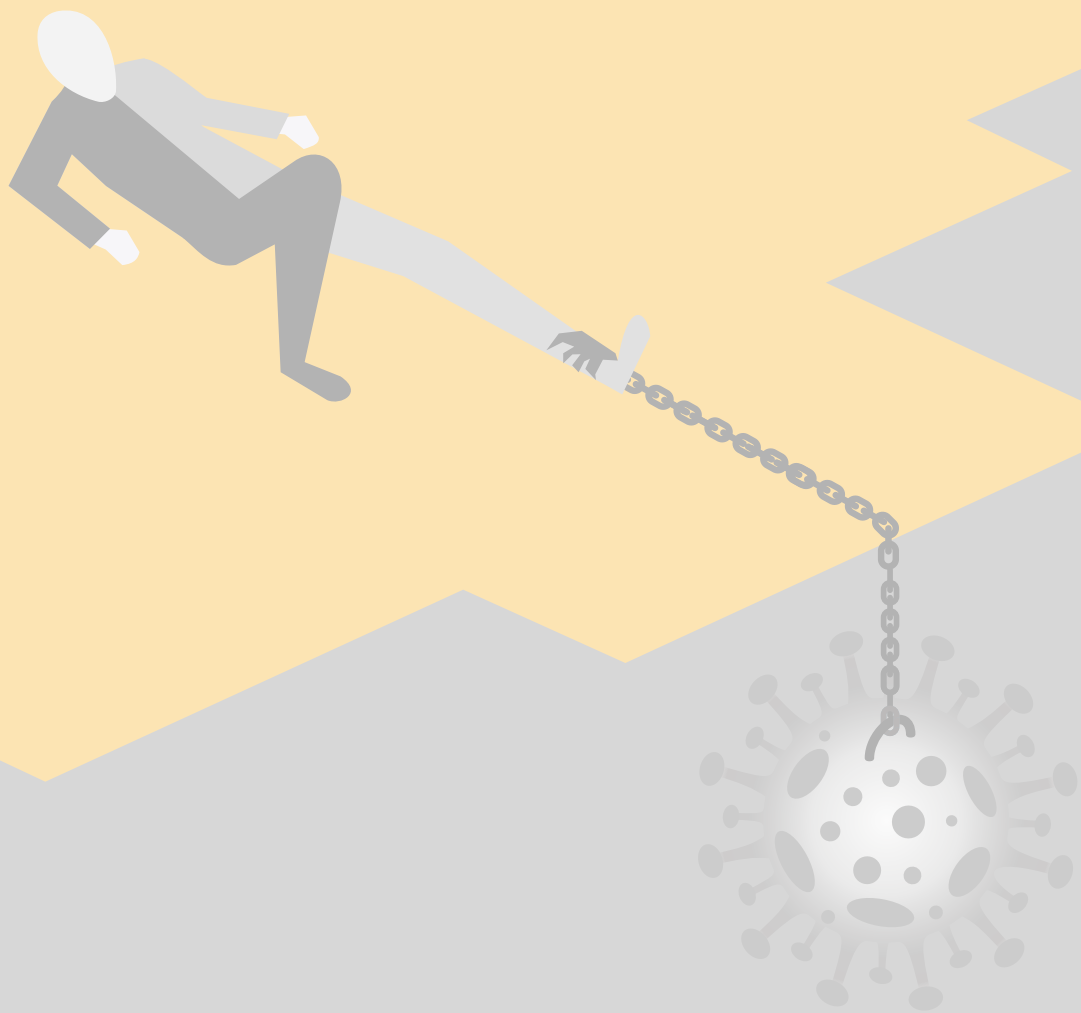
COVID crisis and poverty: Poverty Watch Serbia 2021



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development Initiative group

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About Secons

SeConS Development Initiative Group is an independent think-tank organization of experts from Serbia, established with the aim of contributing to long-term socio-economic development and improvement of living conditions of individuals and social groups in Serbia and the region. It was founded in 2005, as an initiative of a group of sociologists who worked on issues of social development at universities and in other civil society organizations in the country and abroad.

Today, SeConS brings together interdisciplinary experts to conduct empirical research, analyze policies and processes, challenges and specific social and economic environments to build a reliable base for further development of methodologies, recommendations and measures to advance the development and implementation of national, regional and local policies.

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Poverty watch under COVID-19 pandemic in Serbia: monitoring poverty without poverty data

The COVID-19 pandemic has altered realities and everyday lives of people, revealing more clearly gaps in resilience among social groups due to the inequalities, weaknesses of public social systems resulting from stalled reforms and fragility of democratic institutions, human rights and freedoms in a country that has long and strong legacy of authoritarian regimes, political clientelism and party patronage.¹

In addition to the analysis of available research and the use of official statistics, this research also presents the results of qualitative research conducted due to understand the situation and needs of groups at particular risk of poverty and social exclusion in Serbia. The data obtained from the qualitative research provided insight into the greatest challenges faced by representatives of vulnerable social groups since the beginning of the COVID-19 virus pandemic, such as problems related to their socio-economic position, employment, access to health services and access to education.

The report is also partly focused on role of the digitalization and digital divide in access to services during the pandemic. This document can be used as a tool for improving poverty reduction policies through advocacy at the local, national, and international levels through the activities of the Anti-Poverty Network - Serbia and the European Anti-Poverty Network (EAPN).

Monitoring poverty without poverty data collected by official institutions through regular monitoring, as well as other institutions and organizations through individual surveys and analyses, is a difficult task. There is always a large part of the problem and groups that will not be mentioned or analysed, or their position will not be considered. Although the SILC survey was conducted in 2020 and 2021, there are still no statistical reports on the poverty and inequality indicators, which makes difficult to assess more precisely





the impact of pandemic on social groups at risk of poverty and social exclusion. Due to the lack of official data, this report tries to assess the impact of pandemic on poverty based on several surveys conducted with the aim to assess various aspects of pandemic impact, and qualitative research conducted with representatives of different vulnerable groups.

