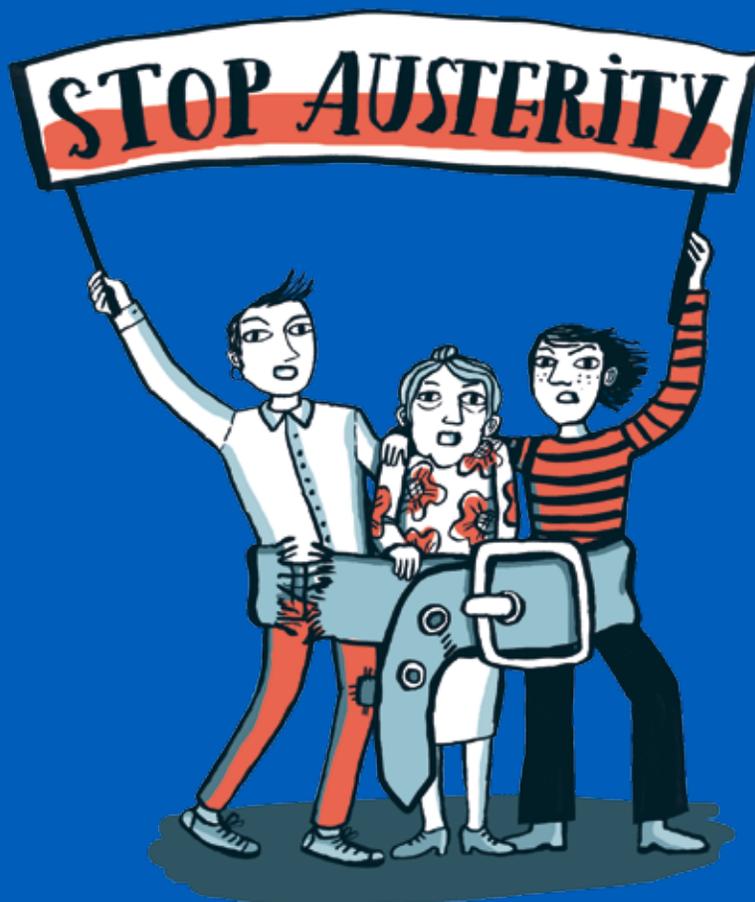


CROATIA

AUSTERITY, GENDER INEQUALITY AND FEMINISM AFTER THE CRISIS

Death by a thousand cuts - Impact of austerity measures on women in Croatia

Marija Čačić and Dora Levačić



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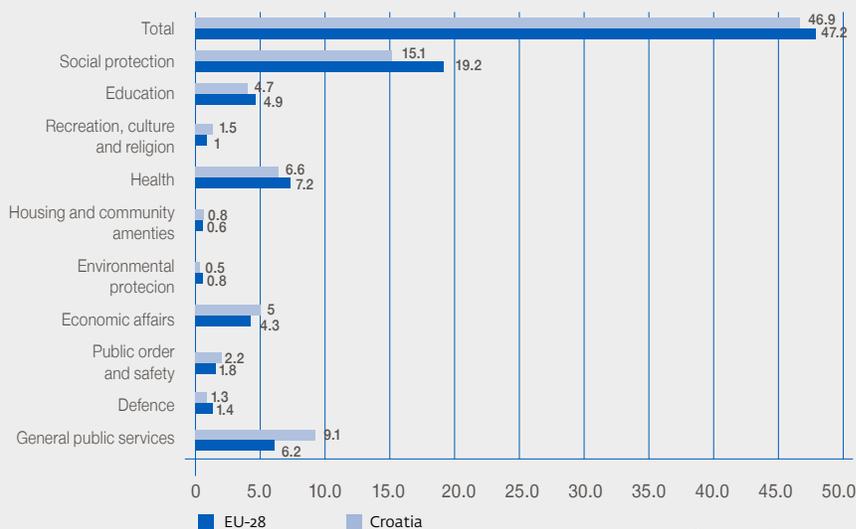
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Introduction

