

Intersecting Inequalities in Social Protection in Bosnia and Herzegovina

Results of an Empirical Study



Intersecting Inequalities in Social Protection in Bosnia and Herzegovina

Results of an Empirical Study

Aida Malkić
Tea Hadžiristić



Sarajevo, 2016

Title:

Intersecting Inequalities in Social Protection in Bosnia and Herzegovina: Results of an Empirical Study

Authors:

Aida Malkić
Tea Hadžiristić

Editors:

Edin Hodžić
Mirna Jusić

Published by:

Analitika – Center for Social Research

Year of publication: 2016

© Analitika – Center for Social Research, All Rights Reserved

Address of the Publisher:

Hamdije Kreševljakovića 50, 71000 Sarajevo, Bosnia and Herzegovina

info@analitika.ba

www.analitika.ba

Design:

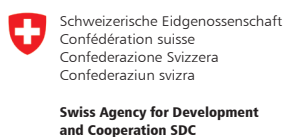
Branka Ilić

DTP:

Jasmin Leventić

The RRPP promotes social science research in the Western Balkans (Albania, Bosnia and Herzegovina, Kosovo, Macedonia, Montenegro and Serbia). Social science research aids in the understanding of the specific reform needs of countries in the region and in identifying the long-term implications of policy choices. Researchers receive support through research grants, methodological and thematic trainings as well as opportunities for regional and international networking and mentoring. The RRPP is coordinated and operated by the Interfaculty Institute for Central and Eastern Europe (IICEE) at the University of Fribourg (Switzerland). The programme is fully funded by the Swiss Agency for Development and Cooperation (SDC), Federal Department of Foreign Affairs.

The views expressed in this publication are those of the authors and do not necessarily represent opinions of the SDC and the University of Fribourg.



1.	INTRODUCTION	6
2.	FOCUS AND METHODOLOGY OF RESEARCH	9
3.	INDIVIDUAL LEVEL	11
3.1.	Recognition of body capability	14
3.2.	Securing the present needs of children	16
3.3.	Full devotion to the needs of an ill spouse	19
3.4.	Securing medical treatment	22
3.5.	Dependence on social assistance	24
3.6.	Expecting the State to “pay the debt”	25
3.7.	Relying on support from the community	28
3.8.	Living a normal life	29
4.	SYMBOLIC LEVEL	31
5.	STRUCTURAL LEVEL	37
5.1.	Differences in social welfare provision within the country	37
5.2.	Administrative hurdles and inappropriate treatment	39
5.3.	Different treatment of disability	40
5.4.	Lack of long-term care services	41
5.5.	Inadequate access to healthcare	43
5.6.	Problems with housing	44
5.7.	Inadequate and unequal support for families with children	44
5.8.	Obstacles to employment	46
5.9.	Lack of access to education	47
5.10.	Weak services for the elderly	49
5.11.	Compounded difficulties in accessing social protection for ethnic minorities	50
6.	INTERSECTIONALITY ACROSS LEVELS AND CATEGORIES	51
7.	ADDRESSING INEQUALITIES AT THE INTERSECTIONS THROUGH SOCIAL PROTECTION	59
8.	CONCLUSION AND TENTATIVE POLICY IMPLICATIONS	62
	BIBLIOGRAPHY	64

1.

Introduction

Recently ranked as the fifth poorest country in Europe by the World Bank,¹ Bosnia and Herzegovina (BiH) faces a number of serious socio-economic challenges. According to World Bank estimates, 17.9% of BiH's population lived below the critical poverty line in 2011.² In 2014 the unemployment rate was 27.5%, among the highest in Europe.³ The gender gap in employment is substantial, with women making up only 37.1% of those employed in 2014.⁴ Youth unemployment (ages 15-24) was the highest in Europe and recorded at a rate of 62.7% in 2014.⁵ Educational attainment of the working population is low, with 10.1% having completed higher, 48.7% secondary, and 41.2% primary education or lower in 2014.⁶

Compounding this poor socio-economic situation, the social protection system in BiH fails to meet the needs of the most disadvantaged among its citizens.⁷ Though the country spends 4% of its GDP on the social protection system – a comparatively high amount⁸ – only 17% of that funding goes to the population most in need. Estimates indicate that 72% of social benefits 'leak' to persons in far better socioeconomic positions, particularity due to the extraordinarily

¹ "Bosnia and Herzegovina the fifth poorest country in Europe [Bosna i Hercegovina peta najsiromašnija država u Evropi]," *Klix.ba*, February 22, 2016. See also: World Bank, "Poverty and Equity, Bosnia and Herzegovina," 2016.

² World Bank, "Poverty and Equity, Bosnia and Herzegovina," 2016.

³ Agency for Statistics of Bosnia and Herzegovina, "Labor Force Survey [Anketa o radnoj snazi]" (Sarajevo: 2014). Pertains to persons of 18+, in line with International Labor Organization (ILO) methodology.

⁴ *Ibid.*, p. 26.

⁵ *Ibid.*

⁶ *Ibid.*

⁷ See Rights for All and Initiative and Civil Action, "Why are We not Equal in Rights to Social Protection? Analysis and Recommendations", (Sarajevo: November 2010); Maastricht Graduate School of Governance *and* IBHI, "Non-contributory Cash Benefits for Social Protection in BiH: What Works and What Does not (I)" (Sarajevo: June 2013); William Bartlett, "Gap Analysis in the Area of Social Protection and Inclusion Policies in Bosnia and Herzegovina [Analiza nedostataka u oblasti politika socijalne zaštite i inkluzije u BiH]" (Sarajevo: *UNICEF*, November 2013); OSCE, "The Right to Social Protection in Bosnia and Herzegovina: Concerns on Adequacy and Equality," (Sarajevo: 2012).

⁸ See William Bartlett, "Gap Analysis in the Area of Social Protection and Inclusion Policies in Bosnia and Herzegovina [Analiza nedostataka u oblasti politika socijalne zaštite i inkluzije u BiH]" (Sarajevo: *UNICEF*, November 2013), p. 16.

high level of war veteran benefits.⁹ While a large number of people in BiH became unemployed in recent years as a result of deindustrialization, failed privatization measures, and other economic turbulence related to transition to a market economy and postwar reconstruction, social protection has become less effective in responding to the needs of a growing number of social welfare beneficiaries.¹⁰

The current social protection system is marked by a number of deficiencies in both of Bosnia and Herzegovina's entities (Federation of BiH and Republika Srpska) and Brčko District. One of the key problems in the country is inadequate distribution of the available benefits. Numerous studies suggest that adequate protection is lacking for the most vulnerable users and that the allocation of available resources is disproportionate.¹¹ Most social work centers are overburdened and have inadequate capacities.¹² This is an especially significant problem given that these institutions collect applications, apply the defined criteria, and decide on the allocation of funds in each specific case. Another problem is a lack of campaigns aimed at informing users on their rights by social work centers and other actors in the field.¹³ According to a study based on focus groups with beneficiaries of social assistance, they were not aware of their rights under the current system, which is associated with a lack of information provided by the centers for social work.¹⁴

Overly complicated legislation is an additional component which perpetuates the poor condition of the social protection system in the state. Both entities

⁹ Rights for All and Initiative and Civil Action, "Why are We Not Equal in Rights to Social Protection? Analysis and Recommendations" (Sarajevo: November 2010), p. 1.

¹⁰ In a bulletin published by the Agency for Statistics of Bosnia and Herzegovina, it was stated that there were 406,705 adult beneficiaries of social welfare in 2013, of which 201,919 were men and 204,786 were women. Also, there were 150,756 underage beneficiaries of social welfare, of which 78,341 were men and 72,415 women. Agency for Statistics of Bosnia and Herzegovina, "Social Welfare 2008-2013" (Sarajevo: 2014).

¹¹ See Rights for All and Initiative and Civil Action, "Why are We Not Equal in Rights to Social Protection? Analysis and Recommendations" (Sarajevo: November 2010); Maastricht Graduate School of Governance and IBHI, "Non-contributory Cash Benefits for Social Protection in BiH: What Works and What Does Not (I)" (Sarajevo: June 2013); William Bartlett, "Gap Analysis in the Area of Social Protection and Inclusion Policies in Bosnia and Herzegovina [Analiza nedostataka u oblasti politika socijalne zaštite i inkluzije u BiH]" (Sarajevo: UNICEF, November 2013); OSCE, "The Right to Social Protection in Bosnia and Herzegovina: Concerns on Adequacy and Equality" (Sarajevo: 2012).

¹² Reima Ana Maglajlić and Ešref Kenan Rašidagić, "Socio-Economic Transformation in Bosnia and Herzegovina" in *Welfare States in Transition 20 Years after the Yugoslav Welfare Model*, ed. Marija Stambolieva et al (Sofia: Friedrich Ebert Foundation, 2011), p. 33.

¹³ Rights for All and Initiative and Civil Action, "Why are We Not Equal in Rights to Social Protection? Analysis and Recommendations" (Sarajevo: November 2010), p. 2.

¹⁴ Custom Concept, "Analysis of Social Welfare and Health Needs of Families and Children in the Federation of Bosnia and Herzegovina and Brčko District [Finalni izvještaj: Analiza potreba djece i porodica iz oblasti socijalne zaštite i zdravlja u Federaciji Bosne i Hercegovine i Brčko distriktu]" (Sarajevo: UNICEF, 2013), p. 5.

and the district have different laws in force, whereas competences in each entity are further devolved to local levels (cantons and municipalities in FBiH), leading to wide variations in service provision. In FBiH, the main laws regulating social protection are the Law on the Protection of Civilian War Victims, the Law on Protection of Families with Children, the Family Law, and the Framework Law on Social Protection. The latter establishes a minimum level of social support, leaving it to the cantons to adopt specific cantonal laws, which results in significantly different amounts of social assistance benefits in different cantons).¹⁵ In Republika Srpska, as well as in Brčko District, the main laws in the field are the Law on Social Protection, the Law on the Protection of Children, and the Family Law.

For one to enter the social protection system(s) in BiH and exercise the right to social assistance one must be assessed as unable to work or have no other sources of income. The system is means-tested and consists of a series of non-contributory rights available to individuals or families. Available contributions include social assistance for the poor and disability benefits and cover various categories of users such as the poor (those receiving permanent social assistance), persons with non-war related disabilities, and civilian war victims. Supervision is performed by the Ministry of Labor and Social Policy in the FBiH, the Ministry of Health and Social Protection in the RS, and the Department for Health and Other Services in Brčko District, while social work centers perform key operational activities in both entities and Brčko District.¹⁶

In recent years, social protection has been on the government agenda in the context of austerity measures and rationalization of public spending, but a serious discussion on what sort of social welfare model BiH needs has yet to take place. Such a discussion seems more relevant than ever, especially as future reforms are targeted at tightening eligibility rules for social assistance based on need, without an emphasis on the development of important social services or other means of securing decent lives for a number of categories of current and future beneficiaries.

¹⁵ See OSCE, “The Right to Social Protection in Bosnia and Herzegovina: Concerns on Adequacy and Equality” (Sarajevo: 2012).

¹⁶ William Bartlett, “Gap Analysis in the Area of Social Protection and Inclusion Policies in Bosnia and Herzegovina [Analiza nedostataka u oblasti politika socijalne zaštite i inkluzije u BiH]” (Sarajevo: UNICEF, November 2013), p. 21.

2.

Focus and Methodology of Research

Crucial to the development of a more effective social protection system is taking into account the different forms of exclusion and oppression which affect the lives of those receiving social assistance or in dire poverty. With this in mind, this research project takes an intersectional approach in order to further investigate and assess BiH's social protection system.

The starting premise is that different forms of exclusion and oppression through the central analytical categories of gender, race, body, and class produce specific inequalities that materialize differently in the lived experiences of individuals. The goal of an intersectional approach is to uncover the *particular* modes of exclusion which exist at the intersections – rather than merely multiplying oppressions, intersectionality allows us to see discrete oppressions which exist at the intersections of one or more of these categories. By analyzing the everyday needs and coping strategies¹⁷ of our research subjects, we explored whether or not the identified sources of inequality are perpetuated and reaffirmed, or alleviated and eliminated at individual, symbolic, and structural levels and how they interact.¹⁸ This allowed us to assess whether the social protection system in BiH is able to address the particular intersectional inequalities identified by our research findings, and whether it does so in a meaningful way.

In order to provide answers to the main research question, we sought to identify perceived sources of inequality, associated self-identified needs, and strategies for everyday coping at the individual level; i.e. the very *strategies of survival* of those relying on social assistance or facing social risk. Our analysis further focuses on our interviewees' positions and experiences within their symbolic and structural environment. At the symbolic level, the research aimed to identify interviewees' references to the symbolic representation of social protection in the current social and cultural context. At the structural level, we examined whether and how relevant institutions and policies in BiH identify and address potential sources of inequalities as highlighted by the interviewees'

¹⁷ By coping strategies, we mean the strategies that our interlocutors employ in order to manage their socioeconomic situation, assure basic needs, and eventually overcome their poverty.

¹⁸ Gabriele Winker and Nina Degele, "Intersectionality as Multi-level Analysis: Dealing with Social Inequality," *European Journal of Women's Studies* 18, no. 1 (2011).

perspectives, and other symbolic representations (norms, values, ideologies) that they might construct and sustain. The final step was to examine the interaction of and dependencies between all of the relevant central categories (class, body, gender, and race) identified at the three levels (individual, symbolic, and structural).

Initially, the research focus was solely on the intersectional inequalities faced by social protection recipients, specifically the ones receiving permanent financial assistance. We noted that in this case, such a focus would have prevented us from including and hearing the perspective of persons who have lost the right to social assistance due to administrative problems, or were never able to realize it for different reasons, even though assistance was essential for their survival. We therefore eventually opted for a functional approach that allowed for a wider sample and heterogeneity in terms of the types of interviewees. We included persons receiving assistance, those in need of assistance but not receiving it, and those whose assistance has been discontinued for different reasons.

For the purpose of this research, qualitative methodology was employed following the model for multi-level analysis of intersectionality proposed by Gabriele Winker and Nina Degele.¹⁹ We conducted 30 interviews with persons that are, or ought to be, beneficiaries of social assistance living in the entities of the Federation of Bosnia and Herzegovina (FBiH), Republika Srpska (RS), and the Brčko District. Two focus groups were conducted in Sarajevo with 16 persons that neither receive nor have been the recipients of social assistance (referred to as the “general population”). Moreover, content analysis of widely-read daily newspapers was conducted to obtain additional insights into the references and the position of social assistance recipients at the symbolic level. Policies, laws, and other existing literature was also consulted and analyzed.

In subsequent sections, we present research findings on the individual, symbolic, and structural levels of inequality. These are followed by a discussion of intersectionality across levels and identified categories of inequality, as well as an evaluation of how the social protection system in BiH has tackled questions of intersectionality to date. The paper concludes with a discussion of recommendations for policies that would better respond to the inequalities identified through the research.

¹⁹ Gabriele Winker and Nina Degele, “Intersectionality as Multi-level Analysis: Dealing with Social Inequality,” *European Journal of Women’s Studies* 18, no. 1 (2011).

3.

Individual level

Using steps 1-5 of Winker and Degele's analytical framework, we gained insight into the self-identified needs and everyday coping strategies of subjects through in-depth interviews.²⁰ This also allowed us to learn how subjects relate to their experience and position within their symbolic and structural environment, and served as a basis to gain understanding of the interrelations, interactions, and dependencies of categories of inequalities (gender, race, class and body) on the individual level.

Beginning with the assumption that identity is constructed and determined through constant and dynamic relationships with 'other(s)' who serve as foils for self-definition, we identified the identity constructions expressed by our interviewees. This was done by searching for recognizable categories of differentiation, which individuals used to position themselves in relation to. To illustrate, when describing themselves, or when reporting their needs, responses tended to be shaped through the negation of 'the other.'²¹ In the case of persons with disabilities, their primary identification was that of belonging to a group of citizens with disabilities, with the able-bodied serving as the 'other', or the norm which one defined oneself in deviation from. Yet even within this category, identities and experiences differed based on the sources of disability. For example, in our sample we heard those with war-related disabilities labelled as 'others', described as enjoying a better status and being entitled to greater rights than persons with non-war related disabilities.²²

Our second step was to identify the symbolic representations that individuals referred to and which have an impact on their social practices and coping strategies. These were individual beliefs about society-wide norms, values, and ideologies which shape the world they live in and alter their responses to their situation. For example, the notion that a people of a certain age (and women in particular) are undesirable in the work force was deeply embedded in the opinions of our interviewees. This can be attributed to predominant relations

²⁰ For a detailed explanation of the methodology and concepts, see: Gabriele Winker and Nina Degele, "Intersectionality as Multi-level Analysis: Dealing with Social Inequality," *European Journal of Women's Studies* 18., no. 1 (2011).

²¹ Gabriele Winker and Nina Degele, "Intersectionality as Multi-level Analysis: Dealing with Social Inequality," *European Journal of Women's Studies* 18, no. 1 (2011), p. 58.

²² Such a distinction can be attributed to legal differences in disability status, as explained later in the section on the structural level of analysis.

on the labor market, and had the effect of paralyzing their efforts to seek employment. There was also a reigning sense among interviewees that “it is better to have something than nothing” when it comes to the amount of social assistance, which may effectively prevent them from demanding a higher amount which would adequately satisfy their life’s necessities.

The third step was to uncover references to structures (including institutions of social protection) and their influence on the needs and coping strategies of our interviewees. Moreover, we identified categories of inequalities experienced on the structural level, including class, body, gender, and ethnicity as central categories, as well as power relations that produce these inequalities. Thus, it was important to examine how the system addressed individuals’ needs and whether or not the experience that the interviewees had influenced their positioning within the system. We identified a variety of experiences: whereas some interviewees had been rejected by social services and soup kitchens due to their perceived level of tidiness or of disability, others had been fully taken care of, such as an interviewee whose legal guardian was the local Center for Social Work.