A part of data presented in this Poverty Watch refers to results of the research about the impact of COVID-19 pandemic on economic indicators,² in the field of work in Serbia,³ as well as the study on the impact of pandemic and numerous restrictive measures introduced by the Government of the Republic of Serbia on various aspects of life of certain groups of population.⁴ In this report special attention is paid to studies on the position of vulnerable social groups, which had already been at risk, even before the pandemics, of poverty and social exclusion, on problems they had faced and consequences of the pandemic that impacted their socioeconomic position.

Research methodology

Methodology applied for composing this report includes two components – desk research and qualitative research.

Desk research provided basic information on social context and events at the beginning of the COVID-19 pandemic in Serbia, with special focus on the Republic of Serbia Government measures. The results of previous studies on the pandemic impact on employment and availability of livelihoods at the level of overall population were presented, as well as the pandemic impact on position of certain vulnerable groups (informally employed persons, Roma people, young people, single parents and old people) who are at risk of poverty and social exclusion.

In addition to analysis of existing studies, and for the purpose of writing this report, a qualitative research has been conducted with the representatives of four different vulnerable groups – young people, informally employed person, single mothers and members of Roma population. Data were collected applying the method of focus group discussion during August and the first half of September 2021. Representatives of the stated vulnerable groups from Belgrade, Novi Sad and Niš participated in the research and upon selecting the participants, their socio-demographic characteristics were taken into account: sex, age, type of settlement and education level.

Research questions within focus group discussions and interviews referred to the greatest challenges during the pandemic and included the three basic dimensions: (1) employment and socioeconomic status, (2) health situation and mental health during the pandemic, and (3) education during the pandemic.

COVID-19 pandemic in Serbia and government responses

The pandemic and the measures that have been in place in response by the government had profound impact on the everyday lives of people in Serbia.

Brief history of pandemics and Government response to it

First registered case in the world: China, 31.12.2019.⁵

First registered case in Europe: France, 24.01.2020.⁶

WHO proclaims pandemic: 11.03.2020.⁷

First registered case in Serbia: Subotica, 06.03.2020.⁸

Proclamation of emergency state: 15.03.2020.⁹

Number of COVID-19 cases and deaths as of 07.05.2020. (the date of cancelling emergency state): total number of sick 9848, total number of deaths 206.¹⁰

Number of COVID-19 cases and deaths as of 31.12.2020: total number of sick 337 923, total number of deaths 3.211.¹¹

Start of mass vaccination in Serbia: 19.01.2021.¹²

Total number of fully vaccinated (two doses of vaccine) people as of 1.09.2021: 2 810 921.¹³

Total number of COVID-19 cases as of 1.09.2021: 766 279.¹⁴

Total number of deaths as of 1.09.2021: 7.307.¹⁵

The response to the pandemic in Serbia followed a “restrictive model” at the beginning (March and April 2020). The emergency state was proclaimed in the mid-March, which included a set of measures such as closing borders, cancelling public transport, high restrictions of movement, and long curfews with several days of lockdown for all citizens, as well as the measure of mandatory quarantine for persons older than 65 years of age.¹⁶ Measures also included the closure of all stores, except grocery stores, relocation of work from offices to the homes of employees except in cases when it wasn't possible

to do so, or necessary to provide basic duty, closure of educational institutions at all levels, limitation of direct contact with citizens of public and social services providers, etc.

After two months (on 7th May 2020), the measures were eased: restrictions on movement were lifted, borders were opened from the direction of Serbia, but most countries closed their borders to Serbian citizens at the end of June (due to the increased number of cases), public and social services have been reopened, all shops have been opened as well as catering facilities, while most cultural institutions have remained closed. Preventive measures for safe and healthy work have been introduced, which includes work in shifts, so that as few people as possible stay in the same space, and mandatory implementation of hygienic and disinfection measures at the workplace.¹⁷ Also, at the end of June 2020, the Crisis Team of the Government of the Republic of Serbia made a decision about mandatory wearing of face masks in confined space,¹⁸ and this decision is still effective.

Although the restrictive model was discarded, situation with the pandemic and measures that were in force continued to affect the level of activity of companies, the level of employment, employees' working conditions and existence of citizens, especially of those who are in vulnerable position on the labour market. Since the epidemic flared up in Serbia, most companies that had the opportunity to transfer their employees to work from home during the state of emergency, returned to this model. September brought further 'normalization' of situation with opening schools, though in the changed work regime. However, at the end of October and during November there was a sudden rise in the number of infected, which is deemed as the second wave of the pandemic on global level. This wave of pandemic, which lasted from October to January 2021, was marked with significantly higher number of cases of infection in comparison to the first wave, which caused introduction of the new restrictive measures: restrictions on the number of people in public gatherings, shortening working hours of bars and restaurants, as well as introduction of regulations for entry to Serbia. As of 31st December 2020, there were 337 923 confirmed cases of virus COVID-19 registered in Serbia and total of 3 211 deaths since the beginning of the pandemic.¹⁹

At the beginning of 2021, the Government of the Republic of Serbia approved the use of vaccines against virus COVID-19 and on 19th January a mass vaccination of population started.²⁰ Although over 13% of population in Serbia had already received the first dose of vaccine at the beginning of March,²¹ the third wave of pandemic led to a sudden increase in the number of infected and to complete closure of bars and restaurants, as well as the great number of stores.²² Until 21 May 2021, there were 900 233 registered cases



of COVID-19 in Serbia and 8 649 cases of death. Mortality rate of 0.99% singled out Serbia as a state with the lowest mortality rate among the Western Balkans states.²³

Data values on the Government Response Stringency Index, University of Oxford, indicate that variations between extremely restrictive and extremely liberal measures, which were taking turns during the first half of 2020, were replaced by medium response scenario in the second half of the year.²⁴ In the period from 15th March 2020 (when the emergency state was introduced) until 1st July, the response stringency index values were in the range from 100 to below 40, and in the second half of the year, from 1st August to 31st December, the values maintained within the range from 50 to slightly over 60.²⁵