Since the break-up of Yugoslavia, Croatia has been implementing the policy of economic liberalisation led by external requirements and has spent the transformation period under the umbrella of international financial institutions, trying to meet the EU membership requirements as an aspiring member. In the early 1990s, Croatia introduced an anti-inflationary stabilisation program and started the economic restructuring process by introducing an overvalued exchange rate fixed to the Deutschemark (later to euro). Since Croatia's industry was dependent on export markets and the overvalued exchange rate regime favoured imports, this had a devastating effect on industrial production, which could no longer be competitive internally or externally. As with almost all the Central and Eastern European post-socialist states, Croatia experienced a severe transition crisis which resulted in high unemployment. These processes had adverse effects on fiscal capacities and by extension on the welfare state: deindustrialisation meant lower levels of employment and economic activity, which resulted in a shrinking tax base and problems on the revenue side of the budget. At the same time, the rise in unemployment meant greater expenses and more pressure on the expenditure side. There were three main approaches to dealing with these problems and pressures: 1) borrowing and increasing public debt; 2) a 'political' and selective provisioning of services and rights through 'clientele' networks; and 3) the commodification of public services. These processes in the end resulted in lower quality and services that were less available. While major reforms were undertaken in the banking, legal and political system, the transformation of the public sector and public services was gradual. The only exception was public housing, which was abolished at the very beginning. Yugoslavia had developed a far-reaching and elaborate

social security system, so its extension in the initial period of transformation served as a 'social cushion' at the start. In the late 1990s most of the former socialist countries began to implement reforms of their social policies. These changes included the partial privatisation of the pension system and introducing means-tested benefits¹ or a gradual liberalisation in the area of social assistance and family policy (Cerami 2006; Stubbs and Zrinščak 2009), which has gained momentum in light of the recent financial crisis. Croatia's government spending on social protection are below the EU average: in 2015, Croatia allocated 15 % of its GDP to social protection, while the EU-28 average is 19 %, as can be seen in Graph 1. Budget allocation in the last four years has not undergone significant changes.²

Graph 1 – Government spending in 2015, percentage of GDP – EU-28 and Croatia



1 A means test determines whether an individual or family is eligible for government assistance based on whether they possess the 'means' to go without that help.

2 For example, around 80 % of registered unemployed persons in Croatia have no right to unemployment benefits because it has one of the most restrictive unemployment policies in the EU. People may only access social assistance if they have no earnings, savings, cars or property besides the home they live in. According to the November 2017 data from the Ministry of Demography, Family, Youth and Social Policies, only around 2 % of the population receives social assistance, a payment which does not cover one adult person's monthly nutritional needs. One shudders to think what happens if the person has children, since the social expenditure on children is also extremely low in comparison to the EU average.

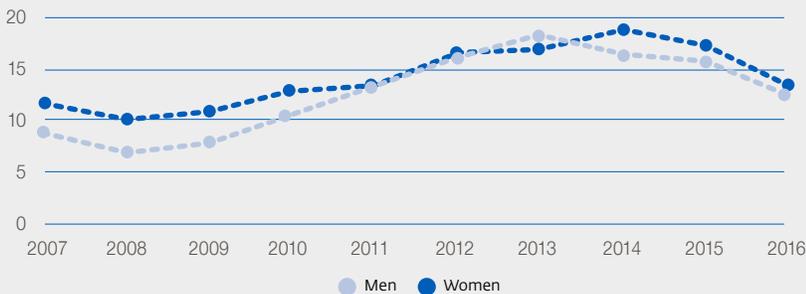
Since 2013, Croatia has been implementing the European Semester, the instrument to monitor and coordinate the economic and fiscal policies of the EU member states, and has followed the Excessive Deficit Procedure which was abrogated in 2017 by the European Commission. Following the recommendations of the EU, the IMF and 'independent experts', the government adopted a new Labour Act in 2014 and justified the changes as a necessary step to create new jobs and increase competitiveness. The changes to labour market regulation are one of the unavoidable consequences of economic liberalisation with significant negative repercussions for women's economic and overall social position.

