

## Women's Association of Kolubara District

### GRB tools used: costing analysis and advocacy;

**Overview** - ŽUKO is an organization that works in 10 smaller local governments where over 70% of people live in villages, so GRB tools are one of the most effective ways to predict and cover the needs of invisible groups in those villages, especially the needs of women in rural areas. A total of 174,228 inhabitants live in the Kolubara district (6 local self-governments), of which 51% are women. Apart from Valjevo, which is the administrative center of district I and the only major city, 70% of the population lives in villages. The population is mainly engaged in agriculture as a primary or additional job. The Kolubar district did not have its own analysis of the condition and needs of women in agriculture when it comes to health care, and the population was not aware of the scope of the problem and its impact on the entire community. Namely, there are 27,592 registered agricultural farms on the territory of the Kolubara District, that is, 65,661 people in the district are members of family agricultural farms, of which 28,904 are women. Bearing in mind that, according to the SeCons research, as many as 93% of women who are in the status of auxiliary members of the household do not pay pension insurance, we come to the devastating fact about the number of women who do not even have health insurance. These women are almost invisible to society and institutions. They rarely turn to state institutions for examinations, so their number at the level of local communities is also invisible. The wider, rural community is not at all aware of this condition. Health care for both men and women is very scarce and in 5 out of 6 LGUs reduced to primary health care. In the aforementioned research, 30% of women stated that they had not visited a gynecologist in the previous 3 years. Therefore, this problem affects the overall health condition of women in rural areas, and then spills over into the financial condition of the family, because in severe cases of illness, women are treated in private medical clinics.

**GRB initiative** - Bearing in mind that, according to the SeCons research, as many as 93% of women who are in the status of auxiliary members of the household do not pay pension insurance, and that about 40% of them do not even pay contributions for health insurance, the focus of the initiative was the analysis of the availability of health services to women from rural areas and initiatives to provide free health check-ups to women without health insurance. RS public health strategy for the period 2018-2026 as objective 4.1. recognizes the improvement of health and the reduction of inequality in health and foresees as one of the activities Special researches of sensitive groups of the working population, among others women and farmers. On the other hand, in one of the 6 LGUs, a strategy for improving the health of residents was adopted, through which special activities are planned based on the gender statistics of public health institutions and LGUs, while in another two LGUs, a decree was passed on providing free health examinations to residents without health insurance in clinics in rural areas whose the costs are covered by funds from the budget through program 12- Health care. In the framework of the initiative, gender analysis was used to obtain relevant data alongside gender cost-benefit analysis. Through the analysis, the state of availability of health services to women in rural areas was reviewed and an analysis of the budget of those LGUs in which the project was implemented in the Programs 12 was carried out.

**Success factors** - The success of the initiative is raising the visibility of the problem of the inaccessibility of health services to women from rural areas and the adoption of strategies and regulations that provide free health examinations to women from rural areas without health insurance. The initiative is sustainable through the adoption of a strategic document in one LGU and through the introduction of special goals in the budget programs in two other LGUs. The initiative improved the position of women in the field of health care where men had a better status due to greater coverage by health insurance.

**Main obstacles** - What were the main obstacles to implementation of the practice, its institutionalization, funding, or use by citizens (if it's a service, or good/resource)?

The most significant observations are that the institutions do not keep gender statistics, despite all the recommendations and the introduced Gender Responsible Budgeting, which obliges users of budget funds to keep gender statistics. Territorial dispersion of the women involved in the survey and the inaccessibility of the terrain and the reduction in the budget of local self-governments for 2022 had an impact on the reduction of the work of LGUs on strategic documents because they were focused exclusively on infrastructure works that were announced in pre-election campaigns.