Until September 2021, there has been a slightly more than 40% of fully vaccinated adult citizens in Serbia.²⁶ Nevertheless, it is still not possible to assume what will happen in the next period nor is it possible to foresee any possibility of introducing new restrictive measures, since the greatest role in economic recovery and “normalization” of everyday life is attributed to vaccination,²⁷ and according to the current vaccination trend, it is assessed that not until February 2022, 70% of population will be fully vaccinated in Serbia.²⁸

The impact of COVID-19 pandemic and government measures on employment and livelihoods

The assessed impact of COVID-19 pandemic on poverty is to the greatest extent in connection to effects of the pandemic on economy, i.e. the depth of recession.²⁹ In 2020 Serbia had the least estimated increase in poverty (0.1 percentage point), and such result is attributed to the simulative measures introduced with the aim to protect job positions and income.³⁰

The Government of the Republic of Serbia had introduced different support measures for economy and citizens since the first half of 2020, such as: financial aid package for small and medium enterprises, one-off financial aid for all adult citizens (100 EUR in 2020 and 60 EUR in 2021), as well as additional financial aid for pensioners in the amount of 34 EUR and for the unemployed in the amount of 60 EUR.³¹ To that effect, the Government allocated almost 13% GDP³², and announced investments of additional 200 million euros for infrastructure projects in the next period, in order to mitigate consequences of the pandemic on economic growth of the country.³³

According to this year's economic report by the World Bank for the Western Balkans, financial aid packages of the Republic of Serbia Government proved to be significant in mitigating current impact of the pandemic on population and economy. As a result, it is estimated that poverty percentage in Serbia remained at about 17.4% in 2020, which is close to the level from 2019.³⁴ However, the pandemic and the Government responses in the form of aid measures led to public expenditure growth which, along with decline in public revenues, caused high fiscal pressures.³⁵ This resulted in fiscal deficit growth in all six countries of the Western Balkans, which now reaches between 6% and 8% of GDP for each country.³⁶ Therefore, it is believed that the renewal of fiscal sustainability should be a priority in the forthcoming period.³⁷



Impact on employment

According to the International Labour Organization (ILO) rapid assessment for Serbia, the decline in working hours during the second quarter of 2020 (May-July) resulting from layoffs and other temporary reductions in working time amounted for 14.8%, which is equivalent to approximately 510 000 full-time jobs.³⁸ The assessment found eight sectors in which workers are severely affected: wholesale and retail trade, accommodation, transport, food and beverages, service activities, forestry and logging, and crop and animal production. It is estimated that in these sectors over 700 000 workers are at immediate risk because of the characteristics of their jobs. Particularly vulnerable are 267 000 of informal workers and 314 000 of self-employed in these sectors.

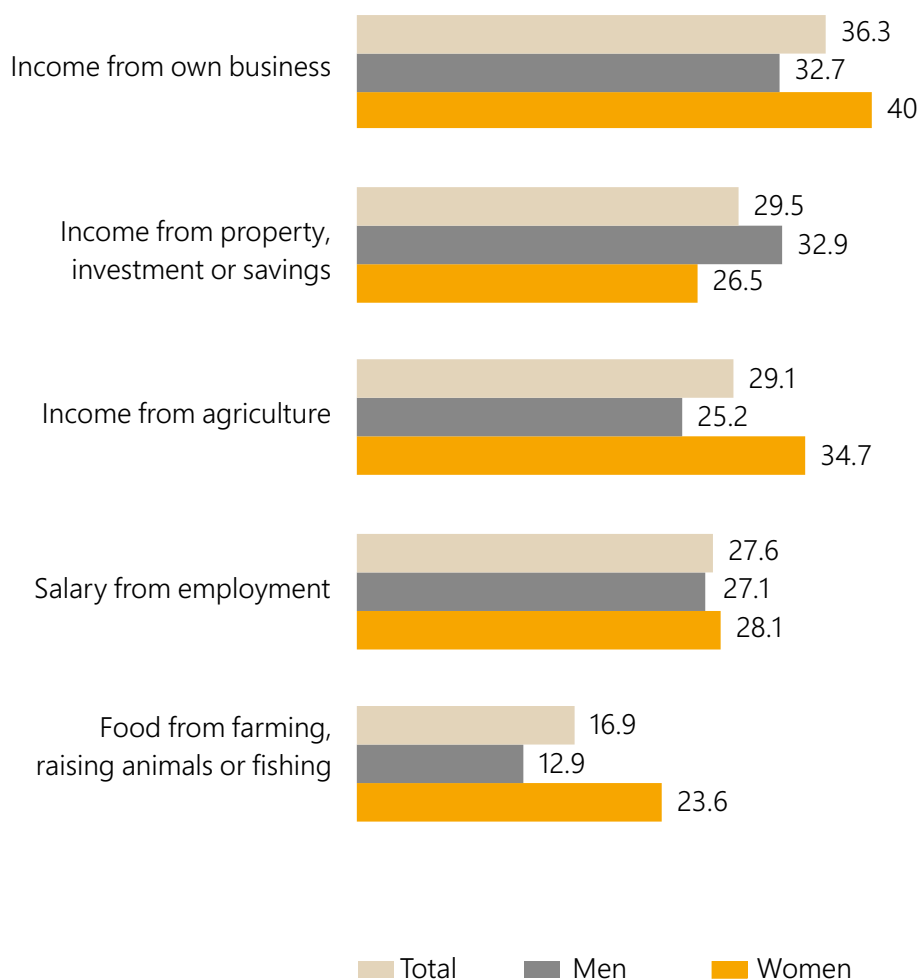
Nevertheless, data from the Labour Force Survey indicate to changes in labour market, when the entire last year is taken into account, which were not as big as it was expected at the beginning of the pandemic when the emergency state was introduced along with an array of restrictive measures.³⁹ Absence of significant changes in labour market is deemed to have been a result of the simulative measures package of the government, including salaries subsidies for all sectors.⁴⁰ Data from the Labour Force Survey indicate that the number of employed people in Serbia at the end of 2020 decreased for 6 200 persons, which is 0.2% of employed persons from 2019.⁴¹ On the other hand, data indicate that in the same period there was a decrease in number of unemployed persons for 25 800 persons, i.e. for 1% in comparison to 2019.⁴² Such data show that a part of people who lost their jobs during the pandemic were predominantly in inactive status (they did not look for employment), and a part of unemployed persons crossed over to the contingent of inactive persons, which means they stopped looking for employment.⁴³ This trend of labour force transition from active into inactive status was the most striking with young population (aged 15-24).⁴⁴