We will start our paper with an overview of the main indicators of women's position in the labour market, followed by recent legislative changes in the policy areas that are crucial for achieving gender equality – maternity and parental leave, childcare and care of the elderly, child benefits, pensions, health, family and society's view and treatment of domestic violence – as well as national strategies and achievements in the field of gender and sex equality in general. Since most social rights in Croatia are linked to a person's labour market status (somewhat resembling the German system), we shall start our review of legislative changes with the recently adopted Labour Act, followed by various social policies. We have made a compendium of relevant laws and strategies in Croatia since 2009 regarding gender policies, social welfare, health care, labour regulations, the pension system and studies on minorities. We also used the materials prepared by various initiatives, grass-roots movements and unions criticising the above-mentioned laws and strategies. Furthermore, we have used the rich archives of feminist and LGBTQIA+ media (Vox Feminae, Libella, Crol.hr, etc.) to get a better sense of other types of changes in the socio-economic fabric of Croatia, especially when it comes to relationships to the family, marriage and reproductive rights. The data we will use consists of existing studies, official statistics from Eurostat and national statistics agencies, as well as our own calculations using the ISSP (International Social Survey Programme) research module 'Family and Changing Gender Roles'.

Women in the Labour Market and the New Labour Act

As shown in Graph 2, women have slightly higher unemployment rates than men, except for the period between 2011 and 2014, when massive lay-offs happened in typically 'male' occupations such as in construction. Women also have a lower rate of economic activity compared to men: in 2016, women's rate of economic activity was 60.9 % while men's was 70.3 % (Eurostat 2017). Looking after children, and elderly, disabled or incapacitated adults, family/caring responsibilities and other family responsibilities are among the main reasons for women's economic inactivity in Croatia (Eurostat 2016). Research found that the participation of men in the labour market in Croatia is not related to their number of children, while for women, every child increases their chances of unemployment (25 %) and economic inactivity (45 %) (Gelo et al. 2011). In other words, family obli-

Graph 2 – % unemployment by sex, 2007–2016 (annual average)



Source: Eurostat, database lfsa_urban.

gations are real obstacles for women's access to and their persistence in the labour market, as well as any improvement of their overall position (advancement, pay, economic activity in general) in the labour market. A common explanation for higher rates of unemployment and economic inactivity among women is discrimination, the reluctance of potential employers to hire women because of their family obligations, which is only partially the case. This explanation reduces the problem to employers' personal level of humanist enlightenment, which often results in platitudes such as 'promoting gender equality in the workplace'. It is difficult to believe in the success of actions that are inspired by this approach because they overlook the key obstacles to women's equal access to labour market: the lack of affordable childcare and elderly care institutions, which will be discussed below. They cannot be reduced to employer prejudice alone.

Women's level of economic activity is also negatively correlated to their educational level, which particularly affects older women. The gender gap in economic activity rates becomes wider with age: in the 55-59 age group, it is much wider than the overall gap. Women's rate of economic activity in that age group was 47.6 % in 2016, while men's rate of economic activity in the same age group was 64.2 % (Eurostat 2017).

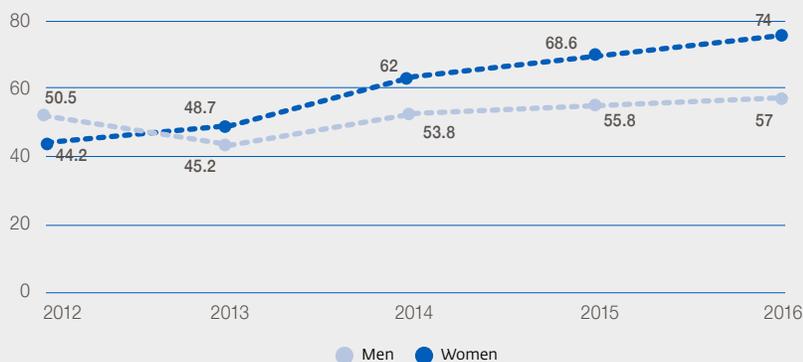
The majority of the workforce in Croatia work in the following sectors: manufacturing (17.5 %), wholesale and retail trade (15.5 %), education (9.7 %), public administration and defence (9 %), health and social protection (8 %) and construction (6 %). Almost 70 % of women work in the following sectors: wholesale and retail trade (17.4 %), education (15.8 %), manufacturing (12.9 %), health and social work (13.2 %) and public administration and defence (8.7 %) (Državni zavod za statistiku Republike Hrvatske 2017b). It is interesting to note that the gender pay gap is above average within exactly those five sectors: it ranges from 15 % to 22 %, while the average gender pay gap has been around 10–11 % the last five years, rising slightly from 10 % in 2010, 2011, 2012 and 2013 to 11.3 % in 2014 and 2015 (Levačić 2013; Državni zavod za statistiku 2017b). This points to the fact that the gender pay gap can be a misleading indicator. It is likely that within those sectors women work in hierarchically lower positions – that the vertical segregation of women in the labour market creates the above-average gender pay