The fourth step consisted of identifying interrelations of central categories (body, class, gender, and race) on the three levels in order to uncover so-called “subject constructions” – that is, the categories of differentiation of the highest importance to individual interviewees on all levels. This enables us to see how these categories influence the construction of a person’s identity. For example, Kenan is a divorced father of two with weak social ties, looking for a new place to live every few months. He believes his wife left him due to his inability to provide for the family. Since he is a long-term recipient of social assistance on the basis of disability, this support matters to him only because of health insurance. He subjugates all his other needs to securing medical treatment, which is the primary aim of his coping strategies.

According to Winker and Degele, after completing the first four steps, one should be able to observe the interactions of identity constructions, symbolic representations, and structures of a research subject. Once the most important subject constructions were identified for every interviewee, the next step was to cluster²³ and compare subject constructions, having in mind the need to achieve the greatest possible internal homogeneity and external heterogeneity, where interviewees within clusters resembled each other and where each cluster was clearly differentiated from the others. In our case, the individuals were grouped around social practices related to dimensions of analysis, which were self-reported needs of our interviewees and coping strategies they employ. For example, Marija is similar to Kenan, who is mentioned above: although in a different situation, she also privileges medical care over all other needs.

²³ We used Kelle and Kluge’s approach to clustering, as suggested by Winker and Degele (2011).

Therefore, securing medical treatment becomes the category of differentiation that is of the highest importance to these two interviewees.

The types of relationships between these two dimensions of the analysis in the case of BiH are clustered into eight groups, presented in the table below, each with their own specificities and employing various types of coping strategies in relation to their self-reported needs.

In the following section, each of these groups is described in detail in terms of their lived experiences.

Table 3.1: Types of relationships between self-reported needs and developed coping strategies as dimensions of analysis

Groups of Subject Constructions	Interviewees [pseudonyms]	Self-reported needs	Coping strategies utilized
Recognition of body capability	Zijad, Armin	Being recognized as a valuable member of society	Active engagement in civil society and seeking employment
Securing the present needs of children	Esmā, Fatima, Raza, Ajša, Dženana	Children's needs	Organizing one's whole life around children
Full devotion to the needs of an ill spouse	Damir, Lejla	Dependents' needs	Organizing one's whole life around the dependent
Securing medical treatment	Marija, Kenan, Dragana	Medical treatment	Using multiple strategies to secure necessary medical treatment
Dependence on social assistance	Aleksandar, Janica, Željka	Various needs (food, bills, medicines, etc.)	Complete dependence on social assistance
Expecting the state to "pay the debt"	Ibrahim, Mehmed, Adnan, Mirza	The recognition of status	Using multiple strategies to demand recognition and assistance from the state
Relying on support from the community	Safet, Azra, Zumra, Nura, Fikreta, Blanka, Jelka, Sabaheta, Dževada	Various needs (food, bills, medicines, etc.) they are not able to meet without the support	Relying on help from family and friends
Living a normal life	Nusret, Živka	Nothing specific or unachievable	None, as assistance provides them with a "normal life".

3.1. Recognition of body capability

The first group consisted of two persons striving to take a fully active role in society, who feel they have the body capability to do so. They are fully aware of their disability and raise issues about obstacles that they face on a daily basis, mainly due to inadequate access to facilities, leading to the body being a source of inequality. They are making all possible efforts, including involvement in activities of civil society organizations (participating at trainings and education) and actively searching for employment.

Bodily ability figures prominently in the case of these two interviewees. Armin, a user of a mobility aid (a wheelchair), shows significant willingness to make his physical disability the only obstacle in striving for his well-being. For Zijad, his disability is of a sensory variety and he shares this willingness to gain independence in terms of taking full care of himself without external or additional assistance. Despite these attitudes and the rejection of the notion that their disability is a fundamental part of their identity, their physical disabilities were the main sources of their inequality in a broader societal context.

Class as a source of inequality was tied to a highlighted sense of identity as workers and the ability to earn a salary. Both interviewees fought against the notion that their disability doomed them to poverty, showing efforts to rise up on the socioeconomic ladder. They both believed that obtaining adequate financial means would equip them with financial independence and decrease their reliance on the State.

In describing himself as a former entrepreneur before the car accident that resulted with an acquired disability, Zijad emphasized his identity as a worker. Since the accident, he felt that he had lost control over his life, and was now doing everything to regain autonomy. He was constantly looking for opportunities to minimize the effects of his bodily disability and ensure that this was his only obstacle in the search for a better life and well-being.

I am a very persistent man, I have fallen down and gotten up thousands of times. I don't like to beg, to ask – I run from that. Even though I have many friends and if I asked any one of them, I probably wouldn't be blind now, but I did not want to, I could not allow myself to do that. (...) I would do a lot of things in life, regardless of being blind, I have so much energy to spend.

The other interviewee, Armin, managed to find work, and wanted to take full advantage of the social protection system in terms of access to social assistance and a pension, as well as other benefits that he is entitled to by law and status.

I prepare myself, download all relevant laws, write everything down if I cannot memorize it, and go to relevant institutions to demand my rights. Since I come prepared, nobody can deny me my rights!

Since being permanently employed would cause him to lose his pension, Armin is forced to perform work exclusively regulated by service contracts. This puts Armin in the liminal position of not being able to earn enough through work to make social assistance unnecessary, but not receiving enough from social assistance to make searching for work and other sources of income superfluous.

Unlike Armin who has other sources of income, Zijad receives only social assistance. He uses this income to pay for rent, bills and to take care of his wife, who has been diagnosed with epilepsy. Her specific medical needs, along with his own, further complicate his already poor socioeconomic position. However, his insecure housing situation makes meeting these needs on a monthly basis difficult. Moreover, he feels that the state has failed to provide him with a sustainable option, especially given his status as a blind person.

Social assistance is very important to me, at least until I resolve the housing issue. I asked the Center for Social Work to assign me an apartment, at least for seven years running, but they did not – even though I know that there are a lot of apartments in the city, and some of those who got apartments did not even deserve it. I believe that we, blind persons, are the most vulnerable category in this city, nobody takes care of us, not even the mayor. We (the Association) have been asking the mayor for support, personally, for five years now!

Even though he enjoys a better material status in comparison with Zijad, Armin still faces problems related to his rather small income, which poses an additional obstacle for him in taking full advantage of his capabilities. The low social assistance he receives is also determined by the source of his corporeal disability: as someone who has disability by birth (non-war related), he receives a smaller benefit than war veterans or civilian war victims. He feels that the amount he receives is not enough to meet all his needs, but that the higher amount civilian war victims receive might be sufficient.

Access to facilities and mobility posed additional burdens for our interviewees. Both men face physical obstacles preventing them from free movement. Armin's house is located in a locality away from the city center. He has to use some form of transportation, and while reporting a generally positive experience with private transportation companies, he was once insulted by a public bus driver for having to help him enter the trolleybus. For this reason, he has chosen to use alternate private means of transportation, as he believes that public transportation is maladjusted to the needs of people with disabilities.

Zijad, when comparing his disability to that of his wife, declared that he has “the brains and she has the strength.” This statement could be interpreted through the intersectional prism of body and gender. Since his wife's illness came into being, he has had to take care of the household, which in some way appears to have reversed their household roles and compromised or altered his sense of being the main breadwinner for his family, or of the division of men's

and women's household roles. After initially divorcing his wife, they remarried, ostensibly to escape being stigmatized by society, which points to a strong set of patriarchal values being acted upon. Yet it was also their interdependence which spurred the reunion. As for Armin, his role as the primary caregiver for his sister and her children fortifies his image of himself as the family provider, reasserting the dominant and active role in such a context.

Ethnic identity figures prominently in BiH through the constitutional and legal distinctions between the three dominant constituent peoples (Bosniaks, Croats, and Serbs), who are guaranteed the right to political representation and employment in public institutions in accordance with defined quotas. These 'pure' ethnic identities are defined in opposition to those who the State lists as official 'Others' – persons of mixed ethnicity, national minorities, and those who refuse to identify themselves by ethnic means. While Zijad refuses to declare his ethnic identity, Armin is aware of his mixed ethnic background and is quite open about it, regardless of his perception that an ethnically mixed identity is not favored by broader society. He contrasts this disfavor with life in the former Yugoslavia, where mixed ethnicity was well accepted. He claims that he does not mind being called "a bastard" and does not care if he fits in suitable categories related to monolithic ethnic boxes, imposed by the rules of wider society:

[I am] Bosnian and Herzegovinian or Other. I am from a mixed marriage. My parents never insisted, you can be whatever you want to be, it did not matter, because I was born in the previous system. Today, kids from mixed marriage are known as bastards in Sarajevo.

In conclusion, both interviewees expressed a strong desire for independence and adopted a number of strategies in order to overcome obstacles imposed by their disability and to remain active in spite of it, such as being active in the civil society sector and engaging in work. Agency is something they emphasize, adding to it to the responsibility of the individual to start from the individual perspective and in return, influence the broader social context.

3.2. Securing the present needs of children

The second group of individuals, five women taking care of underage children, is primarily concerned with how to secure the needs of their children and use different coping strategies to that end. There is a complex interplay of body, gender, class, and to a lesser extent ethnicity in this group, as will be elaborated below. Their precarious socioeconomic position meant that class and its effects had a large impact on these interviewees, though in different ways. Most interviewees in this group stated that they and their partners faced exploitation and mistreatment by employers when occasionally being engaged for underpaid jobs.

There were clearly visible differences in terms of housing issues. Three face accommodation troubles and live in alternative accommodation. Specifically, Raza lives with her partner and two children in a ruined house whose owner lives abroad. This situation does not provide them with basic living conditions. As they were forced to illegally use electricity, the electricity company cut their wires. Now, they pay a neighbor to use electricity for their fridge. In order to provide basic living conditions to their children, they filed a request for alternative accommodation with the Center for Social Work, but this was rejected on the grounds that the family could live with the partner's father. This, however, was not possible since the father had expelled the family from his house in the first place.

There are also differences in terms of the kind of care they could afford. Two persons in this group said they weren't able to provide necessary medical care for themselves or their children. Although families and their children often had some sort of health insurance, interviewees reported that it was rarely enough to cover all medical expenses, especially more expensive ones. Others reported that living in rural areas and having limited mobility all but curtailed them from accessing medical care. Even though all persons in the group receive child benefits, the received amounts cannot cover all of their children's needs, including nutrition, school materials, and other necessities.

There was a sense that women of a certain age (but also intersecting with educational level and disability) are unwelcome in the labor market. This narrative was deeply embedded in Esma's statements. As an unemployed Roma woman with a disability, her conviction that this was the case seemed to discourage her from seeking work. She acts as the legal guardian of her brother's daughter, and all of her activities are focused on providing a good life for her adopted daughter. One of the things she does in order to achieve this is clean the staircase of the building she lives in. When asked if she is looking for another job, Esma claims that no one would want to employ her due to her age and low level of formal education:

I completed elementary school, who will hire me with elementary school? Who will? I have no school, I have nothing! They are not hiring people with faculty degrees, let alone me! ... I am doing all these medical exams to see what to do with this spine, I cannot work. Still, who will hire me with this age? I am 56, who will?!

Age as an obstacle for women was also present in the case of Raza. The father of her partner had kicked the family out after Raza became pregnant – according to her, he had used her pregnancy as an excuse to do so, as he did not support their relationship from the beginning, given that she was older than her partner. The patriarchal belief that women in relationships ought to be younger than the man directly influenced her insecure housing situation.

The intersection between body and gender as a significant source of inequality was visible from Fatima's experience as a single mother of a child with a disability. While struggling with her own mental illness, she used all the means available to her in order to meet the basic needs of her and her son. According to Fatima, finding a job would be a life-changing event, even if this meant performing manual labor such as cleaning households. However, she is afraid of how employers may react if they were to find out about her illness. Moreover, she is afraid of losing her social assistance in the event of getting a job, which is a risk that she cannot afford. At the same time, she has faced discrimination on the basis of her appearance when seeking assistance in a soup kitchen:

It was Ramadan. They gave us, 'the social problems', a card for the soup kitchen so that we can get food. ... when I was supposed to get the food package, [the woman in the soup kitchen] looked at me and said: "The package is not for you", to which I replied: "How is the package not for me? If my social worker gave me the card for me and my disabled child, how is the package not for me?" That's when she said: "You look good!" and refused to give me the package. She sent me to my social worker to bring verification that I am a single mother, that I am marginalized, and she added that I have my social worker and that she should feed me. I left without the package, crying.

The event points to several symbolic representations of those receiving social assistance both from Fatima and from the soup kitchen worker. On the one hand, Fatima identified herself as a 'social problem' while on the other, the worker's perceived notions of what poverty looks like meant that she failed to recognize Fatima as a person in need of aid. This suggests a link between class and body and the way a poor socioeconomic position is perceived. Fatima's story also demonstrates the drawbacks of the social protection system, whereby she is curtailed from looking for work by the fear of losing necessary social assistance funds, and thus remains caught in a position where she is barely able to provide a 'normal' life for her son.

In another example, Ajša, whose children were older than 18, had to decide whether or not to sue children in order to obtain the legal right to social assistance. The law states that persons older than 18 are expected to take care of their parents,²⁴ and the only way she could obtain assistance was if the court proved that her children, in fact, could not take care of her. This implements a significant bureaucratic hurdle for elderly people who are in need of assistance but have older children.

²⁴ Or rather, that one cannot receive social assistance if they have family members with the financial means to care for them.

Although women are not expected to be the primary breadwinners of their family, single mothers who had to play the roles of both provider and caretaker clearly struggled with taking on both roles. Raza also expressed a feeling of ineptitude to fulfill the role of a woman caretaker:

When my brothers come for a visit, they throw ten convertible marks at me, like I'm a tramp or a prostitute under the bridge.

This intersectional knot between class and gender suggests a clear dynamic of shame for not being able to support the family and having to ask for assistance, tied to a perception that the brothers, who are better off, take on a dominant providing role. Generally speaking, members of this group accepted traditionally predominant gender roles. Most of the five female interviewees shared the belief that men ought to be the breadwinners in the family and the ones seeking employment.

Ethnicity as a source of inequality was indirectly present in this group, as a category referred to by one of our interviewees. She seemed compelled in her account to overemphasize that her apartment is clean despite her financial situation. As she identifies herself as a Roma Muslim, it appears to be a marker of her resistance to the negative stereotypes associated with the Roma population and with the poor.

To sum up, the needs and coping strategies of women in this group focus on securing the needs of their dependent children, which posed a major obstacle to full-time employment. Further aggravating circumstances were the different educational and medical needs of the children, while women felt that they lacked adequate support from state institutions. Though in a similar position, they have had rather different experiences with class, body, and gender.

3.3. Full devotion to the needs of an ill spouse

The persons within this group are primarily concerned with the needs of their dependents – their ill spouses (one with schizophrenia, one in a coma) – and all their activities revolve around these health problems, which affect and essentially determine these persons' lives.

In this group, the body was a central source of inequality for persons by association with their spouses. In other words, since they are caregivers providing spouses with daily care, they are consequently limited in their ability to find employment and other means of financial support. Damir also has a set of disabilities himself, but to him these are of secondary importance in comparison to the disability of his wife, as he sees himself to be her main nurturer.

Damir is a war veteran with a disability living in a fairly large but rundown house, in which all of the five family members use only one room. Given that his house was about to be torn down by the State, a non-governmental organization

helped to build a house for them and they are expecting to move in soon. However, issues arose when they were confronted with paying for the construction license, which they could not afford, but rather had to rely on charity.

Damir used to sell snacks at soccer games, but could not continue his work because he had to be at home all the time to take care of his wife. Her condition has required substantial adjustment in terms of everyday functioning of the family, leaving them with very few options to cope with the situation. Though her medication costs are covered, her constant need for care and Damir's own illness puts them in a disadvantaged economic position. Friends and family have reportedly abandoned Damir, his wife and children, which suggests social stigma related to mental illness, while job opportunities are limited. His inability to work due to constant caregiving duties is not recognized by the State – it is his wife who receives social assistance on the basis of her schizophrenia. This interviewee was deprived of his rights to use the soup kitchen because he owns a vehicle, which is a criterion of elimination for using the soup kitchen by recipients of social assistance.

At one point, due to his inability to cope with the existing situation, Damir decided to withdraw his daughter from high school so that she could take care of the mother and the household. This is an example of the evident intersection of class and gender, with the female child being expected to forfeit her education in order to take on a 'female' nurturing role. Yet, being aware of the importance of education, especially for women, Damir tried to include her again in the schooling process:

What I need the most is for her to complete education, believe me! I would love it most because she is a girl, to have a job, enough money for herself and to feed her own family tomorrow. See how poor we are!

The school has offered to let his daughter finish high school if she pays a certain subsidized amount, where the Center of Social Work would pay for the difference. This offer was, however, refused.

Patriarchal and heteronormative norms about male and female roles have also played a role in their lives. When his wife was hospitalized for three months, Damir asked the Center for Social Work to help him take care of his children. The Center offered to place the children in an institution for abandoned children. He refused this offer considering it inappropriate, as it would imply that he was not capable of taking care of his own children:

She was hospitalized for three months. They were very young - the one sleeping was only three months old. This one was 2, maybe. I could not take it anymore, children did not go to school, they called from the school. They [the Center for Social Work] came to "help" and suggested to take the kids to the home for abandoned children, and that is their help?! So, I started yelling "if you came to help, then help, if you don't

want to, get out of my house!” What kind of help is that, to take my kids away from me, that is not help! I can feed my children, I just need some help, at least while she is at hospital!

Damir’s own notions of himself as a man and father having to be capable of providing for his family, as well as his unwillingness to have that ability challenged, reaffirms the male breadwinner model. The Center’s proposal also in a sense reconfirms the presumption that men cannot or should not act as primary caregivers, assuming that men are primarily involved in economic activities.