Impact on livelihoods

Research on COVID-19 pandemic consequences on economic empowerment of women and men in Serbia, conducted by SeConS Development Initiative Group during June 2020 on the representative sample of 1925 respondents, showed that impact of the pandemic on revenue was pronounced.⁴⁵ More than one third of respondents reported the decrease of the income from personal or family business, more than one quarter of respondents reported decrease of incomes from salary, agricultural activity or investments and savings, and even more than 16% of respondents reported the decline of in-kind incomes. The

gender differences are significant, with women systematically reporting, in higher proportion than men, their incomes from productive activities have decreased (Figure 1).⁴⁶

Figure 1: Share of respondents whose incomes decreased during the first three months after the outbreak of COVID-19, by sex and type of income, in %

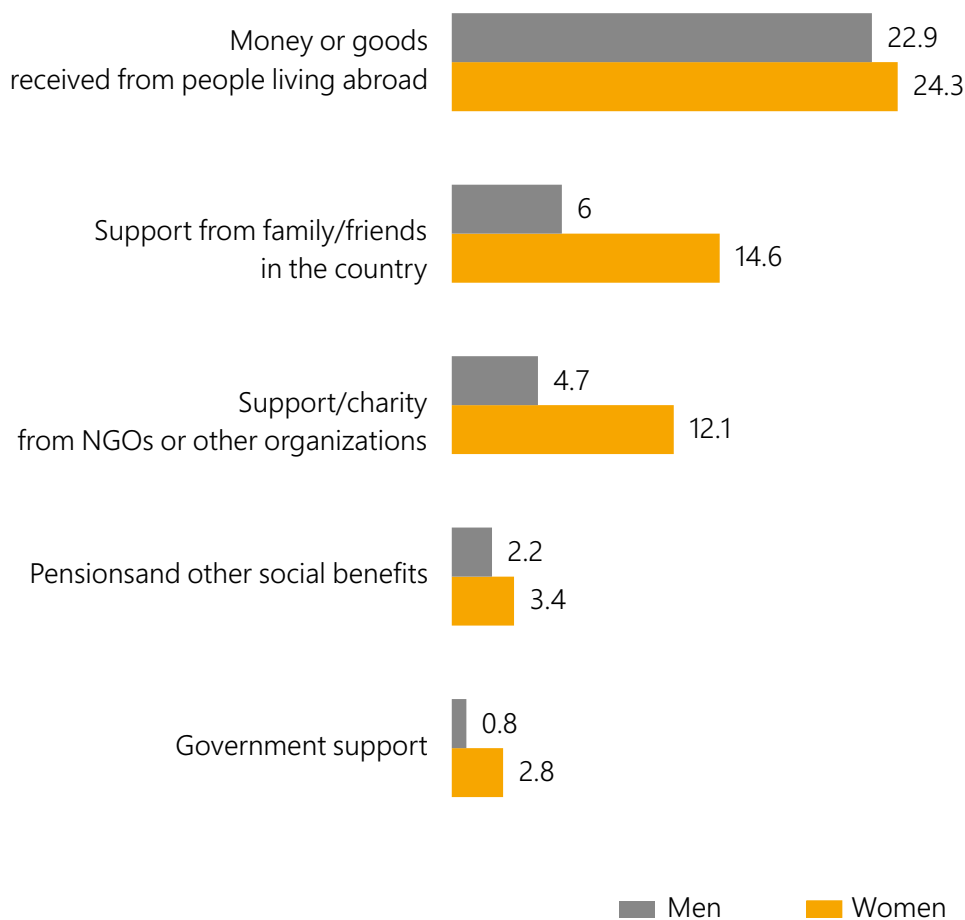


Source: SeConS, *Consequences of COVID-19 on women's and men's economic empowerment*, UNFPA, UN Women, 2020. Publication is part of the project „Rapid Gender Assessment in order to assess the impact of pandemic on women's and man's livelihoods“. Available at: <https://www2.unwomen.org/-/media/field%20office%20eca/attachments/publications/2020/12/unfpa%20unwomen%20secons%20consequences%20of%20covid19.pdf?la=en&vs=5724>

The only resource that has increased for majority of respondents due to the COVID-19 was government financial support. However, it should be kept in mind that this was one-off financial support amounting to 100 EUR⁴⁷. Still, small proportion of respondents indicated that their social transfers from government were reduced during pandemics. Although data do not explain to which benefits these respondents refer, it can be assumed that this is related to other forms of regular social benefits, such as minimum incomes, unemployment benefits, child allowances or similar.⁴⁸

The increase in pensions and social benefits is a consequence of a one-time aid in the amount of 34 euros, which was one of the measures implemented by the Government to combat the economic consequences caused by the COVID-19 pandemic. The incomes that have increased for a bigger portion of respondents include pensions and social benefits (increased for 37.7% of respondents), and support from NGOs. Decrease in incomes from transfers are again systematically reported more frequently by women than men (Figure 2).⁴⁹

Figure 2: Share of respondents whose social benefits decreased during the first three months after the outbreak of COVID-19, by sex and type of income, in %