gap in those sectors—, but unfortunately, there is no data available on the hierarchical composition of the particular sectors of the economy.

It is estimated that the grey economy accounts for 10–15 % of the GDP in Croatia, but the exact share of women working in the grey economy is unknown (Švec 2009; Kurnoga-Živadinović and Groznica 2012). According to survey data from the Croatian Employment Service, disproportionately high numbers of women have temporary, unreliable and unreported jobs (HZZ 2011).

The number of temporary employees, that is, employees with a contract of limited duration, has risen from 14.5 % in 2013 to 16.9 % in 2014, 20.2 % in 2015 and 22.2 % in 2016 (Eurostat 2017). While there is almost no difference between the share of men and women in temporary employment overall (the percentage of female temporary employees as a percentage of the total number of employees in 2016 was 22.4 %, while the percentage of male temporary employees was 21.9 %), Graph 3 shows the significant difference between women and men aged 15–24.

Graph 3 – Temporary employees (15–24 years old) as percentage of total employees, by sex (%), 2012–2016 (annual averages)



Source: Eurostat, Ifsa_etpgan database.

As can be seen in Graph 3, the number of both male and female temporary employees 15–24 years old has risen since 2013, but the rise is far more noticeable when it comes to female workers. The rise in the number of temporary employees is a direct consequence of adopting

the new Labour Act in July 2014, which enabled employers to enter into successive fixed-term employment contracts with the same worker. The data confirms the assumption of many opponents of the proposed act, such as labour unions and feminist organisations, who claimed that this provision would make it easier and much cheaper for employers to dismiss their employees, thus making temporary employment a general rule. The Labour Act also made it possible to dismiss pregnant women and women on maternity or parental leave if the company goes into liquidation, while the former Labour Act did not. As a matter of fact it was strictly forbidden in all cases. Thus the reasons accepted to terminate a job contract now include the death of the employer or the termination of the trade by force of law, or deletion of the individual's company from the register in accordance with special regulations, as well as 'business-related reasons', like when a company is being wound up. This amendment will make it easier for employers to dismiss pregnant women and new mothers. Although most of the provisions of the Labour Act negatively affect both male and female workers, many of them are particularly damaging for women, most of all pregnant women and young mothers, whose position in the labour market was already more vulnerable. According to research on pregnant women and mothers of small children in the labour market done by the Ombudsperson for Sexual Equality¹ in 2012, this group of women already faces various difficulties and injustices on the labour market. A total of 40 % of respondents experienced unfavourable treatment by their employer during or after their pregnancy, such as their contract not being extended, being dismissed, having their holidays shortened, not being promoted or being changed to a different job. In addition, 33 % of respondents have been in a situation where their employer forced them to accept worse working conditions, such as reducing

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1 Although this institution has been referred to as 'Ombudsperson for Gender Equality' in CEDAW reports and otherwise, the correct translation would be 'Ombudsperson for Sexual Equality' since the Croatian name for this institution is 'Pravobranitelj/ica za ravnopravnost spolova', where 'spol' means 'sex' and 'rod' means 'gender'. In our opinion this institution should change its name to better correspond to its mission. However, the word 'rod' and its derivatives have been recently scrubbed from the Development Strategy of Zagreb by the mayor, since the word 'rod' was declared problematic by conservative activists who also oppose the so-called Istanbul Convention on these grounds, so changing the name seems highly unlikely in the near future.

holidays, reducing their basic salary, changing their contract to a fixed-term contract or having valuable projects or clients taken from them (Ombudsperson for Sexual Equality 2012).