Lejla is an unemployed mother of three (the youngest one has diabetes) and caretaker of a husband who is in a coma. He is at home, where she nurtures him in a room fully furnished with medical equipment and necessities. Given that any absence from home may have a devastating effect on her husband, searching for a job is not an option for her.

She has a resolved housing status and identifies herself as someone that used to belong to a higher class, as her husband was a professor and famous construction engineer before falling into a coma. However, due to many additional expenses related to his illness, she was forced to start selling their house’s inventory and exchanging belongings for more useful items. In addition to this, to cope, she relies on assistance from family, friends, and the community, humanitarian actions/donations. To emotionally cope with loneliness and stress, she does gardening and decorating, and is in the process of writing a book on caring for a person in a coma.

Lejla is the head of the family and takes care of the household and the needs of all her family members. Yet her husband’s coma has forced her to subordinate everything to his needs, including the needs of children. She is particularly worried about this in terms of how her lack of attention to their children may affect their quality of life. Indeed, she can only afford the most basic things for them, and her children have had to give up all additional extra-curricular activities as they have become a luxury.

However, aside from everyday worries about fulfilling her children’s needs, Lejla’s biggest concern is what will happen with her husband after she reaches an age when she won’t have the bodily strength to take care of him, which is additionally emphasized by the fact that she does not feel protected by the state:

Bacteria will kill him one day, maybe when I give up, when I won’t be able to take care of him. I am not getting younger, and there is less and less time for free activities. To tell you the truth, it’s happened more than once that I fell asleep while eating. Not sure if you can understand, but there are so many sleepless nights, and even when I manage to get some sleep, it is not good and relaxed, not in pajamas or in bed. For four years now I am sleeping with one eye open, and it is normal to expect to have a nervous breakdown first if you don’t sleep.

For this cluster of interviewees, the intersection between body and gender figures prominently as a source of inequality. Moreover, the perceived failure of the State to provide support beyond social benefits or to support the caregivers of those who are ill leads to a difficult and precarious situation. There appears to be no recognition of the inability of such primary caregivers to seek fulltime employment, which is additionally burdened by gendered assumptions of roles of care and provision for the family.

3.4. Securing medical treatment

The primary concern over health issues is what preoccupies members of the fourth group, who are using multiple coping strategies in order to gain access to necessary treatment or assistance. The body is thus a primary source of inequality for all of interviewees in this group, and the intersectional knot between body and class is the most common, given that the amount of benefits persons in this group receive are insufficient to cover basic medical treatment expenses, including access to medical institutions. Their inability to work, especially manual jobs, a generally low level of educational attainment, and an unresolved housing status (no permanent residence, ownership issues, and inadequate accommodation) additionally burdens their already difficult living conditions.

Even though all of the interviewees have severe health issues and face similar problems, Dragana's example is highlighted as particularly complex. Dragana is, in her words, "confined to her bed" due to Parkinson's disease and completely depends on her mother, who takes care both of her and her father, who is also ill with Parkinson's disease. The progression of the disease has left her without a job, so the only source of income she has is social assistance, which cannot cover even the most basic medications. The only viable option she perceives is to obtain a right to a pension, but as her treatment has been assessed as not completed, she has not been able to exercise this right. To overcome this obstacle, she would have to pay for twelve different medical reports that she cannot afford, while her limited mobility would mean that she would have to find someone to get her to the hospital so she could submit her reports in order to renew the pension request. Dragana doesn't have a well-developed family network, and says that after she got ill, her relatives, friends, and neighbors began avoiding her family:

We are a small family, and those family members living here, they avoid me. When they see me, they start saying "we don't have any money," as if I was asking for it. If you don't feel the need to help me as a member of my family, then it is not up to me to ask you for help, is it? ... While I was working in the firm, I had a lot of friends and colleagues. Now that I'm ill, there is nobody around.

This reference to a family network as a mechanism of support, which is in this case not there, appears to be in line with the conservative nature of the welfare system in BiH, where social support in many aspects – including care for the sick – depends on familial networks rather than being the responsibility of the State.

People within this group face difficult interactions with State structures, as administrative hurdles and a lack of public resources prevent them from receiving proper assistance and care. In the case of Dragana, she resorted to asking for help from different institutions such as the center for social work, the Ministry of Health and Social Protection in the RS, and even from the entity's President. However, aside from a one-time financial assistance grant in the amount of 500 KM, adequate assistance is lacking, even when asking for institutional accommodation:

When I called Banja Luka, they told me “they [the social services] have to put you in accommodation because there is no one to take care of you.” But here [in East Sarajevo] they said: “we don’t have that kind of accommodation and we cannot help you.” So, when I heard that there is an institution in Višegrad, I decided to send them a request, to which the director of the institution responded that I do not fit in their institution because it is for those with intellectual disabilities.

Gender paired with disability also figures prominently for some members of this group. Kenan is a divorced father of two, unable to work due to his illness. Social assistance is important to him only because of health insurance, and as it allows him to buy food, medicine, and cigarettes. He has no permanent residence and moves almost every month; he is currently living with his sister. In order to cope with the existing situation, he deprives himself of the food he is supposed to eat due to his condition and instead eats whatever he has. He cannot borrow any money because he knows that he won't be able to return it the next month given that he has to buy medicines on a regular basis. Sometimes he gets help from friends and family, but as he claims, it is always because they have a vested interest in helping him. The notion that everything revolves around money and that people will accept someone only if they have money or if there is an interest in helping them, even when they are family, is deeply embedded in his understanding of relationships between people. He also believes that being unable to fulfill his “traditional male role” of breadwinner and provider was the reason of separation from his wife and children:

Simply, I couldn’t work at all, then those social issues which, you know, you know what it’s like when you have a family, two kids, they cannot live on air, there were some complications, divorce, problems, and that’s it.

However, he still felt the need to take care of them and could not watch them “suffer as tenants” – so he gave them the accommodation, which was given to him by the Center for Social Work. This has left him without a resolved housing situation.

The interviewees in this group, due to a lack of adequate medical care from the state, were forced to focus all of their energies on securing treatment, medications, and other forms of assistance. They were thus in many ways curtailed from seeking fulltime employment, and also found themselves lacking the ability to care for themselves in a sustainable way.

3.5. Dependence on social assistance

The basic needs of the interviewees from this group are related to overcoming various barriers that stand before them as persons with disabilities and/or having a member of the family with a disability. The obstacles they face in their personal and family lives have grown to the extent that individuals within this group are completely reliant on social assistance, and see no possibility for improvement due to the degree of disability and their incapacity to work. What is particularly pressing for this group is that they have no family and friends they can rely on. The only thing they can count on is the benefit they receive in relation to their status, which must be distributed across a broad range of needs (such as medications, food, bills).

Unlike many persons in the other groups, all the interviewees in this group have resolved their housing situation. However, living on social assistance becomes challenging in terms of setting aside money for utilities and other needs. Željka, for example, is an elderly woman with poor health conditions who lives alone. Due to her electricity debts in the amount of 200 KM, her main worry is whether or not she will be able to collect enough money to pay the bills. Given that social assistance is her only source of income (122 KM a month), more than 80 percent of the benefit she receives is spent on bills, leaving her with very little to live a decent life:

I have to pay for the electricity, I have to. If the case was that I have to pay the rent as well, I would tie a rope around my neck and end my misery. ...There is no one I can ask for help, they just come and shut down the electricity, leave me without power, and then I have to go to them and beg to turn it on. And it goes in circles. [crying]... You are obliged to pay or they come and shut it off immediately. Then I get worried, go to the reception [of the electricity company], cry and beg them to turn the electricity back on.

Body, again, plays an important role in this group as a source of inequality, and is additionally accentuated by poverty. In the case of Željka, although she is in a poor health condition, she deprives herself of medications to pay for bills. Often, she uses only those medications she gets for free, and is therefore often ill and hospitalized.

Class, or a poor socio-economic situation intersected with body has also shaped the experience of Janica, an elderly woman with a disability, a mother of a son with a disability that she takes care of. Not living in the capital or close to a place where social services and other relevant institutions are situated, and not having the money to travel to the capital, Janica was not able to complain against an administrative decision on the degree of disability established for her, which has determined the amount of assistance that was awarded to her. She believes that a complaint would have got her higher funds in assistance. Nowadays, she manages to cope by exclusively relying on social assistance that her son receives and a minimal pension that she is entitled to. However, this income coupled with all of her savings is still not enough for them to cover even their basic needs. When in need, they have no one to turn to, given that their ties to the family and the community are broken. Here again, the family as a safety net in the absence of adequate State assistance is highlighted.

The interviewees in this group had no capacity to work, but also lacked any form of support from friends, family, or the community at large, which led to their total dependence on the social assistance system. This was aggravated further by disabilities and poor health conditions which were barely managed due to an inability to access proper healthcare. This group did not have any viable coping strategies as they constantly worried about securing the most basic needs for themselves and dependents.

3.6. Expecting the State to “pay the debt”

According to this group of interviewees, the State has to make efforts to help them overcome poverty due to their involvement in defending the country during the war, or because of their status as persons with war-related disabilities. They perceive that taking care of themselves is not their primary duty, considering what they did for the country during the war.

As for the category of class, most of our interviewees in this group have completed elementary schooling and are unemployed, waiting for the state to resolve their status. Adnan is the youngest and the one with the highest educational attainment in this group. He is also the only one who did not participate in the last war, but believes that the State should take care of him because he was orphaned at a very young age and therefore did not have the same opportunities as other citizens. He has no other earnings or income, and the only assistance he receives is due to his disability. He finished high school and strongly believes that his lack of higher education influences the coping strategies he is able to employ:

Unfortunately, I only finished high school because I didn't have the conditions to engage in further education. I would love to, I am yearning for it, if only we had greater amounts for social assistance, then maybe I could progress and have a goal in my life, finish university, because education is very important in our country, where there are many illiterate people... I did not have the opportunity to, let's say, upgrade and further educate myself and have a degree and find a job that suits me - not physical work because of my health status - so I wouldn't have to receive assistance.

On a daily basis, Adnan wrestles with the belief that young men should not receive social assistance because they are able to work, which points to a commonly held notion that men, especially ones who are not in old age, ought to be independent. He believes that having a better education would make it easier for him to find a non-manual job – and thus is caught being unable to afford post-secondary education, but unable to do the manual labor which is available for those with lower education due to his disability.

The notion that the education is out of reach for people in poor socioeconomic positions is also visible in the case of Mirza. He is an unemployed father, a non-recipient of assistance, who joined the war as a minor and who feels he gets no support from the state he fought for. He is aware of the fact that primary schooling is mandatory, but due to his inability to pay for school supplies, will have to withdraw his son from school:

Nobody in the institutions is good, from the mayor to the rest of them. I asked the mayor for help, said that my child needs school supplies and that as far as I'm concerned I will withdraw him from school, and he replied that I will get penalized for that. Great! The state should help me as a soldier to take care of my child and his education! ...My child went to school in sneakers, in the snow! Not anymore! Go ahead, penalize me!

Even though most of the interviewees in this group are individuals with disabilities, each of them referred to a perceived hierarchy of disability based on who is assumed to get more state benefits. Mirza, for instance, has five neuro-psychiatric diagnoses for mental illness and believes that individuals with physical disabilities are better positioned compared to ones with psychosocial disabilities. His inability to afford necessary healthcare is a common issue with other interviewees as well.

Visible disability also proved to cause prejudice and unequal treatment. Mehmed, a war veteran who was tortured in a camp and now suffers from PTSD and cancer, feels that the State has failed to repay its debt to him. It comes as no surprise that his anger is directed towards State institutions, particularly after having negative interactions, for example, with the employees of the center for social work:

There is this one [official], she is the worst of them all when it comes to my condition. She is the worst! When she sees me entering the door, it is not contagious (cursing), this is not contagious, she gets so upset she opens the windows, so I just get out!

When asked if anyone enjoys a privileged position, Mehmed claims that Roma people do due to their minority status and at the expense of other citizens of the town he lives in:

Listen, when I see that half of the gypsy[sic] settlement has Mercedes cars and gold chains and rings which cost 500-600 KM, and they come to the center for social work, yell at employees and they get the assistance first! That is not fair! I am an honest man, and that is really difficult to come across today because only a beggar is an honest man, the others, Roma are thieves! That hurts!

In alignment with Mehmed's statement, Mirza also perceives people coming from rural parts of BiH during and after the war and settling in Sarajevo as the "other", and believes that they enjoy a better status than him, who was born in Sarajevo. This fact carries with it a certain symbolic status related to belonging to an urban (and thus higher) class:

Those are not people, because they are people who never lived in the city, and they simply do not know how this city functioned, that [before the war] everyone had everything. So, you could've made some money in Sarajevo before. Today, ones who came from the villages feel much better here. ...And that really hurts, because that guy from the rural area accepts to work for one salary in three months, and he can survive with it because he grew potatoes he can sell. I cannot plant potatoes in a pot! ...I have nothing! Even though I was born "on pavement", they will be the first ones to get the job, not us two are born here, in this city, who gave their youth and life for this city. Sometimes I wish I was on the other side, with Serbs, maybe it would be better for me!

For Ibrahim, an unemployed war soldier living in poverty, the fact that he did not manage to exercise the right to social assistance is something related to ethnicity as a source of inequality, even though he firmly believes he has the right to assistance due to his involvement in the war and his poor health condition:

Wherever I go to ask for help, I get rejected. Something must be wrong, either my name or the color of my skin.

This interviewee was, nonetheless, not explicit in identifying himself as belonging to a particular ethnic group.

Given that all of our interviewees in this group, aside from Adnan, participated in the war and share the opinion that the country has neglected them, their desirable coping strategy is leaving the country because they believe that other countries could provide them with better living conditions, even as social assistance recipients.

3.7. Relying on support from the community

Individuals within this group completely rely on neighbors, family, and their community in order to overcome poverty and satisfy basic needs. What makes this group different from those expressing exclusive dependence on social assistance is the support they actually receive in the community. In other words, they rely on sources of social capital to cope with everyday challenges.

Most of the interviewees in this group are elderly persons, and nearing old age, most of them face various health problems that prevent them from searching for sources of income other than social assistance. Women are predominant in this group, which comes as no surprise given that elderly, poorly educated women have the greatest likelihood of being exposed to poverty. Their disability, age, class (having an extremely low monthly income), and gender all intersect as sources of inequality.

Fikreta is an elderly woman with a disability living alone in extreme poverty. She lives in a completely ruined house without water and electricity, only one room is barely adapted for living; a neighbor lets her use his electricity and water from his well. Like many other women in this group, she is grateful for having social assistance, as it is “better to have something over nothing.” However, given the insufficient amount she receives, and given that her family ties are broken, the only way to cope with the existing situation is to rely on help from her neighbors:

When I really don't have anything to eat, neighbors help me, they give me as much as they can, just so that I can survive. Often, when I am searching to find anything to eat on the lawn in front of the house and my neighbor sees me doing that, he starts cursing and yelling why I hadn't asked for help. I was ashamed. ... The neighborhood knows me, so when they have something, they bring me some onions, potatoes and such, but I am grateful even if they give me a piece of bread.

Three female interviewees in this group expressed a strong identity as workers, and had been working long enough to receive a pension. However, since social insurance contributions have not been paid on regular basis, they were not able to earn their pension, but have gained a right to a “compensation” in the form of permanent social assistance. Those who worked and did claim their rights to pension are mainly those with a secondary school education.

Safet, an elderly man with a disability and the only male in the group, says that he used to live a much better life while owning a small restaurant before the war. After the war, he tried to restart the business as well as to engage himself in some other type of employment, but his health had deteriorated and prevented him from doing so. A strong working identity and the belief that one is only worth something if capable to work still defines his view of the situation he is in: he is devastated by the fact that he is a social assistance beneficiary and cannot bear the fact that he is not able to work. When comparing his situation to others, he believes that those living in Sarajevo are in a better position and receive larger amounts of benefits, and particularly those who are former soldiers. Also, he claims that Croats in his town are entitled to greater rights and can gain more occasional assistance and bigger amount of benefits than the Bosniaks, an ethnic group he declared himself as belonging to. He claims that this is due to the director of the center for social work being a Croat; Safet, therefore, views his ethnicity as a direct source of inequality.

The link between working and a greater sense of self and independence was seen in both men and women, but the daily survival faced by women in this group has resulted in a negation of the reigning expectations of women's roles in a patriarchal setting. For example, Jelka is an elderly woman receiving social assistance that is insufficient for her to make ends meet, and therefore mostly relies on help from the community. To add to an already complex situation, she has to hide her income from an alcoholic husband. She stated that she was glad she did not conform to the gender role of bearing children as that would have worsened her situation.

The influence of patriarchal social norms is clearly visible in the case of Zumra, who at a younger age fully believed that a woman's place was at home. However, she later developed a strong working identity, and as she states, even neglected her daughter in the process, which she regrets today. A similar set of norms is seen in Safet, who claims that his wife left him and took the children because he was not able to financially support them, thereby 'failing' in his role as the masculine provider for the household.

This group, consisting mostly of former workers who no longer have any capacity to work, is completely dependent on social assistance for securing basic needs. What sets them apart from other groups is the fact that they have support from their community and family members in achieving a decent standard of living, perhaps suggesting a greater acceptance of the needs of this group compared to the previous one.

3.8. Living a normal life

The two individuals placed in this group believe that there is no need to change anything regarding their status and that social assistance allows them to live 'normally' and gives them enough independence not to be reliant on

other people. Even though both of them declared that the amounts of benefits they receive are small, in addition to certain part-time job engagements and agricultural activities, that amount is enough for them to function “normally” and fully integrate themselves in the community. In their understanding, leading a normal life means living like any other member of the society who is not a social assistance recipient and that their income satisfies their needs.

Regardless of their physical disabilities, they are both energetic and are fully engaged in their daily activities, be it their home or part-time engagements that provide them with additional sources of income. As Nusret, a Roma person with a disability, father of two children, states, “even though I am like this, an ‘invalid,’ I am not afraid of work, I love to earn money with my own hands rather than to beg because that would exceed all the limits.” Social assistance helps Nusret pay his bills and allows him to have no debts to other people, which lends him an independence he clearly values.