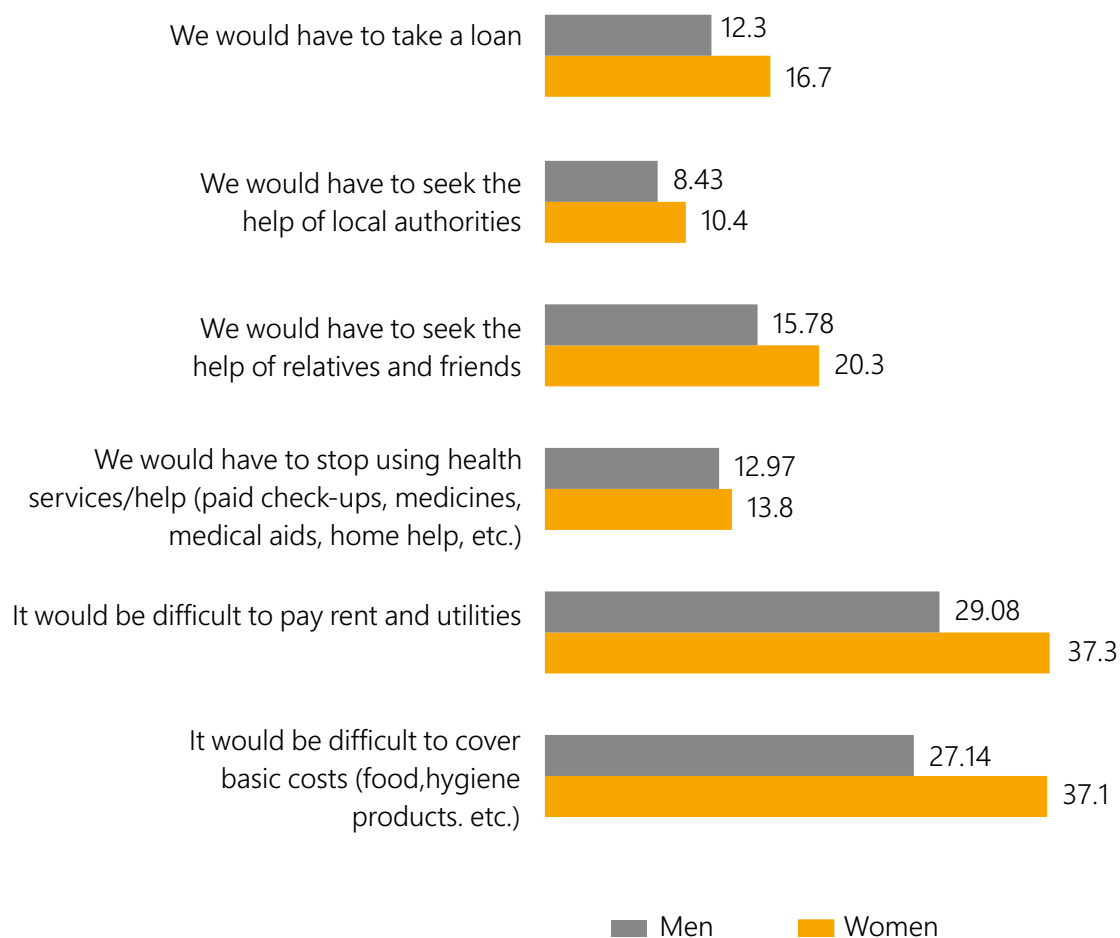


Source: SeConS, *Consequences of COVID-19 on women’s and men’s economic empowerment*, UNFPA, UN Women, 2020. Publication is part of the project „Rapid Gender Assessment in order to assess the impact of pandemic on women’s and man’s livelihoods“. Available at: <https://www2.unwomen.org/-/media/field%20office%20eca/attachments/publications/2020/12/unfpa%20unwomen%20secons%20consequences%20of%20covid19.pdf?la=en&vs=5724>

Other social transfers (from relatives abroad or in country, support from CSOs, etc.) have declined for smaller proportion of respondents.

One third of respondents believed, at the time of research, that their salaries would be decreased if the pandemic lasted for the next three months or longer, whereas 17% of them assumed that they would be left without salary in that case.⁵⁰ One third of respondents estimated that they would have difficulties to pay utility bills, and one third that they would have difficulties in covering basic living expenses.⁵¹ In this case, women showed to have been more vulnerable, because in majority they estimated they would face financial difficulties if emergency state lasted another three months or longer, which is in compliance with their weaker position on the labour market (Figure 3).⁵²

Figure 3: The assessment of the impact of COVID-19 pandemic on household financial situation if the state of emergency lasted longer (three or more months), by sex, % of yes answers



Source: SeConS, *Consequences of COVID-19 on women's and men's economic empowerment*, UNFPA, UN Women, 2020. Publication is part of the project „Rapid Gender Assessment in order to assess the impact of pandemic on women's and man's livelihoods“. Available at: <https://www2.unwomen.org/-/media/field%20office%20eca/attachments/publications/2020/12/unfpa%20unwomen%20secons%20consequences%20of%20covid19.pdf?la=en&vs=5724>

Respondents' age also proved to have been a significant factor. Younger respondents more frequently than other age groups stated that in case of longer duration of emergency state they would be forced to rely on various forms of financial support by friends and relatives (23.2% of younger respondents) or to borrow money (21.4%).⁵³ Also, respondents from households with children, in comparison to those without children, expressed greater concerns for their own financial situation and possibilities to pay housing and communal services expenses. Every fifth respondent from this group (20.1%) believed that, in case of longer emergency state, they would be forced to take out a loan to cover all necessary expenses.⁵⁴

Unemployed persons expressed fear, more than all other respondents, that due to poor material status they would face all six stated problems (Figure 3). The similar situation was in the group of informally employed persons, whose position differs most in relation to the formally employed persons.⁵⁵

Social protection measures: universalistic instead of anti-poverty

Income support measures implemented since the pandemic outbreak, included:

1. A one-off universal cash transfers to all adult citizens of 100 EUR in 2020 and one-off universal cash transfers to all adult citizens of 60 EUR in 2021;
2. One-off cash transfer to all unemployed persons in the amount of 60 EUR;
3. One-off financial assistance to pensioners and temporary benefit beneficiaries of about 34 EUR and one-off financial assistance to pensioners in the amount of 50 EUR announced for September 2021;
4. In-kind assistance to the 14,000 most vulnerable women in 50 municipalities, containing hygiene packages and essential foodstuff;
5. Financial assistance to freelance artists of 30,000 per month during period of three months;
6. Increased wages in the health sector by 10%.