The Labour Act further stipulates a full-time work week of 40 hours, with the possibility of over eight hours of overtime. However, the provisions for redistribution of working hours have changed, so that the weekly limit in reality increases to 50 hours or 60 hours if agreed upon by the collective bargaining agreement. The Labour Act also introduced the concept of an unfixed working hour schedule, which gives the employer the right to modify an employee's hours according to business needs. An irregular schedule must be in place for at least a month and no longer than a year, and the maximum weekly hours including overtime is still 50 (or up to 60 if the collective agreement so allows). A collective agreement can also detail provisions for an 'hours bank' (a means of recording the accumulation of hours worked) so that during a flexible schedule period workers may work for more than 50 hours and 'bank' their extra hours (Zakon o radu NN 93/14). This amendment will have negative repercussions for women in the labour market due to their overall workload, that is, their difficulties to balance their jobs, care work and housework. According to our calculations based on data from the 'Family and Changing Gender Roles' module of International Social Survey Program (ISSP), women in Croatia spend 50.4 hours a week doing care work and housework while men spend 24 on average (ISSP 2012). According to the survey by the Ombudsperson in 2017, women spend 60 hours a week, while men spend 40 hours a week doing housework and care work (Ombudsperson for Sexual Equality 2017). The most recent sociological research on housework done in 2017 on a sample of employed women who live with their partners, shows that the vast majority, in over 80 % of households, women do all or almost all the housework and care work. In only 16 % of households these jobs were distributed equally; in only 2 % of households these jobs are mostly done by men. Such distribution has a number of adverse effects on careers, professional life and women's health (Libela 2017).

Other important amendments to the new Labour Act make it easier to dismiss workers (facilitated by reducing severance pay and

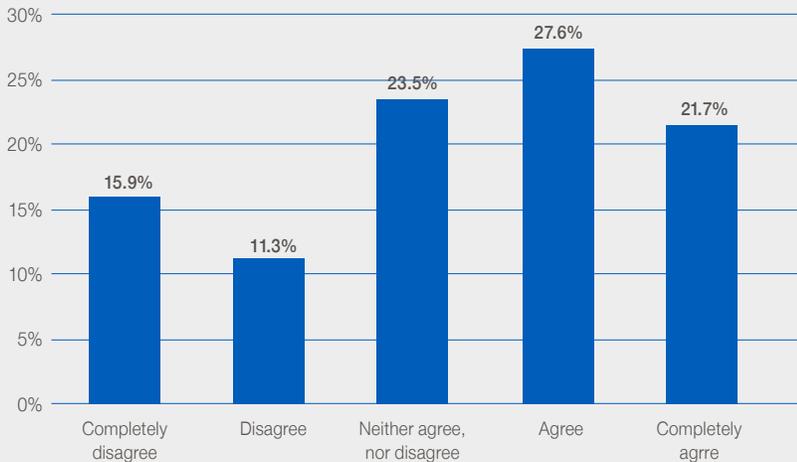
notice and by allowing the dismissal of employees on sick leave), encourage atypical forms of employment, such as recruitment through temp agencies and greater flexibility in hours. Through these and many other amendments, the new Labour Act has limited the power of non-representative trade unions² and diminished labour rights of all workers, but several of its amendments are particularly detrimental for women in the labour market. Since most social rights in Croatia are linked to labour market status, these amendments are likely to affect women's overall social situation as well, which will be discussed in the final part and the conclusion of this paper.