In comparison to many individuals in other groups who had small children, these interviewees have fully grown-up children, which might be another factor that makes a difference in terms of the position they find themselves in – their financial needs are much less than families with small children. Živka, a divorced woman with two older children, felt that assistance (disability benefits, in addition to a pension) helped her to be independent and not bother her children for money.

In terms of improving their situation, this group believes that they are already doing everything they can in regards to the scope of possibilities they have in their pursuit of a normal life. Živka lives in a rural area and produces her own food by stockbreeding, growing vegetables and picking wild berries, and borrows from others if she must. It appears that social assistance offers her the ability to be self-reliant, which runs counter to the preconception that recipients of social assistance are passive or overly dependent on others. Nonetheless, since Živka lives in a rural area, having her own car would help her perform her daily activities, but she cannot afford it.

In conclusion, social assistance provided this group with just enough means to be independent, since they saw that their possibilities of employment were limited. Instead, they relied on themselves and non-economic activities such as growing food in order to secure their basic needs. In this, they were aided by the fact that they had no dependents and, as such, no caregiving activities, as well as being in relatively good health.

4.

Symbolic level

A predominant reference to symbolic representation emerging from the interviews on how social assistance recipients believe and feel they are represented within social structures is that they are excluded from the community, followed by beliefs that they are exposed to unjust treatment, degraded, and considered to be 'parasites'. Fatima, who we discussed above, referred to herself as 'one of the social problems.' Such representations were further examined by looking into media articles and through focus group discussions with representative of the 'general population' who do not and have not received social assistance.

Contrary to some interviewees' perceptions that they are considered to be 'parasites', participants in the focus group discussions did not express any negative opinions of social assistance recipients. In fact, they expressed opinions that it has become "normal" to be dependent on social assistance due to the bad management of the State by political elites, hinting that the gap between the general population and those benefitting from social assistance funds was perceived as quite small. On the one hand, this suggested a feeling of solidarity with social welfare recipients due to the overall dire economic situation in the country. On the other hand, however, this perception may point to a lack of understanding of the extreme levels of poverty among beneficiaries. Discussions mostly revolved around structural issues that participants of focus groups recognized as obstacles to social assistance recipients. Indeed, a commonly expressed belief in the focus groups was that all citizens will likely be in need of social assistance very soon, given the poor socioeconomic situation in BiH.

The focus group discussants believed that receiving social assistance is the hardest for the recipients themselves, because of their status (e.g. disability or other reasons they receive assistance) and their exclusion from society. An example that was shared was that individuals with disabilities are perceived to be more comfortable when in the company of others "with the same status" because society has not recognized or adjusted to consider their needs. Some of the focus group participants pointed out that such differences are particularly noticeable with the younger population, where children hide that they are poor and that their parents are receiving social assistance to avoid being mocked by other children. There was a sense that Roma children and poor children are viewed pejoratively even compared to children placed in children's homes.

Social assistance beneficiaries were perceived being primarily self-reliant, having to demand their rights and fight for a position in society. Moreover, a

dominant opinion was that the general public is in general not interested in such issues and that it is getting harder to help others in need because of the increasingly poor financial status of the wider population. Interestingly, focus group participants stressed that it is more likely that ones who don't have much will help those in need rather than ones who have more than enough. This corroborates the perception of solidarity among those that are in a similar socio-economic position, as well as the belief that the majority of citizens are not well-off.

However, there is a perception of differentiation among recipients within the same category of users, as some are seen to be able to get a lot more from their status than others within the same category. Several participants stressed that, for example, Roma people enjoy a special status because they belong to a minority group and that war veterans with disabilities enjoy greater benefits than other individuals with disabilities or others who receive social assistance – which coincides with the statements of social assistance recipients interviewed who compared their own status to others. In other words, ethnicity is in this situation presented as being beneficial as the Roma are thought to receive assistance due to their institutionally privileged position as a recognized national minority in the country. Class and socioeconomic differences also was taken into consideration in the case of persons seen to be earning political privileges codified in law due to their role in the war.

Participants' opinions on whether or not beneficiaries of social assistance are doing everything in their power to get off of assistance differ. Some believe that users are trying to maintain the status of social assistance and would even reject a job offer if the salary is not as they expect it should be. Others, on the other hand, believe that users are looking for different sources of funding for minimum subsistence. However, all believe social assistance should be terminated in the case of individuals who can work but refuse to accept a job if offered.

Widespread opinion among focus groups participants is that the State should be responsible for social assistance recipients and that it has enough money for social assistance, but that the existing resources are not allocated properly. This was followed by the assumption that public money is spent within the system without even reaching social assistance recipients. Participants consider the amount that social assistance recipients receive “degrading” and “below human dignity,” as they can barely cover basic supplies, let alone an entire consumer basket. Criteria for receiving social assistance were seen as very strict, as the dominant opinion was that someone must be in a rather “miserable position” to be receiving assistance. At the same time, there was a sense that many of those who are in need do not even try to exercise this right due to the complicated and costly procedures that are in place to receive assistance. In the opinion of the focus group, all socially disadvantaged persons should benefit from social protection, and there should therefore be no discrimination between types of users/categories.

However, participants were of the opinion that persons with disabilities and illness, the elderly, and children with special needs should be priority recipients.

The elderly in particular were perceived as especially vulnerable because other users were seen as being abler to find additional sources of funding to meet their needs. This resounded with the beliefs of some of our younger interviewees, such as Adnan, who felt that they were judged by society because of the belief that young people ought to work.

The main culprit for the poor position of social assistance recipients was, in the view of focus groups participants, “the State”. Most appeared to agree that the State is insensitive when it comes to welfare recipients and that nobody in the State structures wants to take responsibility for the failures of the social protection system. An especially emphasized problem was a perceived unwillingness of employees in public institutions to inform persons in need about the rights they are entitled to, and that as a result, recipients do not take full advantage of the social system. This is further coupled with complicated administrative procedures and perceived fraud, which participants consider common and bidirectional, meaning that the absence of coordination and oversight within the system leaves room for both employees of different public institutions and recipients to abuse it in order to obtain social assistance. Such practice is seen to prevent those who really need social assistance from obtaining it.

The narrative of recipients’ needs and entitlement to rights on the one hand, and the unwillingness of the State to fulfill its social role on the other, is further confirmed in analyzed media articles in BiH. In general, when writing on social assistance and its recipients, the media writes about the issue being generally ignored by BiH authorities. As stated in the article titled “Will the State help its citizens?”,²⁵

... the basic task the State has is to protect the minimum income of the citizen, which refers to nutrition, health, housing and education, and this is considered to be one’s political right and not charity.

The author compares BiH to other ex-Yugoslav countries (e.g. Croatia or Macedonia), concluding that the State has failed to protect its most socially disadvantaged citizens. Moreover, governing structures are represented as uninterested in improving the status of social assistance recipients.

On the other hand, the media report a general attitude that the State has no money and that any further steps towards the reform of the social protection system would have to include a thorough audit of existing lists of users and certain amendments to the law in order to redistribute funds. This is, for example, mentioned in an article published by the daily *Oslobođenje*,²⁶ which

²⁵ Eldar Dizdarević, “Will the state help citizens? [Hoće li država pomoći i građanima?],” *Oslobođenje*, December 2, 2014, p. 11.

²⁶ Jasmina Mališević, “Care and assistance by another person for those over 65 is eliminated [Ukida se dodatak za tuđu njegu i pomoć starijima od 65 godina],” *Oslobođenje*, May 4, 2014, p. 15.

reports that custodial care and assistance for people over 65 years of age was terminated due to amendments to the relevant cantonal law on social protection (Sarajevo Canton).²⁷ The amount, it was explained, would be reallocated to other categories of social assistance recipients, suggesting that there was a lack of State financial capabilities to support both types of assistance. This narrative of fiscal consolidation is in contradiction with the focus group participants' perception that there is sufficient public money, but that it is being spent on State institutions, rather than on those needing assistance.

An example of the State's representation of social assistance recipients, as conveyed in one article, points to a different narrative. What can be concluded from statements given by a cantonal minister of social affairs²⁸ is that the government is directing its efforts to minimize possibilities for fraud in social assistance – mainly by reducing the amounts of assistance that the State gives out. The minister stated that such fraud is quite frequent. This reinforces a representation of social assistance recipients as 'parasites' seeking ways to exploit the State and thus diverts the focus from questioning the functionality of the system *per se*.

As stated in several articles,²⁹ social assistance recipients deal with unjust treatment due to disability, other personal characteristic or status, or place of residence. Many articles mentioned that certain legal provisions were not implemented or were implemented only partially in certain cantons. The Sarajevo Canton is considered to offer the best treatment and services, which ultimately points to unequal treatment based on place of residence and urban vs. rural living situations.³⁰ For example, as pointed out in an article titled "Child benefits keep decreasing as we become an elderly country,"³¹ not all cantons have regulated the area of protection of families with children equally, meaning that families in some cantons cannot receive child benefits.

²⁷ The reason lies in the decision of the Constitutional Court of Bosnia and Herzegovina, due to failure to enforce the decision of the Constitutional Court.

²⁸ S. Huremović, "We achieved a miracle with the money we had [Postigli smo čudo sa novcem koji smo imali]," *Oslobođenje*, January 13, 2014, p.19; M. Bandić, "We do not owe the directorate 1.8 million KM [Nismo dužni direkciji 1,8 miliona KM]," *Oslobođenje*, January 28, 2014, p. 12.

²⁹ See: E. Duvnjak-Šalaka, "Child benefits keep decreasing as we become an elderly country [Naknade za djecu sve manje dok postajemo zemlja staraca]," *Dnevni avaz*, July 9, 2014, p. 10; S. Huremović, "We achieved a miracle with the money we had [Postigli smo čudo sa novcem koji smo imali]," *Oslobođenje*, January 13, 2012; V. Stevanović, "Tens of thousands of invalids could sue BiH? [Desetine hiljada invalida mogu tužiti BiH?]," *Dnevni avaz*, March 29, 2014, p. 7.

³⁰ See: S. Huremović, "We achieved a miracle with the money we had [Postigli smo čudo sa novcem koji smo imali]," *Oslobođenje*, January 13, 2014; E. Duvnjak-Šalaka, "Child benefits keep decreasing as we become an elderly country [Naknade za djecu sve manje dok postajemo zemlja staraca]," *Dnevni avaz*, July 9, 2014, p. 10.

³¹ E. Duvnjak-Šalaka, "Child benefits keep decreasing as we become an elderly country [Naknade za djecu sve manje dok postajemo zemlja staraca]," *Dnevni avaz*, July 9, 2014, p. 10.

In one article, the State is represented as not being sensitive to and cognizant of recipients' needs. Such negligence was seen to result in the exclusion of beneficiaries from social protection, particularly of persons with disabilities:

It's a hard life, and I think that the system frequently does not recognize the needs of people with disabilities. Many of them do not have basic living conditions, job, income, required conditions to be able to get out of the room or the house - that is, the right to move and have a decent life.³²

In addition, as is evident from Vasić's observation that "to exercise the right to (child) benefit, which is miserable anyway, you have to be extremely poor, literally,"³³ the amount which social assistance recipients receive is seen as degrading because it cannot cater for the basic necessities, which is the same perception voiced by focus group participants.

An interesting point brought up in the focus group was that of the declining population in BiH, though no overt link was drawn between this, child benefits, and gender. Symbolic representations of the child benefit issue in the media also failed to mention the significance of these allowances for women.³⁴ Yet if we apply a gendered lens, there is an evident attempt on the part of the State to reward and encourage child birth by providing higher cash benefits for the 2nd, 3rd, and 4th child – as in RS in 2014.³⁵ Media and focus group participants echo concerns about the ageing population and the fall in birth rates. While the subtext is that the State attempts to encourage more women to have more children in this way, it is ironic that the amounts are so low, as focus group participants pointed out. At the same time, questions of childcare and support for mothers in the workforce remain unaddressed, though obviously important for women making reproductive choices. Focus group participants mentioned women, especially pregnant women, as groups particularly in need of assistance, but the issue of care work was not raised. In general, the discourse surrounding gender in this case seems to be rather marginal, which points to a general lack of knowledge about the role of gender as a determining factor in poverty.

While considerable social stigma surrounding mental illness was reported by our interviewees (Damir's wife's illness had caused their friends and family to abandon them, while Fatima would hide her mental illness from employers in

³² V. Stevanović, "Tens of thousands of invalids could sue BiH? [Desetine hiljada invalida mogu tužiti BiH?]," *Dnevni avaz*, March 29, 2014, p. 7.

³³ B. Vasić, "Child benefits for more youngsters [Dječiji dodatak za više mališana]," *Nezavisne novine*, November 24, 2014.

³⁴ E. Duvnjak-Šalaka, "Child benefits keep decreasing as we become an elderly country [Naknade za djecu sve manje dok postajemo zemlja staraca]," *Dnevni avaz*, July 9, 2014, p. 10.

³⁵ B. Vasić, "Child benefits for more youngsters [Dječiji dodatak za više mališana]," *Nezavisne novine*, November 24, 2014.

fear of being fired), such stigma was not outwardly referred to by focus groups or the media.

Perhaps surprisingly, the general symbolic representation of those who receive social assistance was unlike that of ‘parasites’ on the State, but rather as people who legitimately require aid and for whom life is difficult. The sense that the State does not adequately distribute its resources, as well as the generally poor socioeconomic situation enforces the feeling of commonality between the general population and beneficiaries. As one focus group discussant pointed out, they too attended the focus group in order to receive a bit of remuneration:

We also came here, even with the income we have, to get this ‘coupon’ for participation [in focus groups]. That’s what our country is like! People have to manage, have to cope! Now I am not talking about those of us, who are not beneficiaries of social welfare, but as for them, they will do everything to make ends meet! Literally they cope and that’s it.

It is likely that the idea that the State should provide a universal good for its citizens, leftover from the rather generous social welfare system in the former Yugoslavia, which was “built upon the principles of solidarity and equality”³⁶ is to thank for the charitable attitude of the general population towards social assistance beneficiaries. There is also a reigning sense that beneficiaries are far from passive dependents; rather, they are seen as industrious and willing to ‘do everything to make ends meet’. Thus the idea that the State must help its most disadvantaged citizens is easily coupled with the more neoliberal sense that individuals must ‘manage on their own’ – these two values, which tend to sometimes clash, appear to exist in harmony. The notion that the social assistance system is rife with fraudsters is one put forward only by State officials themselves, which seems not to resonate with the general public.

To summarize, for the categories of inequalities perceived on a symbolic level, the representation of social assistance recipients is most associated with class and the body, which is supported by the notions that those who face the worst living conditions, the elderly, and individuals with disabilities are the ones who should exercise the right to social assistance. Gender was not directly present in the symbolic representation of social assistance, as can be discerned from the sample of relevant newspaper articles.

³⁶ Marija Stambolieva, introduction to *Welfare States in Transition: 20 Years after the Yugoslav Welfare Model*, eds. Marija Stambolieva and Stefan Dehnert (Sofia, Bulgaria: Friedrich Ebert Foundation, 2011), p. 12.

5.

Structural level

Our analysis of the structural level was aimed at considering whether and how official policies and institutions recognize and address sources of inequality, the related self-identified needs, and the strategies for the everyday coping of persons that are, or ought to be, users of the social protection system. In order to answer such questions and gain a deeper insight, issues raised by persons interviewed at the structural level were further analyzed by looking at relevant laws and policies. General issues raised by interviewees regarding the structural level can be clustered around several themes/issues and paired with specific group clusters.

5.1. Differences in social welfare provision within the country

The most common opinion shared among our interviewees, but also outlined at the symbolic level, is that the system itself is unjust. Several issues were raised as part of this perception, such as that social assistance criteria are not well-defined, that the system is incapable of addressing the current socio-economic situation and that it opens up significant space for fraud and mismanagement of resources. In line with the notion that the system is unjust is the claim that it does not cater to different categories of recipients of social assistance. Another common criticism of the system is that social assistance funding is insufficient, that transfers are made late, and that there is a constant reduction of the amounts.

The basic principles of this type of assistance are established differently between entities in terms of criteria and amounts, and are further complicated within FBiH. According to relevant legislation, the amount of permanent social assistance varies from 10% to 20% of the net average salary in FBiH depending on cantonal regulations and is determined according to the number of family members and their monthly income.³⁷ Even though this obligation is stipulated by the Framework Law on Social Protection in FBiH, some cantons do not even provide such assistance on the grounds of a lack of resources. As

³⁷ William Bartlett, "Gap Analysis in the Area of Social Protection and Inclusion Policies in Bosnia and Herzegovina [Analiza nedostataka u oblasti politika socijalne zaštite i inkluzije u BiH]" (Sarajevo: UNICEF, November 2013).

such, these amounts do not serve the purpose of helping people in poverty or at risk of poverty to move above the poverty line. Rather, such low amounts still leave the individuals concerned well below the poverty level. If one takes into consideration that most of our interviewees receive permanent social assistance that amounts to c. 120 KM³⁸, and when compared to basic necessities they must meet, such criticism is fair. Thus the amount they have at their disposal for every month is just a third of the amount of the defined monthly consumer basket in BiH (c. 800 KM).³⁹

In Republika Srpska, social assistance includes permanent cash benefits and health insurance for the recipient and his/her family members. The amount is calculated in relation to the average pay in the entity in the previous year, and stands at 15% of pay for a single-member family (i.e. 163 KM per month), 20% for a family with two members, 24% for a family with three members, 27% for a family with four members, and 30% for family with five or more members. In Brčko District, permanent social assistance is set in the amount of 21% of the average monthly salary (c. 170 KM).⁴⁰ According to a UNICEF report by Custom Concept,⁴¹ users receiving permanent social assistance in Brčko District can also access a wide range of other types of assistance, besides financial ones, such as health insurance provided by the social work center, free daycare for preschool children, coverage of travel expenses and medical treatments. Generally, social assistance recipients in BiH are rarely able to exercise other rights and services envisaged by the laws, due to the fragmentation of responsibilities among entities, cantons, and municipalities, and the lack of budget funds. This results in different criteria being applied, widely varying amounts of assistance, and residence-based inequalities within the same category of users.