According to the ILO/EBRD assessment, Serbia adopted the most generous and comprehensive economic package among the Western Balkan economies.⁵⁶ However, although the employment retention measures saved many jobs, they did not protect vulnerable workers (informal, temporary, service-contract workers), worsening their relative position and contributing to overall inequality. The ILO/EBRD microsimulation found that universalistic income support measure of 100 euros to all adult citizens had the distributional and anti-poverty effect, and contributed to the reduction of relative poverty rate to 22.9%, below the pre-crisis level.

The combination of universalistic employment prevention measures targeting all enterprises regardless their vulnerability and universal one-off cash grant to all adult citizens, managed to contain the expansion of poverty and to bring down the Gini coefficient by

one full point, according to the ILO/EBRD microsimulation. The measures suffered from 'error of inclusion' - including the well-off population that did not need cash benefit - as well as 'error of exclusion' – omitting certain groups.⁵⁷

The universalistic approach in providing social benefits to increase resilience of population on socio-economic consequences of pandemic, according to the EAPN assessment did not reach social groups that needed the most such assistance:

- ▶ Children – as data on the risks of poverty and social inclusion previously presented indicate, children are one of the most vulnerable groups and with the increase of number of children in the household poverty risks multiply.
- ▶ Groups without IDs, which are mainly found among people living in substandard Roma settlements, particularly among those with history of displacement and forced migration.
- ▶ Homeless persons which often lack IDs, information or resources needed to access public services and apply for such benefits.
- ▶ Refugees and asylum seekers who were not entitled due to the citizenship criteria and were contained in collective centres during the peak of pandemics.
- ▶ Persons with mental disability if not supported by family members.

Groups at highest risk of poverty and social exclusion during the COVID-19

Informally employed persons

Although the state measures mitigated negative impacts of the pandemic on employment and household incomes, such assistance did not include informally employed persons who disproportionately suffered a greater pressure relative to the rest of the working-age population.⁵⁸ Current crisis caused by the pandemic showed the vulnerability of informal workers and indicated to difficulties for providing assistance to businesses from the informal field of economy.⁵⁹ It is significant to bear in mind that a great number of informally employed persons actually work in sectors that were most affected by the pandemic, such as catering sector, personal services, construction. As it has already been stated, more than 267,000 informally employed persons work in eight sectors which are under the greatest risk,⁶⁰ while it is estimated that measures in effect during the emergency state particularly impacted 309,900 people in informal sector outside agriculture.⁶¹ Also, as informal workers do not have concluded work agreements, and consequently they do not have regulated health insurance, higher expenses may occur for ensuring healthcare services, especially in the period of pandemic, which generates even higher financial pressure on these groups of population.

Majority of participants in focus group discussions said that their financial situation in the first couple of months of the pandemic in Serbia was difficult and uncertain.



"My finances were reduced to the minimum... the money that was left I spent only for the most basic things, so I could just survive"

(student, aged 23, informally employed in marketing).

The participants point out that jobs they do are under direct impact of the pandemic – scope of work and earnings amount have been decreasing since the beginning of the pandemic.

"Our salaries were decreased last year for 10% and then as of 1st January the salary got back to the previous level... However, the work scope decreased a lot, we spent a long time at home, had many days-off... Now everything has returned to the level before the Covid"

(man, aged 43, informally employed in NGO).

"I can only notice that the more infected people, the less promotions"

(a female student, aged 21, works informally as a promoter).

All participants applied for financial assistance provided by the state, which they deem to have been useful, but it presents only a short-term relief.

When it comes to healthcare services and their availability, a part of respondents states they do not have healthcare insurance, while the other part of respondents claims to have healthcare insurance through their spouses. Persons who were infected by corona virus emphasize that they received adequate healthcare service, while those who had needs for check-ups and healthcare services outside Covid system were unable to make appointments and thus have medical examination. Respondents sometimes use private healthcare services, while one respondent emphasizes that her family does not have resources that could ensure medical examinations in private medical practice, which have been necessary for her mother for a long time now.

"[...] my mother was not able at all to see the doctor [...] she cannot go to private medical practice, because she doesn't have money for medical imaging... November, if I am not mistaken, is the month when she has an appointment... definitely four months. Since the beginning of the pandemic, they have constantly cancelled her appointments, although she has been treated as an emergency case"

(a female student, aged 21).

As for mental health during the pandemic, respondents emphasize that they felt additional psychological pressure, especially when the ban on movement was in force. Although none of the respondents asked for professional help, they know people who have turned to professionals in the last year (psychologists, psychotherapists, and the like) for advice and help.

Roma people

While state measures had a significant role in preventing the rise in unemployment level and in maintaining the poverty level from the period before the pandemic on one side, it has been estimated, on the other side, that many groups of population for whom such assistance was most needed, were left out or insufficiently included.⁶² Members of Roma population are certainly one of the more vulnerable groups, and a part of them could not be covered with cash transfers due to lack of personal documents.⁶³ Members of Roma population who work as collectors of secondary raw materials were at particular risk during the duration of measures restricting movement. A study on a small sample of Roma persons who work as collectors of secondary raw materials showed that half of them struggled to meet their basic needs during the ban on movement.⁶⁴ Also, inequality in using healthcare services that is wide spread in Serbia,⁶⁵ was particularly present with the members of Roma population.

Civil society organizations dealing with promotion and protection of the rights of Roma women and men in Serbia, and which participated in the study on socioeconomic impact of the COVID-19 pandemic on the rights of Roma men and women during June 2020, assessed the impact of the Government measures on members of Roma population during the pandemic as negative (47.37%), 26.31% believe that the impact was positive, and even 26.32% think that measures were with no impact on this group of population.⁶⁶ Almost 80% of organizations state that restrictive measures introduced during COVID-19 pandemic increased the risk of poverty among members of Roma nationality.⁶⁷

The participants of focus group discussions said that the pandemic brought them uncertainty, and a great number of them was not able to perform their tasks with which they had provided income for their households until that time. In particularly adverse situation were women from Roma population, who otherwise present a group that records the lowest employment in Serbia, with extremely difficult economic situation.