2 Trade unions can legally be representative or non-representative. Those trade unions that are either allowed by an agreement between all trade unions operating at one employer's or have 20 % of all unionized workers as their union members can participate in negotiation of collective agreements. Of course, this presents certain problems for new unions but can also lead to better cooperation between trade unions which is not often the case.

Child Benefits and Allowances, Maternity and Parental Leave

One of the factors that affect the gender (im)balance in housework and care work is the patriarchal notion, supported by policies such as those which discussed in 'Child Care and Care of the Elderly' below, that women are naturally caring. For example, only 27.2 % of Croatians disagree, 23.5 % neither agree nor agree and 49.4 % agree with the statement 'A real woman cares the most about her husband, children and home', as can be seen in Graph 3.

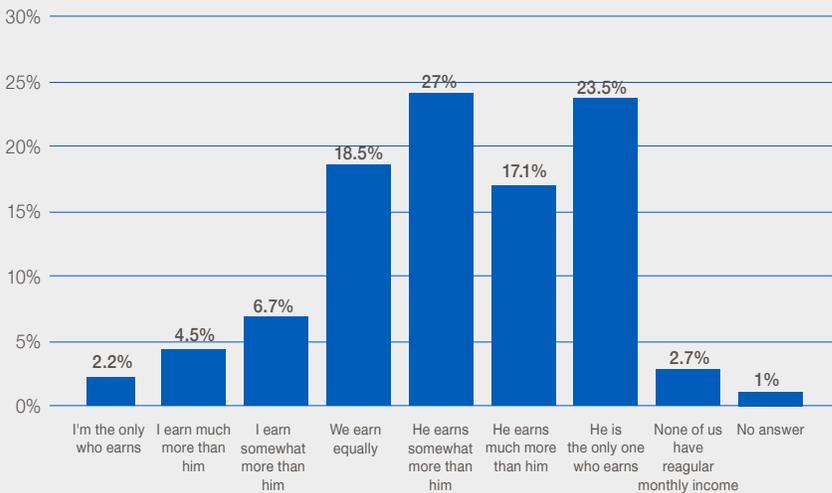
Graph 4 – Dis/agreeing with the statement 'A real woman cares the most about her husband, children and home', 2011.



Source: Ured za ravnopravnost spolova Vlade Republike Hrvatske 2011.

The obligatory maternity leave in Croatia has to be used by mothers until the 70th day after the child's birth, and she has the right to use it up to the child's sixth month. After the 70th day of child's life the father can use the rest of the maternity leave instead of the mother, with the same conditions. After the first six months, parents have the right to parental leave of up to eight months if both parents are employed or self-employed (four months each parent); if only one parent uses the right to parental leave, it can last a total of six months (two months of parental leave are non-transferable). In the case of multiple births and births of the third and each subsequent child, the parental leave can last until the third year of the child's life (Law on Maternity and Parental Benefits NN 59/17). The non-transferable two months for employed and self-employed parents turned out to be insufficient incentive for men to use their right to maternity and parental leave: in 2016, women accounted for 99.8 % of maternity leave users and 95.6 % of parental leave users (Ombudsperson for Sexual Equality 2016).

Graph 5 – Women's monthly earnings relative to their partners' earnings



Source: B.a.B.e. 2012.

Apart from cultural factors such as traditional views of parenting, one of the obstacles to gender equality in this area is the fact that

men usually earn more than their partners do, so their parental leave represents a greater financial loss for the family. As can be seen from Graph 3, 48 % of women in Croatia earn less than their partners, 18.5 % of women earn as much as their partners and 13.4 % of women earn more than their partners (B.a.B.e. 2012). Research has shown that fathers most often use parental leave when their leave pay does not deviate excessively from their real wage (Dobrotić 2015).