A 2009 World Bank analysis showed that the inadequate targeting of marginalized citizens and the presence of discrimination in the social security system based on status rather than needs resulted in a system that is “fiscally unsustainable, economically inefficient and socially unfair.”⁴² The privileging of

³⁸ Maastricht University Graduate School of Governance *and* IBHI, “Non-contributory Cash Benefits for Social Protection in BiH: What Works and What Does Not (I) [Budžetske novčane naknade za socijalnu zaštitu u BiH: Šta funkcioniše, a šta ne]” (Sarajevo: June 2013), p. 34.

³⁹ “The average salary in BiH grew by 321 KM in the past ten years, the consumer basket by 466 KM [Prosječna plaća u BiH za 10 godina povećana za 321, a potrošačka korpa za 466 KM],” *Klix.ba*, November 30, 2014.

⁴⁰ Law on Social Protection of Brčko District [Zakon o socijalnoj zaštiti Brčko Distrikta], *Official Gazette of Brčko District* 1/00, Article 39.

⁴¹ Custom Concept, “Analysis of Social Welfare and Health Needs of Families and Children in the Federation of Bosnia and Herzegovina and Brčko District [Finalni izvještaj: Analiza potreba djece i porodica iz oblasti socijalne zaštite i zdravlja u Federaciji Bosne i Hercegovine i Brčko distriktu]” (Sarajevo: UNICEF, November 2013), p. 20.

⁴² World Bank, “Social Transfers in Bosnia and Herzegovina: Moving Towards a More Sustainable and Better Targeted Safety Net [Socijalna davanja u BiH: Kreiranje održivog sistema socijalne zaštite zasnovanog na stvarnim potrebama]” (Sarajevo: April 30, 2009), p. 6.

war-related beneficiaries who receive social assistance based on status rather than demonstrated need has made significantly less money available for means-based benefits such as non-war disabilities, child allowances and permanent financial assistance. As a result, non-war related social assistance recipients are inadequately covered by these benefits. Other studies suggest that adequate protection is lacking for the most vulnerable users and that the allocation of available resources is disproportionate. For example, according to an analysis by the Initiative For Better and More Humane Inclusion (IBHI) and the University of Maastricht,⁴³ 54.3% of the total budget spent on social benefits in FBiH in 2011 was spent on war veterans' benefits, and the rest on all other categories of beneficiaries put together (e.g. families with children, persons with disabilities, etc.). As a 2012 OSCE report adds, the monthly income figure that makes one eligible for social assistance funding is so low that "a large number of persons who are just above such income levels are not receiving any support, though their incomes cannot be considered adequate."⁴⁴

5.2. Administrative hurdles and inappropriate treatment

Despite some individually good experiences with the social assistance system, most interviewees believed that social services are not user-friendly and supportive, a problem which was reconfirmed on the symbolic level. Focus group participants and several of our interviewees share the opinion that employees in relevant institutions and organizations (centers for social work, municipal administrations) are inconsiderate towards beneficiaries and offer very little or no information to potential users on what their rights are and how to exercise them.⁴⁵ The refusal by the soup kitchen employee to give Fatima a food package based on her "good looks" is a stark example of the arbitrariness of deciding whether or not someone will receive assistance based on power that individuals working in public services are able to amass due to a lack of accountability

⁴³ Maastricht University Graduate School of Governance and IBHI, "Fiscal Impact Analysis of the Working Drafts of the Law on the Foundations of Social Protection and the Law on Protection of Families with Children and the Implementation of a Proxy Means Test: Federation of Bosnia and Herzegovina [Analiza fiskalnih efekata radnih nacrtu Zakona o osnovama socijalne zaštite i Zakona o zaštiti porodice s djecom i implementacije indirektnog imovinskog cenzusa: Federacija Bosne i Hercegovine]" (Sarajevo: 2014), p. 7.

⁴⁴ OSCE, "The Right to Social Protection in Bosnia and Herzegovina: Concerns on Adequacy and Equality" (Sarajevo: 2012), p. 17.

⁴⁵ Federal Ministry of Labor and Social Policy [Ministarstvo rada i socijalne politike], "Strategy of Deinstitutionalization and Transformation of Social Protection Institutions in the Federation of Bosnia and Herzegovina (2014-2020) [Strategija deinstucionalizacije i transformacije ustanova socijalne zaštite u Federaciji Bosne i Hercegovine (2014-2020)]" (Sarajevo: 2013), p. 17.

mechanisms that could sanction such discriminatory behavior. That is, social assistance laws in BiH and each of the entities⁴⁶ envisage monetary fines in the case of misdeeds by institutions of social work, but it remains unclear to what extent they are enforced in practice.

Burdensome and costly administrative procedures, as well as a lack of physical access to the welfare administration in order to realize the right to social assistance are also seen as significant issues. This problem is additionally emphasized with those individuals living in rural areas and who thus have a minimal inflow of information, cannot afford to travel or have mobility issues, as well as those that cannot afford to pay for different tests of disability.⁴⁷ This is illustrated in the example of Ajša, who had to sue her own children in order to obtain social assistance, or Janica, who could not contest her level of social assistance because of her inability to get to the city to do so.

5.3. Different treatment of disability

The opinion that the system is unjust was mainly put forward by persons with disabilities who are familiar with their rights and the laws that influence and regulate their status. Thus, they pointed out that the State does not operate in line with good practices from other countries in terms of respecting their guaranteed rights and enabling them to exercise them in their full potential. In fact, even though BiH ratified the *United Nations Convention on the Rights of Persons with Disabilities* in 2010 and has developed strategies for the equalization of opportunities for persons with disabilities in both entities, official State reports point to significant challenges in meeting the international standards in this field.⁴⁸

Moreover, the most common criticism of the system regarding persons with disabilities, evident both on the individual and the symbolic level, is that individuals with war-related disabilities enjoy better rights and are entitled to a larger amount of benefits than ones with non-war related disabilities. Our

⁴⁶ The Federation's social protection law defines such fines in Article 98. The RS social protection law outlines accountability measures in Articles 142 and 145, while Brčko District's law defines fines in Article 106.

⁴⁷ See: Council of Ministers of Bosnia and Herzegovina, Directorate of Economic Planning, "Social Inclusion Strategy of Bosnia and Herzegovina [Strategija socijalnog uključivanja Bosne i Hercegovine]," June 2010.

⁴⁸ Ministry of Human Rights and Refugees of BiH [Ministarstvo za ljudska prava i izbjeglice BiH], "The initial report of Bosnia and Herzegovina on the implementation of the UN Convention on the Rights of Persons with Disabilities: under Article 35, paragraph 1 of the Convention on the Rights of Persons with Disabilities [Inicijalni izvještaj Bosne i Hercegovine o provođenju Konvencije Ujedinjenih nacija o pravima osoba sa invaliditetom: po članu 35., stavu 1. Konvencije o pravima osoba sa invaliditetom]," 2012, p. 15.

interviewees in the group “recognition of body capability,” who were persons with disabilities, believe that the State is not only not providing means to remove mobility obstacles, but has created a system of social protection with two parallel tracks for those with war-related and non-war related disabilities, despite the fact that they share the same needs.

Even a cursory look at legislation in this realm confirms that the abovementioned practice exists and is codified in legal provisions.⁴⁹ In FBiH, the only cash benefits and services that are not means-tested are those available both for persons with non-war related disabilities and civilians that have acquired disabilities during the war, but the conditions for such assistance are rather strict and marked by inequities. Thus, persons with non-war related disabilities can exercise the right to social assistance only if they are assessed as persons with over 90% of physical disability. The amount they may receive ranges from 219 KM to 396 KM per month, depending on the canton. In contrast, civilians that have acquired disabilities during the war must only meet the requirement of having a 60% physical disability and are entitled to more substantial cash benefits.⁵⁰ War veterans with a disability receive at least 725 KM, and up to 1845 KM if their disability is assessed to be 100%.⁵¹

5.4. Lack of long-term care services

In addition to disability benefits, persons in need of long-term care are entitled to the allowance for care and assistance by another person, but this is conditional. In Republika Srpska, only a person with a severe degree of disability is entitled to receive such an allowance, which amounts to 41 KM, but only if monthly income of a recipient is below 41 KM.⁵² In FBiH, cantonal governments determine the rates for care and assistance by another person, according to

⁴⁹ See more at: William Bartlett, “Gap Analysis in the Area of Social Protection and Inclusion Policies in Bosnia and Herzegovina [Analiza nedostataka u oblasti politika socijalne zaštite i inkluzije u BiH]” (Sarajevo: *UNICEF*, 2013); Maastricht University Graduate School of Governance and IBHI, “Fiscal Impact Analysis of the Working Drafts of the Law on the Foundations of Social Protection and the Law on Protection of Families with Children and the Implementation of a Proxy Means Test: Federation of Bosnia and Herzegovina [Analiza fiskalnih efekata radnih nacрта zakona o osnovama socijalne zaštite i zakona o zaštiti porodice s djecom i implementacije indirektnog imovinskog cenzusa: Federacija Bosne i Hercegovine]” (Sarajevo: 2014); OSCE, “The Right to Social Protection in Bosnia and Herzegovina: Concerns on Adequacy and Equality” (Sarajevo: 2012).

⁵⁰ Bartlett, William, “Gap Analysis in the Area of Social Protection and Inclusion Policies in Bosnia and Herzegovina [Analiza nedostataka u oblasti politika socijalne zaštite i inkluzije u BiH],” *UNICEF* (Sarajevo: 2013), p. 25.

⁵¹ OSCE, “The Right to Social Protection in Bosnia and Herzegovina: Concerns on Adequacy and Equality” (Sarajevo: 2012), p. 18.

⁵² *Ibid*, p. 13.

the relevant law.⁵³ Amounts depend on the extent of disability but are different for different categories: they range between 137.2 KM and 274.40 KM for persons with a non-war related disability depending on the type of disability,⁵⁴ between 253.7 and 507.5 KM for civilian victims of war and higher amounts for war veterans.⁵⁵ In the Brčko District, these amounts span between 60–121 KM depending on the disability for non-war related disabilities, and are higher (amounting up to 900 KM) for war-related disabilities and war veterans.

Interviewees whose everyday activities are aimed at meeting the needs of a person with a disability or ill spouse have expressed that they have no support from the State whatsoever, besides small amounts they receive on the basis of the spouses' disabilities that are only sufficient to cover their bills. Considering that all of their time and activities revolve around the dependent, they have little possibility for employment, and therefore they have to rely on social assistance, humanitarian donations, and help from nongovernmental organizations in order to meet their family's needs. Recognition of caring for a dependent is lacking on the structural level in terms of other services which might ease the situation they are in. A strategy for the transformation of social assistance in the Federation proposed by the Ministry of Labor and Social Policy notes the lack of good quality and diverse services of care available in the country. In particular, the strategy emphasizes the need to enhance services such as home care, assistance in the employment of people with disabilities, personal care assistance services for those with the gravest disabilities, aiding the independent living of those with intellectual difficulties, and other forms of services which would enable social assistance beneficiaries to better integrate into the community.⁵⁶ These proposed enhancements not only entail recognition of the care required within the home, but also aim to increase the possibilities for full practicing of the autonomy by the beneficiaries and the persons with disabilities.

⁵³ Law on Social Protection, Protection of Civilian War Victims and Families with Children in FBiH [Zakon o osnovama socijalne zaštite civilnih žrtava rata i zaštite obitelji sa djecom u FBiH], *Official Gazette FBiH* 36/99, 54/04, 42/06, 14/09, Articles 26 & 60.

⁵⁴ Maastricht University Graduate School of Governance and IBHI, "Non-contributory Cash Benefits for Social Protection in BiH: What Works and What Does Not (I) [Budžetske novčane naknade za socijalnu zaštitu u BiH: Šta funkcioniše, a šta ne]" (Sarajevo: June 2013), p. 43, 47, & 50.

⁵⁵ Ranges are not available, but an average is 640 KM per month.

⁵⁶ Federal Ministry of Labor and Social Policy [Ministarstvo rada i socijalne politike], "Strategy of Deinstitutionalization and Transformation of Social Protection Institutions in the Federation of Bosnia and Herzegovina (2014-2020) [Strategija deinstucionalizacije i transformacije ustanova socijalne zaštite u Federaciji Bosne i Hercegovine (2014-2020)]" (Sarajevo: November 2013).

5.5. Inadequate access to healthcare

Insufficient amounts and a lack of necessary social and health services are problems that those needing medical treatment also have to cope with. Interviewees from both entities have expressed that they face challenges when trying to obtain necessary medications or assistance in order to cope with their illness or disability. The assistance they receive can barely cover necessities and therefore they must use various coping strategies which mainly come down to saving money at the expense of their own health, which is already compromised by using only medications they can afford or that are free of charge. They find it absurd that the State has, as they say, decided to cover the cheapest medications while the expensive ones must be purchased by the recipient.

Many disadvantaged citizens indeed have no access to theoretically universal health care. Theoretically, FBiH law does ensure healthcare for social at risk groups such as children, women during pregnancy and maternity, the elderly over 65, the persons with disabilities, those with mental illnesses, returnees, displaced people, victims of domestic violence, materially insecure people and Roma people with no permanent home. However, it is up to the cantons themselves to set aside funds in their yearly budget and secure this right; in practice, the right is often not fully implemented.⁵⁷ Of the 15% of persons in FBiH and 28% in the RS that were excluded from the healthcare system in 2009, the majority are those in already vulnerable groups.⁵⁸ Moreover, due to differences in quality and scope of health care within different cantons in the Federation, in RS, and in the Brčko District, inequalities persist based on users' place of residence as well.⁵⁹ In FBiH, some cantonal governments have failed to implement relevant laws in this realm, and there is an inadequate sanctioning mechanism at the FBiH level to address this issue.⁶⁰ The Federation also has a set of administrative hurdles to accessing healthcare, since becoming unemployed, one has 30-90 days to register with the employment bureau or risk losing their right to health insurance. Many miss the deadline (about 43%), leaving them and their families with no access to medical care. One should note that RS does not impose such a deadline, and the unemployed are entitled to health care.⁶¹ Another obstacle

⁵⁷ Rights for All and Initiative and Civil Action, "Guide to Realizing Social Protection Rights [Vodič za ostvarivanje prava iz socijalne zaštite]" (Sarajevo: March 2011), p. 5-6.

⁵⁸ Rights for All and Initiative and Civil Action, "Why are We Not Equal in Rights to Social Protection? Analysis and Recommendations" (Sarajevo: November 2010), p. 8-10.

⁵⁹ Rights for All and Initiative and Civil Action, "Guide to Realizing Social Protection Rights [Vodič za ostvarivanje prava iz socijalne zaštite]" (Sarajevo: March 2011), p. 6.

⁶⁰ Rights for All and Initiative and Civil Action, "Why are We Not Equal in Rights to Social Protection? Analysis and Recommendations" (Sarajevo: November 2010), p.11.

⁶¹ Ibid.

is the fact that there is no systematic mechanism for informing citizens of their rights across institutions.⁶²

5.6. Problems with housing

Housing was identified as a substantial problem by many interviewees, such as Zijad and Raza. For others who were housed in state-provided accommodation, conditions were visibly bad. BiH lacks a legal or institutional framework for social housing policies, with piecemeal policies present at entity, cantonal, and municipal levels.⁶³ The majority of social housing policies are limited to Annex 6 of the Dayton Accords, providing returnees and displaced persons with reintegration funds and assistance⁶⁴ – 90% of social housing users were refugees and displaced persons in 2015.⁶⁵ Others address socially vulnerable groups and Roma populations, but tend to be on an *ad hoc* basis. Within the beneficiaries of social housing, almost 40% live under the poverty line,⁶⁶ suggesting that housing alone was not enough to alleviate extreme poverty. This was also stressed by some interviewees who, although had their housing issue resolved, struggled to get by.

5.7. Inadequate and unequal support for families with children

At the individual level, interviewees usually voiced the opinion that the State does not provide adequate support to families with children, something that was also reiterated at focus group discussions and in media articles. One problem is the fact that there are thirteen separate systems of social protection and that different laws and by-laws regulating the protection of families with children⁶⁷ in FBiH, the RS, and Brčko District have set different criteria and amounts of benefits for the socially disadvantaged, which means that the support that

⁶² Ibid, p. 31

⁶³ Hilfswerk Austria International, “Study: Analysis of Existing Social Housing Models with Recommendations for Integrated Model of Sustainable Social Housing System in Bosnia and Herzegovina [Analiza postojećih modela socijalnog stanovanja sa preporukama za integralni model samoodrživog sistema socijalnog stanovanja u Bosni i Hercegovini],” (Sarajevo: 2015), p. 50.

⁶⁴ Ibid, p. 60.

⁶⁵ Ibid, p. 54.

⁶⁶ Ibid, p. 43.

⁶⁷ For more, see the Law on Social Protection, Protection of Civilian War Victims and Families with Children in FBiH, the Law on Social Protection of Republika Srpska and the Law on Social protection of Brčko District.

families are entitled to varies depending on their place of residence. For example, while some cantons do not pay child benefits at all, for those that do pay them, amounts range between 12 and 33 KM a month. Benefits are means-tested on the basis of an income threshold set between 62 KM and 120 KM, depending on the canton.⁶⁸ There are further differences in terms of what type of assistance is provided between cantons (e.g. one-off benefits for newborns, counselling services for parents, etc.), depending on the laws and bylaws adopted.⁶⁹ As stated by all interviewees within the group of families with children, the child allowance they receive cannot cover the needs of a family. If one takes into consideration the low income threshold one must meet in order to exercise this right, it is clear that most of them are forced to find additional sources of funding and devise other coping strategies in order to meet basic needs.