"It was difficult for us because we didn't have any job. No one could do anything, except for those who work in state institutions, it was really hard"

(a Roma woman, unemployed, with four children).

They think that financial aid was necessary and it helped their households, primarily in buying basic foodstuffs and hygiene products. Also, they point out that supply of the stated necessities was highly aided by Roma associations of citizens.

Young Roma men and women have been recognized as a group exposed to special risks during the emergency state, particularly when it comes to education, access to work and sources of income, as well as difficulties in access to electricity, Internet, television, and other means of communication and information.⁶⁸ In the field of education, the greatest problem which children and the youth from Roma population faced is attending classes online. Decision about organizing classes online was not followed by measures that would enable all Roma children to have access to curriculum content broadcast electronically.⁶⁹ Lack of digital devices is perceived by the participants as a significant problem and obstacle to children and youth from Roma households to be adequately covered by online education.

Younger participants of the focus group discussion, who are still in the education system and who had access to online classes, shared their experiences with this method of teaching. They all agree that online classes were rather poorly organized and it was pretty difficult and hard to follow classes broadcast on television at the same time as online classes, since the curriculum plan was not harmonized. Also, younger and older respondents alike agreed that such type of teaching was particularly difficult for children and young persons who did not have access to electricity, television, computers and Internet.

"Maybe they found the way by going to their friends' houses and they watched [online classes]"

(a young men with university degree, unemployed).

Participants highlighted at the very beginning of the discussion that access to healthcare services had presented one of the greatest challenges they faced since the start of the pandemic, although they all have regulated healthcare insurance. A part of participants

states that they managed to do all necessary examinations with longer waiting times, whereas others were forced to delay their specialist examinations, since their local health centres were still in Covid system. Also, they say that examinations in private medical centres present significant cash expenditures for their household, and that private healthcare services are sometimes necessary.

“We had problems, because we waited for a long time for making appointments for anything [...] they observed only what was rather urgent. For the rest, all health centres were closed. We have one health centre so close to our place, and we had to go far away because of some small ailments, since it was turned into a Covid health centre. Only private practice, who could go and who could afford it [...] Sometimes we had to [go in private medical centres]... because one can wait for appointments for a long time and in order to save one’s health”

(an older lady, unemployed, with four children).

Mental health is also one of the topics initiated at the very beginning of the discussion, since participants stated fear as one of the first problems that appeared with the pandemic outbreak and introduction of emergency state. A few of them think that conversation with a psychologist was helpful, but they have not looked for such type of help so far.

Young people

Civil society organizations dealing with promotion and protection of the right of young people, and which participated in a study on socioeconomic impact of the COVID-19 pandemic on the rights of young people in Serbia, mostly think (60%) that measures of the Government of the Republic of Serbia during the emergency state had negative impact on the rights and lives of young people in Serbia, and 80% think that when decisions had been made, young people were not recognized as a group at risk.⁷⁰ Decision of the state on closing schools and universities and transition to online classes had greatly changed the everyday life of young people and their education experience. Also, the change in ways of teaching was particularly difficult for young people who did not have access to Internet or adequate computer. More than half of young people (60%) assessed as negative or very negative the impact of the pandemic on their education, and only 6.1% of young people think that they had access to education which is necessary for their personal progress.⁷¹



A part of participants of the focus group discussions who are still in the education system – participants who attend high schools, as well as students – agree that online classes were poorly organized, that it was particularly hard for those young people who did not have necessary conditions for online learning, but that the pandemic impacted negatively the quality of education, with which they had not been satisfied even before the pandemic.

“I`ve got many friends who don`t have access to Internet, they can`t be alone in the room or they share the same computer (...) I really hope that from October everything will start on normal footing, because I really do think many students will leave the university, many of them don`t have conditions for the next year, let alone the budget”

(a female student, aged 21).

“Professors, we`ve just heard, won`t give practical lessons, (...) they won`t give lectures, that`s a great problem. It means that everything that was bad in our education system, corona pulled to the surface.”

(a graduate engineer, aged 27)

All participants came of age at the time when it was possible to register for financial aid by the state, and thus had the right to receive it, so they had registered, but still think that financial aid was not of some special significance, since the amount does not present a more substantial aid to their personal or household budget, due to high prices.

Most of the participants did not have needs for healthcare services in the period from the beginning of the pandemic, while one participant stated he had problems with making appointments with his doctor and thus he had to delay his medical examination.

When it comes to mental health, participants agree that in the period from the beginning of the pandemic they had noticed changes in their mental health, and that people in their environment feel much worse. One participant states that he asked for help from the Psychological Counselling Center for Students.

“I received counselling (at the Psychological Counselling Center for Students), because... really... being confined in four walls and literally without any contact with people that you had previously had, with whom you went out on daily basis, ... impact my psyche, and unfortunately we had numerous suicides, in and outside Niš”

(a graduate journalist, aged 26)

Nevertheless, almost all agree that visit to a psychologist or psychotherapist is still a taboo in their environment.

Single parents

With closure of kindergartens and schools during emergency state, employed single parents, among whom there are mostly mothers (79% of single parents families are mothers with children), faced with the problem of adjusting professional work and care for children.⁷² Also, due to restrictions of movement and avoidance of contact with others, single parents could not count on help from extended family, other parents, friends or paid assistance.⁷³ Interviews conducted with single mothers, as a part of qualitative research for the purpose of this report, indicated to, inter alia, problems that parents faced and for which they could not adjust their professional obligations with children care. Single mothers of younger children emphasize that they did not have a choice and that help from their parents in children care was crucial so that they could continue working and making a living, but due to fear they could infect older people, this decision was very hard for them.

“As for me, we had an increase in work scope and impossibility to work as usual, since the moment the emergency state was introduced, all kindergartens and schools stopped working, and I had to make a decision whether to bring my child to grandparents, taking into account all advice to protect grandmothers and grandfathers, and on the other hand I had to work to earn my salary. It was a constant fight between guilty conscience and the need to be pragmatic”

(a single mother, aged 47, one child).