A crucial aspect of this issue is childcare, as almost all interviewees who have children mentioned childcare as a primary obstacle to seeking fulltime employment, which mainly affected women as caretakers in the family. This is in line with the notion that the duty of care is one of the most pervasive causes of economic inequality between men and women, which feeds into continuing patterns of poverty that persist for women later in life.⁷⁰ In the RS, laws oblige social funds to cover part of the salaries of mothers of children with psychological or physical disabilities, which attempts to address these issues.⁷¹ Public day care institutions for children, also envisaged by law, can be difficult to access and are in short supply, particularly in rural areas. The Federation and RS both legally prescribe partial or full payment of preschools for socially at-risk families, however these are most often implemented by municipal governments that often lack the financial resources for this purpose.⁷²

⁶⁸ William Bartlett, "Gap Analysis in the Area of Social Protection and Inclusion Policies in Bosnia and Herzegovina [Analiza nedostataka u oblasti politika socijalne zaštite i inkluzije u BiH]" (Sarajevo: UNICEF, November 2013), p. 31.

⁶⁹ Mirna Jusić, "Protection of Families with Children in the Federation of BiH - Analysis of the Situation, Key Challenges, and Reform Priorities [Zaštita porodica sa djecom u Federaciji BiH – Analiza situacije, ključni izazovi i reformski prioriteti]" (Sarajevo: *Analitika Center for Social Research*, January 2015), unpublished internal report, cited with author's permission.

⁷⁰ See, e.g. OECD, *Unpaid Care Work: The missing link in the analysis of gender gaps in labor outcomes*, 2014; Fondazione G. Brodolini, "Background note: Gender equality in caring responsibilities over the lifecycle," (paper presented at Equality Between Women and Men Conference, European Commission of Justice, Brussels, September 19-20, 2011).

⁷¹ Maastricht University Graduate School of Governance and IBHI, "Non-contributory Cash Benefits for Social Protection in BiH: What Works and What Does Not (I) [Budžetske novčane naknade za socijalnu zaštitu: Šta funkcioniše, a šta ne (I)]" (Sarajevo: June 2013), p.75.

⁷² Mirna Jusić, "Protection of families with children in the Federation of BiH – Analysis of the situation, key challenges, and reform priorities [Zaštita porodica sa djecom u Federaciji BiH – Analiza situacije, ključni izazovi i reformski prioriteti]" (Sarajevo: *Analitika Center for Social Research*, January 2015), unpublished internal report, cited with author's permission.

5.8. Obstacles to employment

Persons interviewed frequently identified employment as an ideal, yet often unattainable strategy to overcome poverty. Given that the social assistance they receive is not enough to cover even their basic necessities, interviewees whose disability does not prevent them to do so work occasionally in order to make ends meet. However, aside from other obstacles to employment,⁷³ relevant laws in this field stipulate that one cannot exceed a given monthly income in order to receive assistance⁷⁴ - if income increases, even insignificantly, social assistance is discontinued. As Armin's example shows, being reliant on social assistance and an inherited pension prevents him from looking for stable employment. In practice, this creates disincentives for people to search for regular employment, and increases the chance that they will work informally and without any job security. Thus, working as a way to pull their family out of poverty and potentially cease to be dependent on social assistance in the long run is not an option. In the short term, seeking permanent employment remains simply too costly and risky for social assistance recipients who rely on it for basic needs. Most interviewees who are willing and capable to work have to work informally and accept underpaid manual jobs to provide for their families.

While demotivating hurdles remain in place, proper employment policies tailored towards social assistance recipients (and different sub-groups, such as women, minorities, the low-skilled, families with children) that would encourage persons to work and allow them to obtain an income greater than their social benefits through work and motivate them to accept more stable and secure employment relationships are partial or not in place at all.⁷⁵ In other countries, such strategies usually combine a set of different measures, such as in-work

⁷³ Other obstacles arising in relation to the categories of inequalities (class, body, gender and ethnicity) are additionally explained in Section 6, *Intersectionality across levels and categories*, to show how power relations present in the labor market shaped the experiences of our interviewees.

⁷⁴ The threshold for monthly income per family member in FBiH is determined by the cantonal legislation.

⁷⁵ See more at: Initiative and Civil Action *and* Rights for All, "Implementation of the European Social Charter through legislation and practice in BiH" (Sarajevo: 2009), p. 23; Initiative and Civil Action and Zemlja djece, "Report: Are Women in BiH Protected from Discrimination? We Have Laws, Mechanisms, but No Protection. Why? [Izveštaj: Da li su žene u BiH zaštićene od diskriminacije? Imamo zakone, mehanizme, ali ne i zaštitu. Zašto?]" (Sarajevo: 2014), p. 42.

benefits, active labor market policies, minimum wages, and access to free or subsidized care services.⁷⁶

5.9. Lack of access to education

Given the dominant opinion that people with a higher education can find jobs more easily, which is also reflected in unemployment statistics, our interviewees expressed hopes that their children would be able to complete higher levels of education, while others were willing to continue their own education. Yet this option is often unattainable given the lack of resources to pursue education.

According to relevant laws in BiH, only primary education is compulsory⁷⁷, while individuals decide on whether or not they would like to continue their secondary education. For persons receiving social assistance, such an option is often impossible given their socio-economic situation and the insufficient amount of assistance they receive. Although relevant legislation on secondary education stipulates that secondary education is free of charge, if persons have discontinued education, as is the case with Damir's daughter (who had to drop out from school in order to take care of the household) one would have to take an external examination and pay a certain fee that recipients may not be able to afford.

The case of Damir's daughter points to how easily one can be cut off from the schooling system at a very early age due to poverty, which also brings to fore the gendered dynamics involved in female children or adolescents forsaking their education in order to take on roles of care and housework. In later years, structures such as a lack of adequate childcare as well as patriarchal norms contribute to many women interrupting their continuing education or work histories, which lowers pensions and overall salaries.

⁷⁶ In-work benefits, usually in the form of transfers or tax deductions, usually gradually reduce and then discontinue social assistance depending on one's income. Thus, they motivate persons who are unemployed and receiving social assistance and especially those that may only have access to low-paying jobs, to work. See, e.g.: Herwig Immervoll and Mark Pearson, *A Good Time for Making Work Pay? Taking Stock of In-Work Benefits and Related Measures across the OECD* (Paris: OECD, 2009). See also Mirna Jusić and Amar Numanović, "Flexible Labor in Inflexible Environment: Reforms of Labor Market Institutions in Bosnia and Herzegovina in Comparative Perspective" (Sarajevo: *Analitika Center for Social Research*, December 2015).

⁷⁷ Secondary education of minimum three years is compulsory in three cantons of the Federation. However, this has not been fully implemented in practice. See: Federal Ministry of Education and Science, "Information on the Possibility of Introducing Compulsory Secondary Education with a Two-year Term in the Federation [Informacija o mogućnosti uvođenja obaveznog srednjoškolskog obrazovanja sa dvogodišnjim trajanjem u Federaciji]," 2015.

For those who would continue their education in their adult life,⁷⁸ they perceive the State as unable to provide them with such opportunities, e.g. through adult education.⁷⁹ Continuing education programs for adults are rare, with only 1.6% of the working population enrolled in adult education,⁸⁰ while active labor market policies focused on education and vocational training programs are also underdeveloped.⁸¹

When access to education is paired with disabilities, the problem becomes even more complex. For Milan, one of our interviewees with an intellectual disability who completed only elementary school, enrolling in secondary education was not feasible. The reason for it is that the inclusion of students with disabilities in the educational system is not systematically resolved,⁸² meaning that the State has failed to create the conditions for persons with disabilities to realize their right to education to their fullest potential.

For many parents, the number of extra costs surrounding education further complicates the possibility of their children attending school. Families with children who attend primary school in our group of interviewees have to deal with additional expenses for textbooks, clothes, food, and transport, particularly those living in rural areas. According to one report, “it has been estimated that 15% of children attending primary school in BiH live more than 3 km away from the school, and the parents tend to keep children at home, especially when no transport to the school has been provided.”⁸³ Poverty and fixed belonging to a certain social stratum are thus perpetuated because parents cannot afford to send their children to school: one of our interviewees expressed intent to withdraw his son from school if he does not get the help from the State because he cannot afford to buy proper boots for his son to go to school in the winter.

⁷⁸ Among the working population, 45% have no or only primary education (with women overrepresented), 48% has high school, and only 7% have postsecondary degrees. See: Council of Ministers of Bosnia and Herzegovina, Directorate of Economic Planning, “Social Inclusion Strategy of Bosnia and Herzegovina [Strategija socijalnog uključivanja Bosne i Hercegovine],” June 2010, p. 64.

⁷⁹ Initiative and Civil Action and Rights for All, “Implementation of the European Social Charter through Legislation and Practice in BiH” (Sarajevo: 2009), p. 23.

⁸⁰ Council of Ministers of Bosnia and Herzegovina, Directorate of Economic Planning, “Social Inclusion Strategy of Bosnia and Herzegovina [Strategija socijalnog uključivanja Bosne i Hercegovine],” June 2010, p. 67.

⁸¹ Initiative and Civil Action and Rights for All, “Implementation of the European Social Charter through Legislation and Practice in BiH” (Sarajevo: 2009), p. 34.

⁸² Foundation for Social Inclusion [Fondacija za socijalno uključivanje], “Priority Problems in the Sector of Human Rights of Marginalized Groups in Bosnia and Herzegovina [Prioritetni problemi u sektoru ljudskih prava marginalizovanih grupa u Bosni i Hercegovini],” 2015, p. 9.

⁸³ Initiative and Civil Action and Rights for All, “Implementation of the European Social Charter through Legislation and Practice in BiH” (Sarajevo: 2009), p. 47.

There are some attempts at the structural level to ease this position. The federal Law on the Protection of Families with Children⁸⁴ stipulates that children from poor families should be provided with one free meal at school, but since the responsibility to ensure these rights are at the cantonal level, this right is mostly neglected, and the justification provided is usually the lack of funds.⁸⁵

5.10. Weak services for the elderly

Difficulties that the elderly are faced with were outlined in a number of interviews. Reliance on neighbors for food and electricity, feeling alone and isolated from the wider community, no assistance in terms of care and support in the household – for example, cutting up wood for heating - and difficulties in terms of mobility and travel – for instance, when in need to reach the hospital - were only some of the problems stressed by interviewees.

BiH is the only country in the region that lacks a strategy on ageing, although it should have one as a member of the United Nations under the 2002 Madrid International Plan of Action on Ageing.⁸⁶ One of the main concerns of the Madrid Plan is the fact that older women significantly outnumber older men, which holds for BiH as well. The Madrid Plan urges the recognition of the gendered particularities of ageing as well as making the situation of older women a policy priority.⁸⁷

The Ombudsman of BiH, in a report on the status of human rights among the elderly, pointed out that the elderly are most represented in poverty, due to issues such as poor economic situation and the effects of war and displacement.⁸⁸ A lack of regulations and strategies on aging was also stressed. The report points out the need to cover the cost of medicine and medical care for the elderly, including mental health, and the provision of home care. The Ombudsman also noted that lack of recognition or assistance to families caring for the elderly with illnesses, dementia, or other disabilities.⁸⁹

⁸⁴ Law on Social Protection, Protection of Civilian War Victims and Families with Children in FBiH [Zakon o osnovama socijalne zaštite, zaštite civilnih žrtava rata i zaštite obitelji sa djecom u FBiH], *Official Gazette FBiH* 36/99, 54/04, 42/06, 14/09.

⁸⁵ Rights for All and Initiative and Civil Action, “Why are We Not Equal in Rights to Social Protection? Analysis and Recommendations” (Sarajevo: November 2010).

⁸⁶ Initiative and Civil Action and Rights for All, “Implementation of the European Social Charter through Legislation and Practice in BiH” (Sarajevo: 2009), p. 53.

⁸⁷ United Nations, “Political Declaration and Madrid International Plan of Action on Ageing” (New York: 2002), p. 16.

⁸⁸ The Institution of Human Rights Ombudsman/Ombudsmen of BiH, “Special Report on Human Rights Situation of Elderly Persons [Specijalni izvještaj o stanju ljudskih prava starih lica],” November 2010.

⁸⁹ Initiative and Civil Action and Rights for All, “Implementation of the European Social Charter through Legislation and Practice in BiH” (Sarajevo: 2009), p. 43.

5.11. Compounded difficulties in accessing social protection for ethnic minorities

Structural causes of inequality among ethnic groups persist, particularly when such groups are minorities. The Roma as an ethnic minority face not only stereotypes and exclusion, but also face the inability to exercise basic rights to education, employment, social assistance, housing or health care.⁹⁰

Prejudice and structural inequality plays a circuitous role, which entrenches unequal socioeconomic status. Some Roma associations' representatives claimed that their children were discriminated against in primary education – and that their own parents' low levels of education may contribute to high dropout rates.⁹¹ The resulting low educational qualification, coupled with prejudiced or mistrustful employers and a bad economic situation, leads to high unemployment. While Roma citizens were entitled to healthcare, their exclusion from employment and education, the most common providers of access to health, also often leads to a lack of healthcare provision.⁹²

⁹⁰ Ibid, p. 44.

⁹¹ Ibid, p. 46.

⁹² Ibid, p. 46.

6.

Intersectionality across levels and categories

The purpose of the intersectional approach is to “study power differentials in a co-constitutive instead of an additive manner, focusing on the interrelatedness of categories and how they are mutually constructed.”⁹³ Rather than sum up the sources of inequalities that we identified through our research, we instead aim to concentrate on the ways in which our analytical categories feed into each other to create specific, intersectional oppressions. This implied being skeptical towards the idea of stable and fixed identities that could be ‘stacked’ on top of each other in order to multiply oppressions. As Lisa Bowleg points out, the additive approach to intersectionality causes the researcher to miss how “social power relations construct each other.”⁹⁴ For example, the lived experience of being a Roma woman with a disability is a particular one, which cannot be derived simply from considering what it means to be Roma, female, or a person with a disability in isolation. Neither can one conceive of class – which is not gendered or racialized – or gender which is not classed. Each category as a source of inequality is embedded in others, yielding particular lived experiences, which cannot necessarily be foreseen.

We were careful not to reify categories and identities as fixed or stable, instead seeing them as “the *products* of historically entrenched, institutional systems of domination and violence”⁹⁵ which are in turn perpetuated by symbolic representations. Seeing identities as the complex results of structures and institutions aids us in the conceiving of identities as resting precisely on intersections, rather as a set of additions, which multiply oppression. More forcefully, Jasbir Puar argues that “intersectionality colludes with the disciplinary apparatus of the State ... in that ‘difference’ is encased within a structural container that simply wishes the messiness of identity into a formulaic grid.”⁹⁶

⁹³ Gabriele Winker and Nina Degele, “Intersectionality as Multi-level Analysis: Dealing with Social Inequality,” *European Journal of Women’s Studies* 18, no.1 (2011).

⁹⁴ Lisa Bowleg, “When Black + Woman + Lesbian ≠ Black Lesbian Woman,” in *Intersectionality: A Foundations and Frontiers Reader*, ed. Patrick Grzanka (Boulder, CO: Westview Press, 2014), p. 315.

⁹⁵ Patrick Grzanka, introduction to *Intersectionality: A Foundations and Frontiers Reader*, ed. Patrick Grzanka (Boulder, CO: Westview Press, 2014), p. xv.

⁹⁶ Jasbir Puar, “From Intersections to Assemblages,” in *Intersectionality: A Foundations and Frontiers Reader*, ed. Patrick Grzanka (Boulder, CO: Westview Press, 2014), p. 337.

Indeed, in employing our research method we drew on interviewees' own self-identifications as well as social categories, attempting to remain cognizant of the 'messiness' of identity at the individual level.

This complexity makes intersectionality particularly difficult to present, since a mere listing of the analytic categories we identified, as sources of equality would resemble nothing more than an additive approach. Instead we will attempt to demonstrate how the categories of class, gender, ethnicity, and the body traverse and modify each other, as opposed to just add to each other. Gender, as we have seen, threads through nearly all of the other central analytic categories, playing a role at the level of social norms, education, work, and family, and crucially altering lived experiences at each turn – for both men and women. Class is ever-present, but contains many determining factors, such as education and ability, which may differ among members of the same socioeconomic stratum. Ethnicity became important only when it was marginalized or in the minority. The body, which is at points inextricable from gender, affected almost all power differentials we came in touch with. All of these analytic categories were experienced as sources of inequality by our interviewees, confirmed and contradicted by symbolic representations, especially through media, and most of all produced and perpetuated by social structures which affect health, education, employment, social work, childcare, and other institutional aspects.

The category of class is clearly pre-empted when taking into focus a group of research subjects in a poor socioeconomic position and/or on social assistance, but there also exists diversity within the group as well, such as the size of households, housing status, education, employment status, etc. All of our interviewees are positioned lower in the class system, and are caught in a cycle which makes it difficult for them to employ more efficient (often costly) coping strategies to overcome poverty, such as requalification or additional education. In the case of BiH, class seems to be heavily linked to and determined by education, a belief that is reiterated by both our research subjects and focus groups. The fact that class is mostly intertwined with educational level rather than, for example, familial wealth and land ownership, suggests a certain social and class mobility is at play in our context, one that may reflect BiH's history in the former socialist Yugoslavia.

Therefore, for our interviewees, education was considered a key means of overcoming poverty. This comes as no surprise given that the vast majority within our sample have only completed primary education, and frequently attribute their socio-economic status to their low educational attainment. On the other hand, those with a higher educational attainment in the group of persons interviewed also seem to be able to navigate the system better than those that have a lower level of education because they are more familiar with their rights and know how to demand them. Education was considered particularly important for women and girls, though barriers to education such as age and household duties were present in many of our interviewees' stories. The gaps in adult and continuing

education, as well as subsidiary costs of schooling children were some of the main barriers presented by our interviewees.

For those recipients who are able and willing to work, seeking employment is their primary method of overcoming poverty and ceasing to be on social assistance. Yet as mentioned above, they face many obstacles in this, many of which are embedded in the structure of the social system itself. Taking a job is risky given that their social assistance will be discontinued if they enter into formal employment. Moreover, their perception that there is a low demand on the labor market for those with low educational attainment is reflected in the country's high unemployment rate, and often corroborated by the interviewees' own experiences of difficulty and rejection in the job search – something which increases with old age. Indeed, the highest rates of unemployment are found among those with only a secondary school education.⁹⁷ Taken together, the intersections between their gender, education, age, and socioeconomic position make it difficult for them to find well-paid jobs, and they tend to work for wages that are only slightly higher than the assistance they receive.

In this sense, the position of women is especially difficult given that their status on the labor market is conditioned by the intersection between gender, age, education, and other factors, and can be perceived as a reflection of their actual social position, their social roles, and expectations.⁹⁸ Thus, it comes as no surprise that they face greater economic inequality, that women are the dominant receivers of social assistance,⁹⁹ and that the majority of our interviewees were women).

Gender is threaded through almost every one of the oppressions and inequalities we encountered, starting from the most basic norms of gendered social roles – the model of women as caregivers and domestic laborers and men as breadwinners. We can see this patriarchal norm playing out through numerous prisms – starting with schooling, where girls are more likely to be pulled out of school to perform caregiving tasks, higher education, where women are underrepresented at the highest levels, employment, which lacks adequate policies to make childbearing and childcare easier for women, to the division of 'male' and 'female' work (where female work is more often less paid), to the prevalence of older women who have no or small pensions and are unemployed, which leads to the *feminization of poverty*. Other institutional biases which affect women's overrepresentation in poverty are "disparities in economic powersharing, unequal distribution of unremunerated work between women and

⁹⁷ Agency for Statistics of Bosnia and Herzegovina, "Women and Men in Bosnia and Herzegovina" (Sarajevo: 2013), p. 32.

⁹⁸ Sanela Bašić and Milanka Miković, "Gender (In)equalities in the Labor Market in BiH: the Female Side of the Story [Rodne (ne)jednakosti na tržištu rada u BiH: ženska strana priče]" (Sarajevo: Friedrich Ebert Stiftung, 2012), p. 16.

⁹⁹ Agency for Statistics of Bosnia and Herzegovina, "Social Welfare 2008-2013" (Sarajevo: 2014), p. 29.

men, lack of technological and financial support for women's entrepreneurship, unequal access to, and control over, capital, in particular land and credit and access to labor markets, as well as all harmful traditional and customary practices."¹⁰⁰ Given that most or all of these disparities are present in the BiH society, we can infer that though not all of them were directly referred to by our interviewees, they structured the normative landscape in which the women we spoke to lived.

Patriarchal relations were also observed in individual family dynamics, as observed in particular in the dynamics of dominance (power relations between spouses) during the interviews and the binary relations between breadwinners (fathers, husbands) and those considered weaker and more vulnerable members of households. It is important to mention that even though several interviews were initially planned to be conducted with female members of the targeted family receiving social assistance, they ended up being interviews with their husbands or male members of the household.

With our interviewees, unemployment and work was observed in particularly gendered terms. The division between "male" and "female" jobs was seen on the individual, symbolic and structural levels, and repeated by both men and women. However, we saw these roles (especially traditionally masculine roles as defined by patriarchal norms) reversed or challenged in cases of extreme poverty. Men who failed to fulfill the role of the breadwinner and provider, or who had to additionally take on 'feminine' roles within the home, clearly struggled with this. We saw the case of Damir, where the center for social work proposed putting his children in a home when he asked for help with childcare, which further bolsters the idea that single men cannot or should not be solely engaged in care work, while this role is naturalized for women. Meanwhile, two women who live in deep poverty must do 'male' work (i.e. manual labor) in order to earn additional income. Yet women at all levels were saddled with the role of caretaking, which limited their ability and time to perform other types of work.

For men, the social expectation for them to be primary earners caused anxiety if they failed in this role or had to take on 'female' roles in the home. A crucial gendered dynamic here is the fact that much of the hardship our interviewees described had to do with the care – either needing care and lacking it, or being unable to work due to one's obligations of care for children, the ill, or the elderly. Care work is an often neglected but crucial activity associated with a "set of activities or tasks related to helping people to meet daily personal needs and desires,"¹⁰¹ usually those who are dependents, such as children, the ill, or the elderly. The fact that care and domestic labor is naturalized as 'women's work'

¹⁰⁰ United Nations, "Political Declaration and Madrid International Plan of Action on Ageing" (New York: 2002), p. 29.

¹⁰¹ Niall Hanlon, *Masculinities, Care and Equality: Identity and Nurture in Men's Lives* (Houndmills, Basingstoke, Hampshire; New York: Palgrave Macmillan 2012), p. 30.

and very often underpaid is worsened by the fact that this work is generally unrecognized or under-recognized by the State. The role that such obligations play in so many of our interviewees' experiences is overlooked by the social assistance system.

The notion of women's role as 'in the home' and dealing primarily with care and domestic labor was reflected in the fact that women were less likely to have high levels of education and employment. To reflect on our research, 6 out of the 18 women we interviewed completed secondary school, 4 completed elementary school, 4 completed 4 years of elementary school and 3 of them have no education whatsoever. In the case of elderly women, their age and educational level intersected with disability to reduce their coping strategies to a minimum, and they tended to exclusively depend on social assistance.

Some women stated that their age and appearance (body) was an obstacle both to their employment and to receiving social assistance. Among some interviewees, there was a dominant perception (drawn on experience) that women of a certain age are not accepted on the labor market. According to a research on the perception of gender (in)equality in the labor market in BiH by the association "Women to women," age is an extremely important variable in the process of seeking employment. As many as 73% of respondents reported that they had encountered job advertisements that laid out an "acceptable" age limit.¹⁰² Such data supports the perception of many of our interviewees and is in line with their own experience. Being more likely excluded from the labor market, women are thus equally less likely to be able to rely on pensions, as seen above.

One of the reasons that older women are overrepresented in poverty is due to the particularities of women's involvement in the labor market. On average, women are less involved in paid work, earn lower salaries, have 'interrupted work histories' often due to childbearing, childcare, and care of the elderly, and are thus less likely to have adequate savings and pensions for retirement.¹⁰³ Additionally, older women who live in rural areas are particularly vulnerable to poverty, "especially when their role is restricted to non-remunerated work for family upkeep and they are dependent on others for their support and survival."¹⁰⁴

The urban/rural divide was also a very important determining factor in people's socioeconomic situation and their ability to access rights, as was housing. For example, interviewees who had a resolved and stable housing situation (mostly through inheritance or donation) found their situation easier to bear, with far fewer regular expenses. Several interviewees mentioned that having

¹⁰² Sanela Bašić and Milanka Miković, "Gender (In)equalities in the Labor Market in BiH: the Female Side of the Story [Rodne (ne)jednakosti na tržištu rada u BiH: ženska strana priče]" (Sarajevo: Friedrich Ebert Stiftung, 2012), p. 76.

¹⁰³ United Nations, "Political Declaration and Madrid International Plan of Action on Ageing" (New York: 2002), p. 22.

¹⁰⁴ Ibid, p. 24.

the additional burden of rent would be completely unbearable. However, most interviewees live in rented apartments or rundown, almost uninhabitable houses. Those living in rural areas face a lack of services, difficulty accessing medical care, as well as a lack access to information. They are often not able to realize certain rights because they would have to travel to city centers to do so, as seen in the case of Janica, who could not challenge her level of assistance due to being unable to travel to the city to do so. This problem was also confirmed on the symbolic and structural levels.

Age, disability, and gender seem to be recognized as some of the most salient sources of inequality on individual and symbolic levels, especially when combined. For elderly people in our sample, searching for employment is hardly an option, and thus they have to rely on the social assistance and help from their community. Given that a poor health condition is associated with aging, there is a frequent intersection between class and physical and sensory disability. With the low monthly income from social assistance and difficult living conditions, they can barely afford basic medications, whereas more expensive ones are not likely to be on the “essential list”¹⁰⁵ covered by the health insurance and very expensive to purchase. It is not uncommon for them to resort to saving on medication and for those living in rural areas, access to health services is limited. These structural limitations further exacerbate the already poor condition they are in. Our focus group participants also recognized that the elderly are particularly vulnerable categories within social protection system at the symbolic level. However, they are not recognized as a vulnerable category in legislation and thus are neglected in terms of policies, plans, and programs directed solely at them.

Disability, old age, war-related, or non-war related, was one of the most significant sources of inequality. It was tempered by place of residence, which determined whether one could access different forms of medical care or schooling. Within disability itself, different statuses also meant differences in various political and institutional privileges, such as the difference in benefits that persons with war related disabilities enjoy as opposed to other persons with disabilities. Indeed, almost 75% of all social assistance goes to war veterans and their families, with the percentage slightly lower in the Federation than in RS.¹⁰⁶ The high social standing of former soldiers offers them assistance, which is based more on their status than on their needs (which are not necessarily higher than others, or other persons with disabilities). This difference in the social assistance hierarchy may be termed a sort of intra-categorical ‘class’ difference,

¹⁰⁵ Essential lists are different in relation to the place of residence and depend primarily on the budget of individual counties and regions. The recession in recent years has led to a further reduction of list of free medicines. See more at: Rights for All and Initiative and Civil Action, “Why are We Not Equal in Rights to Social Protection? Analysis and Recommendations” (Sarajevo: November 2010).

¹⁰⁶ World Bank, “Social Transfers in Bosnia and Herzegovina: Moving Towards a More Sustainable and Better Targeted Safety Net [Socijalna davanja u BiH: Kreiranje održivog sistema socijalne zaštite zasnovanog na stvarnim potrebama]” (Sarajevo: April 30, 2009), p. 3.

or least a very significant difference in status. The decision to distribute funds to war veterans rather than others may serve important functions for political and social stability,¹⁰⁷ but also betrays the principle of a universal and equal access to social protection.

Thought it may have been expected that ethnicity would be a very present source of inequality given ethnic divisions in BiH society, we did not register a significant number of such references. This finding can possibly be explained by the fact that our interviewees live in ethnically homogeneous places where ethnicity as such is not an issue. In one case, a Bosniak living in a town where Croats form the majority sees himself as discriminated against because he believes he is receiving lower levels of support than Croat recipients. In another case, a Bosniak recipient believes that the Roma have it better because they receive more generous assistance based on their status as a national minority. This stance was also confirmed in focus group discussions, where some participants mentioned that national minorities such as Roma are entitled to more benefits than members of the “dominant” ethnic groups.

Data obtained through institutional analysis, however, do not support this position. The Roma are worse off in terms of socioeconomic status. Aside from the societal stereotypes they must face, their status is additionally burdened by the inability to exercise basic rights to education, employment, social assistance or health care, leading to social exclusion. Out of those participants in our study who declared themselves as Roma, only Nusret completed high school education and claims that he and his family live a “normal,” decent life. However, the Roma women in our sample have only elementary or no education, and their only source of income is the social assistance they receive. With such low educational attainment, living in inadequate housing conditions, with social assistance as their only source of income, these women remain without possibilities to establish any kind of coping strategy which might enable them to overcome poverty.

Moreover, it should be added that some interviewees were unwilling to identify themselves as members of the Roma population. A reason for this hesitance could potentially be the unwillingness to declare themselves as part of a group that is generally marginalized and discriminated against. They instead resorted to *assimilation*, that is, not to declare their ethnicity, to declare themselves as undecided, or choose an affiliation with one of the constituent peoples, in order to avoid “labeling.”¹⁰⁸ Such practices may also be perceived as a coping strategy of a sort, an attempt to escape negative prejudice, or as resistance to identification with divisive categories.

¹⁰⁷ Ibid, p. 40.

¹⁰⁸ Foundation for Social Inclusion [Fondacija za socijalno uključivanje], “Priority Problems in the Sector of Human Rights of Marginalized Groups in Bosnia and Herzegovina [Prioritetni problemi u sektoru ljudskih prava marginalizovanih grupa u Bosni i Hercegovini],” 2015, p. 11.

The role of ethnicity is also at play when the “other” ethnicity unexpectedly shows solidarity towards those in need, indicating the still pervasive division and assumption of animosity between different ethnic groups. A statement from Ibrahim, a Bosniak war participant who sees himself as patriot, aptly illustrates this dissonance:

I went to Pale¹⁰⁹ several times with my friend to buy firewood, and every time they treated me like a king. Everything is normal up there! They treated me like their brother, better than I am treated here, I swear to God! I will say that in front of the whole world. They gave me extra wood, water, food, they helped me! Normal people, here I cannot earn for bread, but up there everything is normal!

Multiple grave lived experiences were noted at the intersection of age, class, and disability. Differences *within* analytical categories were very much visible as well. While some women conducted housework their whole lives, others were or had been engaged in financially gainful activities, or had no children. Class posed a constant struggle, but materialized differently depending on other crucial factors such as education, housing, employment status, and body capability. The body was, likewise, something which repeatedly cropped up as a source of oppression, as well as variations which we saw between those with disabilities, and variations in the status and situation of caregivers, due to status, place of living, etc. Race or ethnicity became salient when they crossed class or gender lines resulting in further hardship, making some groups marginalized within already marginalized groups. Yet these particular experiences which arise from intersecting inequalities are rarely addressed due to the lack of intersectional approach to policy.

¹⁰⁹ A town outside of Sarajevo, with a majority Serb population, and former administrative capital of Republika Srpska.

7.

Addressing inequalities at the intersections through social protection

One of the main conclusions of this research is that the individuals that are, or ought to be, social assistance recipients in BiH face intersecting and concurrent inequalities which indisputably exacerbate the poor situation they live in, creating obstacles in their strategies of everyday survival. As such, it became clear through our findings that neither the social protection system nor the relevant policies adequately address these multiple sources of inequality, which at the same time, perpetuates the problem.

The analysis on the individual level served as a basis to gain understanding of the interrelations, interactions, and dependencies of categories of inequalities (gender, race, class, and body) on this level, as well as the self-reported structural problems and symbolic representations identified by interviewees.

Subjects who were clustered into eight different groups spoke of unfulfilled needs and their reliance on a variety of coping strategies to meet them. Each of these groups suffered from the intersections of two or more categories, which we identified in their stories, which determined their individual outcomes and coping strategies they used. These intersections were not directly addressed by the social protection system, leading to the deterioration of the living standards of social assistance beneficiaries.

For example, those with an overwhelming need for medical care faced not only bodily inequality, but situations which were modified by class and gender. Within this group, we observed a variety of coping strategies that these individuals employed in order to obtain treatment, such as saving on other basic living costs such as healthy food, relying only on medication, which was provided free of charge, and by rationing medication. These strategies were made necessary by the fact that policies on social protection, health, and disability in BiH fail to take intersecting inequalities into account.

On the symbolic level, some of the interviewees' perceptions that social assistance recipients are seen as parasitical or passive was not shared by focus groups or local media. Instead, the general population and media discourse was critical of the social protection system and the distribution of resources, believing that funds were not adequately targeted to the most disadvantaged. Focus group participants often noted that the belonging of social assistance beneficiaries to certain identity groups, such as persons with disabilities or the

elderly, put them in a worse position compared to other groups. This suggests an implicit recognition of the multiple and intersecting sources of inequality, especially class and body, at play in some of the worst living conditions. There was also a sense that the State had failed to address this via its policies on social protection.

Based on the structural problems identified by our interviewees, extensive secondary research was done on these issues. On a country level, it was found that the two tier system of assistance based on status is perceived and experienced as unjust, that social assistance is very often insufficient for basic living needs, and that there were many variations in levels of assistance and access based on the entity, canton, or the urban vs. rural living setting. This unequal distribution of resources, along with in-country variations, perpetuates inequalities.

A lack of State policies addressing crucial sources of inequality additionally burdened recipients of social assistance. Among these is a lack of health services and access medication and a lack of streamlined healthcare rights – which also tends to vary based on place of residence. Additionally, there is a lack of adequate monetary support and other services for families with children, a lack of accessible childcare, and of recognition of obligations of care towards ill or family members with disabilities, children, spouses, the elderly, or other dependents. There are no adequate policies for people with disabilities, and accessibility remains a major issue. The State also has no active labor market policies, leading to social assistance recipients being forced to work informally and with no job security, and inadequate incentives to find full-time employment. This coincides with issues in the field of education including a high dropout rate, high fees, a lack of integration of students with a disability, and a lack of adult and continuing education – which directly affects employment prospects. Finally, the system of social protection itself contains many administrative hurdles and is not user-friendly, which leads to beneficiaries often not being able to realize their rights.

It needs to be said that the current anti-discrimination legislation in BiH also does not contribute to addressing multiple inequalities that our respondents have been exposed to. The current Law on the Prohibition of Discrimination does not include a provision on the prohibition of multiple discrimination,¹¹⁰ although such a provision is included in a package of amendments currently undergoing the parliamentary procedure. In addition, the social protection laws¹¹¹ in the three

¹¹⁰ Law on the Prohibition of Discrimination, *Official Gazette of BiH* 59/09.

¹¹¹ Law on Social Protection of Brčko District [Zakon o socijalnoj zaštiti Brčko Distrikta], *Official Gazette of Brčko District* 1/0, Article 82; Law on Social Protection, Protection of Civilian War Victims and Families with Children [Zakon o osnovama socijalne zaštite zaštite civilnih žrtava rata i zaštite obitelji sa djecom u FBiH], *Official Gazette FBiH* 36/99, 54/04, 42/06, 14/09, Article 50; Law on Social Protection of Republika Srpska [Zakon o socijalnoj zaštiti Republike Srpske], *Official Gazette of RS* 37/12, Article 3.

administrative units in BiH do not include proper and sufficiently elaborated anti-discrimination provisions and are not aligned even with the current version of the anti-discrimination law.