It is estimated that during emergency in Serbia about 67,000 employees worked from home,⁷⁴ and a part did continue with such work arrangement even upon lifting the emergency state and restrictions of movement. However, in spite of announcement on the part of state bodies and appeals to employers that single parents of children under 12 years of age are enabled to work from home, if it is possible, adjusting work and care for children was still not resolved in satisfactory manner.⁷⁵ Providing possibility to work from home depended on employer's good will.

When it comes to socioeconomic status, respondents stated that there were no greater changes in income of their households since the beginning of the pandemic, Still, their efforts to work and care for children at the same time, especially during emergency state, resulted in increase in their daily obligations, and they say that it was rather challenging for them to organize.

All respondents registered for financial aid from the state. A part of them emphasize that they registered “out of spite”, because it was money that certainly belonged to them, whereas several respondents registered for financial aid in order to further forward the money, primarily for humanitarian purposes, since they think that financial aid of the state was not directed to those who needed it most.

Single mothers who have school-age children have similar views when it comes to online classes. They think online classes are not organized in the best way, and that combined model, i.e. model upon which children go to school one week, and then the next week they attend online classes, proved to be the worst and as a source of great stress for children.

.....
“A small number of teachers has coped with (managing online classes) and provided more quality lectures (...) and I think children of that age are not so mature to be able to have self-discipline at that level to regularly carry out their obligations”

(a single mother, aged 48, two children).
.....

They say their children were able to attend lessons at home, although sometimes there were problems, such as problems with internet connection, and teachers were tolerant about it. Also, they think online classes have potentials, but it is necessary to provide students with what is required for such method of education.

.....
“Technical conditions for conducting online classes are very important”

(a single mother, aged 65, one child).

“Children attending third grade classes and on received tablets in Belgrade, but it still does not mean that they have space and quality internet to be able to follow (online classes)”

(a single mother, aged 47, one child).
.....

Respondents say that due to specific organization of healthcare services in state sector since the beginning of the pandemic, they had to make appointments for specialist examinations, and that necessary healthcare services for them personally and members of their families, had to be done in private medical centres.

When it comes to the pandemic impact on mental health, respondents emphasized that they felt anxious, but did not look for professional help. They state as the main reason the fact that there was no need for that, while one respondent highlighted that this type of support would be useful, but she did not have enough time to commit herself to psychologist or psychotherapist’s services.

Older people

During emergency state, mandatory quarantine was introduced for citizens of Serbia older than 65, which meant that they were not allowed to leave their homes, for the purpose of protecting the oldest population from virus infection and disease. This restrictive measure caused an array of problems with older people, such as problems in buying food and medicaments, difficult access to healthcare services, and lack of social interaction, etc.

Older people faced several obstacles due to the pandemic: older persons suffering from chronic illnesses had more difficult access to healthcare services, since many healthcare institutions are in COVID system and all examinations and interventions not urgent were delayed due to the pandemic. In addition, movement restriction measures, but also fear that informal caregivers would infect older person, made difficult for them to provide help to persons they had taken care of up to that moment.⁷⁶ Research on accessibility of healthcare and social protection services to older people during the pandemic, conducted in the course of the emergency state, showed that 87.2% of respondents believed that the pandemic made difficult to access services by state healthcare protection.⁷⁷

Universal cash transfers for all adult citizens and additional one-off financial aid by the state for pensioners, along with their regular pensions, provided for financial security to this group of population. However, restrictive measures, and especially mandatory quarantine measure for people older than 65 and recommendation about reducing contacts, contributed to increase in risk of social exclusion of older people. These risks should be perceived from the perspective of their digital exclusion.

Namely, digital skills of the members of the oldest group of population (65+) have been assessed as minimum, because in the greatest number of cases they were not included in new interactive environments connected with current technological progress, whose pace of development is fast and requires continuing learning.⁷⁸ According to data from the Statistical Office of the Republic of Serbia, older persons in Serbia very rarely use information and communication technologies, i.e. only 17% of population aged 65 and over used computers during 12 months that preceded the study.⁷⁹ This rate is considerably lower than the rate of computer use in the same population in the European Union, which is 52%.⁸⁰ When it comes to internet access, through computer or telephone, findings of the study "Older persons access to information and communication techno-

logies”, realized in 2019, indicate to somewhat better situation. According to data from this study, more than half of respondents from the sample (57%) had access to internet at the time of being interviewed.⁸¹ Yet, the rate of digital inclusion remains as the lowest in older people in Serbia, which presents a significant obstacle in accessing information, especially those regarding exercising certain rights, for connecting with others, as well as for electronic services of public administration – which can particularly facilitate exercising older people’s rights to personal documents, and participation in programs and measures of the state.⁸²

EAPN stands for:

1. Adoption of integrated and coherent anti-poverty policy and improvement of social inclusion, since only in that way can issues of reducing poverty and improving social inclusion of different groups be systematically assessed, which are characterised by various forms of vulnerability, specific risks of poverty and for whom it is needed to define more adequate intervention measures. To that effect, EAPN stands for the following:
 - ▶ Adoption of the National strategy for combating poverty.
 - ▶ Connecting objectives of this strategy with appropriate sector strategies whose implementation is important for exercising the Agenda for sustainable development to 2030 and especially the Sustainable Development Objective 1: The world without poverty.
2. Increase the scope and effectiveness of social protection measures and ensure their transparency as well as regular monitoring and assessment of their effectiveness.
3. Define, i.e. more effective implementation of measures for increasing reach and reducing withdrawal from primary and secondary education, particularly in some groups where these risks are higher, in children from distant rural areas, children living in Roma settlements and especially girls who are excluded from education in the greatest percentage due to early marriage (which is one of the strategies for coping with poverty).
4. Define, i.e. more effective implementation of measures for increasing work dignity, ensure funds for their realisation, and independent implementation monitoring.
5. Further work on decreasing gender differences in education, employment and decision-making, as well as in care economy; further work on elimination of gender based violence and equal development of boys and girls.
6. Inclusion of civil society organizations, representatives of vulnerable social groups and persons who have experienced poverty in defining and implementation of measures for reducing poverty and social exclusion.

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