Each of the structural problems above are amplified by intersections of at least two analytical categories (class, ethnicity, body – age, disability, and gender), while it is clear that the intersections between inequalities are not properly addressed by existing policies. We found that these sources of inequality were very much interwoven with each other. For example, class, which rested on education, employment, and housing, was in all cases tempered by gender as well as body. These intersections produced not only difficult living situations but also hardships, which were not directly addressed by the authorities. Therefore, the need to take on an intersectional approach to policy-making was made clear.

8.

Conclusion and Tentative Policy Implications

This form of intersectional research, which takes into account the diverse set of forces and structures which act on individual experiences and subject constructions, can prove to be a valuable tool in envisaging the broader picture and conceiving of holistic policies which seek to address the overlaps of various inequalities. Indeed, an in-depth analysis of the institutional landscape in the realm of social protection in BiH and interviewees' perceptions of and interactions with the system of social protection points to a number of potential ways in which structural problems may be redressed by policies which take intersectionality into account.

In order to address inequalities at the intersections better and in a more comprehensive way, it is necessary to ensure that the law at the entity and other levels address in detail the rights of users, the amount of assistance, and financing sources for these rights in order to eradicate or at least diminish current inequalities that social assistance beneficiaries continue to experience. Of course, advocating for this approach opens up many issues such as the determination of the threshold to be empirically based and aligned with real needs that persons have in order to adequately address the sources of inequality. Moreover, cash benefits are insufficient as a means of social protection, and a number of social services need to be introduced and guaranteed, such as home care and personal assistance for those with illnesses or disabilities (assisted living), accessible childcare, elderly care, long-term care, and different forms of counselling services.

Social policy should be combined with employment policy, to ensure that beneficiaries are able to exit poverty. Some international practices in this realm include professional training and guidance in job searches, which involves persons who are willing and capable to work in the active labor market policies. These measures enable such persons to earn an income substantially greater than the social assistance benefits they are receiving, which may increase their motivation to take on formal employment and reduce informal work for the fear of losing benefits. In this case, employment policy and relevant laws on social protection and on disability have to be tackled jointly, and in coordination between various authorities, in order to ensure the right working conditions that are adequately geared towards social assistance recipients, and especially persons with disabilities.

Educational policy should take into account not just the quality of education but concurrently other reasons why students may have poor achievement or drop

out – food or housing insecurity, obligations at home, lack of mobility, disabilities, parents' lack of funding for necessities, etc.

Ensuring equal access to healthcare is vital, especially within the FBiH where considerable differences in the levels of access to healthcare have been reported.

Moreover, a number of interviewees, who are persons with disabilities and persons with health problems, have expressed needs that could be tackled by complementary and integrated local services (rehabilitation, subsidized transportation, medical care).

Obligations of care towards others, such as young children, persons with disabilities, elderly, or ill, were evidently some of the most pressing causes of underemployment and poverty that we identified. A host of policies must be applied to address these issues, beginning with recognition that caregiving may result in the inability to work full time, especially without adequate assistance from the State. Relevant authorities should increase its monetary assistance to those who are fulltime caregivers. Also, they should offer better services, such as accessible childcare or home medical care, cover the cost of all necessary medications, and take other steps to assist caregivers in being able to both care for their dependents and also become independent. Accessible childcare is also a precondition for working mothers or fathers who do the caregiving in their family, hence it should also be considered within employment policy.

When it comes to the modalities of financing social assistance, it is necessary to open a broader social dialogue on the reallocation of resources, which is currently limited and inadequately deployed. Any reform in the direction of the possible reallocation of funds intended for social assistance implies the inclusion of representatives of the key categories of social welfare beneficiaries, as well as representatives of employers and other interested parties.

In general, policies aimed at alleviating discrimination and oppression must look beyond single categories of identification and address both “multiple identities and within-group diversity.”¹¹² Therefore, social protection policy, but also policies on health and disability, employment, education, and housing, must take questions of class, ethnicity, gender, and the body seriously if they are to be effective. In a similar vein, social protection laws in all three administrative units of BiH would also have to include elaborate provisions prescribing the prohibition of discrimination, including multiple discrimination.

Finally, relevant authorities in BiH could consider different measures such as monitoring intersectionality in the legal system, training members of the judiciary to identify intersectional discrimination, and allowing claims based on more than one category of discrimination.¹¹³

¹¹² Olena Hankivsky and Renee Cormier, “Intersectionality and Public Policy: Some Lessons from Existing Models,” *Political Research Quarterly* 18, no.1 (2011), p. 218.

¹¹³ Maria Caterina La Barbera, “Implementing the Intersectionality Approach through Public Policies and the Law,” (paper presented at *XI Congreso Asociación Española de Ciencia Política y de la Administración (AECPA)*, Sevilla, September 2013), *draft paper cited with author's permission*.

Bibliography

1. "Bosnia and Herzegovina the fifth poorest country in Europe [Bosna i Hercegovina peta najsiromašnija država u Evropi]." *Klix.ba*, February 22, 2016. <<http://www.klix.ba/vijesti/bih/bosna-i-hercegovina-peta-najsiromasnija-drzava-u-evropi/160221022>>.
2. "The average salary in BiH grew by 321 KM in the past ten years, the consumer basket by 466 KM [Prosječna plaća u BiH za 10 godina povećana za 321, a potrošačka korpa za 466 KM]." *Klix.ba*, November 30, 2014. <<http://www.klix.ba/vijesti/bih/prosjecna-placa-u-bih-za-10-godina-povecana-za-321-a-potrosacka-korpa-za-466-km/141128112>>.
3. Agency for Statistics of Bosnia and Herzegovina. "Labor Force Survey [Anketa o radnoj snazi]." Sarajevo: 2014. <http://www.bhas.ba/ankete/LFS_2014_001_01_bh.pdf>.
4. Agency for Statistics of Bosnia and Herzegovina. "Social Welfare 2008-2013." Sarajevo: 2014. <<http://www.bhas.ba/tematskibilteni/socijalna%20zaštita%20bh.pdf>>
5. Agency for Statistics of Bosnia and Herzegovina. "Women and Men in Bosnia and Herzegovina." Sarajevo: 2013.
6. Bandić, M. "We do not owe the directorate 1.8 million KM [Nismo dužni direkciji 1,8 miliona KM]." *Oslobođenje*, January 28, 2014, p. 12.
7. Bašić, Sanela and Milanka Miković. "Gender (In)equalities in the Labor Market in BiH: the Female Side of the Story [Rodne (ne)jednakosti na tržištu rada u BiH: ženska strana priče]." *Friedrich Ebert Stiftung*. Sarajevo: 2012.
8. Bartlett, William. "Gap Analysis in the Area of Social Protection and Inclusion Policies in Bosnia and Herzegovina [Analiza nedostataka u oblasti politika socijalne zaštite i inkluzije u BiH]." Sarajevo: *UNICEF*, November 2013. <<http://www.unicef.org/bih/ba/GAPanaliza.pdf>>.
9. Bowleg, Lisa. "When Black + Woman + Lesbian ≠ Black Lesbian Woman." In *Intersectionality: A Foundations and Frontiers Reader*, edited by Patrick Grzanka. Boulder, CO: Westview Press, 2014.
10. Brah, Avtar, and Ann Phoenix, "Occupy Intersectionality." In *Intersectionality: A Foundations and Frontiers Reader*, edited by Patrick Grzanka. Boulder, CO: Westview Press, 2014.
11. Council of Ministers of Bosnia and Herzegovina, Directorate of Economic Planning. "Social Inclusion Strategy of Bosnia and Herzegovina [Strategija socijalnog uključivanja Bosne i Hercegovine]." June 2010.
12. Custom Concept. "Analysis of Social Welfare and Health Needs of Families and Children in the Federation of Bosnia and Herzegovina and Brčko District [Finalni izvještaj: Analiza potreba djece i porodica iz oblasti socijalne zaštite i zdravlja u Federaciji Bosne i Hercegovine i Brčko distriktu]." Sarajevo: *UNICEF*, 2013. <http://www.unicef.org/bih/ba/Izvjestaj_BH_web.pdf>.
13. Dizdarević, Eldar. "Will the state help citizens? [Hoće li država pomoći i građanima?]." *Oslobođenje*, December 2, 2014, p. 11.

14. Duvnjak-Šalaka, E. "Child benefits keep decreasing as we become an elderly country [Naknade za djecu sve manje dok postajemo zemlja staraca]." *Dnevni avaz*, July 9, 2014, p. 10.
15. Federal Ministry of Education and Science. "Information on the Possibility of Introducing Compulsory Secondary Education with a Two-year Term in the Federation [Informacija o mogućnosti uvođenja obaveznog srednjoškolskog obrazovanja sa dvogodišnjim trajanjem u Federaciji]." 2015.
16. Federal Ministry of Labor and Social Policy [Ministarstvo rada i socijalne politike]. "Strategy of Deinstitutionalization and Transformation of Social Protection Institutions in the Federation of Bosnia and Herzegovina (2014-2020) [Strategija deinstitutionalizacije i transformacije ustanova socijalne zaštite u Federaciji Bosne i Hercegovine (2014-2020)]." Sarajevo: 2013.
17. Foundation for Social Inclusion [Fondacija za socijalno uključivanje]. "Priority Problems in the Sector of Human Rights of Marginalized Groups in Bosnia and Herzegovina [Prioritetni problemi u sektoru ljudskih prava marginalizovanih grupa u Bosni i Hercegovini]." Sarajevo: 2015.
18. Fondazione G. Brodolini. "Background note: Gender Equality in Caring Responsibilities over the Lifecycle." Paper presented at Equality Between Women and Men Conference, European Commission of Justice, Brussels, September 19-20, 2011. <http://ec.europa.eu/justice/gender-equality/files/conference_sept_2011/background-paperiii-equality-in-caring_en.pdf>.
19. Grzanka, Patrick, ed. *Intersectionality: A Foundations and Frontiers Reader*. Boulder, CO: Westview Press, 2014.
20. Hankivsky, Olena, and Renee Cormier. "Intersectionality and Public Policy: Some Lessons from Existing Models." *Political Research Quarterly* 18, no.1 (2011).
21. Hanlon, Niall. *Masculinities, Care and Equality: Identity and Nurture in Men's Lives*. Houndmills, Basingstoke, Hampshire; New York: Palgrave Macmillan, 2012.
22. Hilfswerk Austria International. "Study: analysis of existing social housing models with recommendations for integrated model of sustainable social housing system in Bosnia and Herzegovina [Analiza postojećih modela socijalnog stanovanja sa preporukama za integralni model samoodrživog sistema socijalnog stanovanja u Bosni i Hercegovini]." Sarajevo: 2015.
23. Huremović, S. "We achieved a miracle with the money we had [Postigli smo čudo sa novcem koji smo imali]." *Oslobođenje*, January 13, 2014, p. 19.
24. Immervoll, Herwig, and Mark Pearson. *A Good Time for Making Work Pay? Taking Stock of In-Work Benefits and Related Measures across the OECD*. Paris: OECD, 2009. <http://www.oecd-ilibrary.org/social-issues-migration-health/a-good-time-for-making-work-pay-taking-stock-of-in-work-benefits-and-related-measures-across-the-oecd_225442803245>.
25. Initiative and Civil Action *and Zemlja djece*. "Report: Are Women in BiH Protected from Discrimination? We Have Laws, Mechanisms, But No Protection. Why? [Izvjestaj: Da li sužene u BiH zaštićene od diskriminacije? Imamo zakone, mehanizme, ali ne i zaštitu. Zašto?]." Sarajevo: 2014.

26. Initiative and Civil Action *and* Rights for All. "Implementation of the European Social Charter through legislation and practice in BiH." Sarajevo: 2009.
27. Institution of Human Rights Ombudsman/Ombudsmen of BiH. "Special Report on Human Rights Situation of Elderly Persons [Specijalni izvještaj o stanju ljudskih prava starih lica]." November 2010.
28. Jusić, Mirna, and Amar Numanović. "Flexible Labor in Inflexible Environment: Reforms of Labor Market Institutions in Bosnia and Herzegovina in Comparative Perspective." Sarajevo: *Analitika Center for Social Research*, December 2015. <<http://www.analitika.ba/en/publications/fleksibilan-rad-u-nefleksibilnom-okruzenju-reforme-institucija-trzista-rada-u-bosni-i>>.
29. Jusić, Mirna. "Protection of Families with Children in the Federation of BiH – Analysis of the Situation, Key Challenges, and Reform Priorities [Zaštita porodica sa djecom u Federaciji BiH – Analiza situacije, ključni izazovi i reformski prioriteti]." Sarajevo: *Analitika Center for Social Research*, January 2015. Unpublished internal report. Cited with author's permission.
30. La Barbera, Maria Caterina. "Implementing the Intersectionality Approach through Public Policies and the Law." Paper presented at XI Congreso *Asociación Española de Ciencia Política y de la Administración* (AECPA), Sevilla, September 2013. Draft paper. Cited with author's permission.
31. Law on the Prohibition of Discrimination. *Official Gazette of BiH* 59/09.
32. Law on Social Protection of Brčko District [Zakon o socijalnoj zaštiti Brčko Distrikta]. *Official Gazette of the Brčko District* 1/00.
33. Law on Social Protection, Protection of Civilian War Victims and Families with Children in FBiH [Zakon o osnovama socijalne zaštite, zaštite civilnih žrtava rata i zaštite obitelji sa djecom u FBiH]. *Official Gazette FBiH* 36/99, 54/04, 42/06, and 14/09.
34. Law on Social Protection of Republika Srpska [Zakon o socijalnoj zaštiti Republike Srpske]. *Official Gazette of RS* 37/12.
35. Maastricht University Graduate School of Governance *and* IBHI. "Non-contributory Cash Benefits for Social Protection in BiH: What Works and What Does Not (I) [Budžetske novčane naknade za socijalnu zaštitu u BiH: Šta funkcioniše, a šta ne]." Sarajevo: June 2013. <http://www.ibhi.ba/Documents/Publikacije/2013/IBHI_Budzetske_novcane_naknade_u_BiH.pdf>.
36. Maastricht University Graduate School of Governance *and* IBHI. "Fiscal Impact Analysis of the Working Drafts of the Law on the Foundations of Social Protection and the Law on Protection of Families with Children and the Implementation of a Proxy Means Test: Federation of Bosnia and Herzegovina [Analiza fiskalnih efekata radnih nacrtu zakona o osnovama socijalne zaštite i zakona o zaštiti porodice s djecom i implementacije indirektnog imovinskog cenzusa: Federacija Bosne i Hercegovine]." Sarajevo: 2014.
37. Mališević, Jasmina. "Care and assistance by another person for those over 65 is eliminated [Ukida se dodatak za tuđu njegu i pomoć starijima od 65 godina]." *Oslobođenje*, May 4, 2014, p. 15.
38. Ministry of Human Rights and Refugees of BiH [Ministarstvo za ljudska prava i izbjeglice BiH]. "The initial report of Bosnia and Herzegovina on the implementation of the UN Convention on the Rights of Persons with Disabilities: under Article 35, paragraph

- 1 of the Convention on the Rights of Persons with Disabilities [Inicijalni izvještaj Bosne i Hercegovine o provođenju Konvencije Ujedinjenih nacija o pravima osoba sa invaliditetom: po članu 35., stavu 1. Konvencije o pravima osoba sa invaliditetom].” 2012.
39. OECD. “Unpaid Care Work: The missing link in the analysis of gender gaps in labor outcomes.” 2014. <http://www.oecd.org/dev/development-gender/Unpaid_care_work.pdf>.
40. OSCE. “The Right to Social Protection in Bosnia and Herzegovina: Concerns on Adequacy and Equality.” Sarajevo: 2012.
41. Puar, Jasbir. “From Intersections to Assemblages.” In *Intersectionality: A Foundations and Frontiers Reader*, edited by Patrick Grzanka. Boulder, CO: Westview Press, 2014.
42. Rights for All and Initiative and Civil Action. “Guide to Realizing Social Protection Rights [Vodič za ostvarivanje prava iz socijalne zaštite].” Sarajevo: March 2011. <http://www.rightsforall.ba/publikacije-bs/docs-bs/vodic_socijalna_zastita.pdf>.
43. Rights for All and Initiative and Civil Action. “Why are We Not Equal in Rights to Social Protection? Analysis and Recommendations.” Sarajevo: November 2010.
44. Stambolieva, Marija and Stefan Dehnert, eds. *Welfare States in Transition: 20 Years after the Yugoslav Welfare Model*. Sofia: Friedrich Ebert Foundation, 2011.
45. Stevanović, V. “Tens of thousands of invalids could sue BiH? [Desetine hiljada invalida mogu tužiti BiH?].” *Dnevni avaz*, March 29, 2014, p. 7.
46. United Nations. “Political Declaration and Madrid International Plan of Action on Ageing.” New York: 2002.
47. Vasić, B. “Child benefits for more youngsters [Dječiji dodatak za više mališana].” *Nezavisne novine*, November 24, 2014.
48. Winker, Gabriele and Nina Degele. “Intersectionality as Multi-level Analysis: Dealing with Social Inequality.” *European Journal of Women’s Studies* 18, no.1 (2011).
49. World Bank. “Poverty and Equity, Bosnia and Herzegovina.” 2016. <<http://povertydata.worldbank.org/poverty/country/BIH>>.
50. World Bank. “Social Transfers in Bosnia and Herzegovina: Moving Towards a More Sustainable and Better Targeted Safety Net [Socijalna davanja u BiH: Kreiranje održivog sistema socijalne zaštite zasnovanog na stvarnim potrebama].” Sarajevo: 30 April, 2009. <<http://siteresources.worldbank.org/INTBOSNIAHERZ/Resources/SPN2009bos.pdf>>.



ANALITIKA - Center for Social Research is an independent, non-profit, non-governmental policy research and development center based in Sarajevo, Bosnia and Herzegovina. The mission of Analitika is to offer well-researched, relevant, innovative and practical recommendations that help drive the public policy process forward, and to promote inclusive policy changes that are responsive to public interest.