The fact that women usually take the maternity and parental leave leads to a significant drop in income of many employed women in the period of increased life costs due to the birth of a child (ibid.). It also reduces women's pensions and creates a wider overall earnings gap between men and women, because the contributions to the pension are calculated using a lower base during the leave. The maternity leave allowance for employed and self-employed parents is the full salary paid six months before the start of the leave, while the parental leave allowance amounts to the full salary paid six months before the beginning of the leave but has a maximum of EUR 530 per month. However, to receive compensation for employed or self-employed parents one has to have 12 months of uninterrupted or 18 months of interrupted service over the last two years. For all those who do not meet this requirement, both maternity and parental leave benefits are EUR 309 per month (Dobrotić 2016a). In other words, employed women who do not meet the requirement to receive compensation for employed or self-employed parents due to insufficient time working receive less than the minimum wage. There have been three changes to the Maternity and Parental Benefits Act in 2011, 2014 and 2017, whereby the duration of the leave and amounts of maternity and parental benefits were increased. Natality concerns are a standard part of the Croatian politicians' oratory repertoire, but since those were isolated changes, we cannot easily attribute them to any broader and more consistent demographic policy. Parents also have the option of using parents' rights to temporary inability to work (so-called sick leave) when their child is sick, which can be arranged through the health insurance provider. If the child is under three, the parent is entitled to 100 % of the previous earnings during the sick leave, and if the child is over three, 70 % of their previous earnings (ibid.).

Parents have the right to a child allowance if the monthly income per household does not exceed 50 % of the budget base. The amount of allowance is calculated according to the income census, which does not exceed EUR 40, except for families with children with disabilities, for children of Croatian war veterans and children without parents. For the third and every child after that, all parents receive the so-called pro-natality addition of EUR 66 per child monthly. The government recently announced the introduction of universal child allowance in 2018, which would benefit parents with low or incidental income because their children would receive regular allowances irrespective of the job status of their parents and their wages. In addition, all health-insured people are entitled to a one-time payment for a new-born for 70 % of the budget base (EUR 309), as well as to a one-time payment from the local government, from EUR 118 up to EUR 396 (Zakon o doplatku za djecu, NN 82/15).

Women currently make up 54.26 % of all pensioners. Some 60 % of them have the right to an old-age pension, 6.78 % the right to a pension for disability and 33.22 % to a survivor's pension¹. In all three categories women's pensions are on average EUR 40-50 lower than men's pensions in the same category. This gap widens to approximately EUR 25 when it comes to people formerly employed by the military, police and as authorised officials (DZS 2017b).

Since Croatia declared independence in 1991, there have been two significant changes to the pension system: in 1998 the government reformed the so-called 'first pillar' and in 2002 it 'added a second, mandatory and fully-funded, pillar' and introduced private pension funds (WB 2011). The first pillar is the PAYGO system financed by citizens' contributions and the state (20 % of gross salary for people over 50), the second one is mandatory for people aged 40-50 (15 % to pillar 1 and 5 % to pillar 2) and the third pillar is the so-called 'voluntary pension insurance' based on individual savings. In 2011 the World Bank suggested certain reforms to stabilise the pension system, among others reducing privileged pension benefits (war veterans and widows) and raising the retirement age. However, when it comes to implementation of these measures 'not only is the political risk high; more importantly, this would likely imply higher poverty rates among [the] oldest cohorts' (ibid.).

More than thirty countries in the world have privatised and financialised their pension systems in the last 30 years. Furthermore, contributions to the funds were or were supposed to be increased and

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¹ Family members of the deceased person are entitled to a so-called survivor's pension.

the retirement age for women was increased. We shifted from inter-generational solidarity to individual responsibility in this regard as well. 'This can be done only in one way: by decreasing the living standards of the working class while squeezing funds for social reproduction. This might result in currently working individuals taking responsibility for the care of previous workers by limiting the resources necessary for their own reproduction' (Saritas Oran 2017).

The current provisions for old-age pensions in Croatia in 2017 are to be 65 years old (men) and 61 years and 9 months old (women) with a total of 15 qualifying years (Slunjski 2012), although there have been multiple requests from the International Monetary Fund in the past 10 years to raise the retirement age to 67. This only sparked protest from various organisations, most of all, from the Women's Front for Labour and Social Rights² which demanded, among other things, new legal measures when calculating pensions for people who performed unpaid labour usually considered a social service. At this pace, the pension age gap between men and women should close in 2029 with progression of three months more for women every year. However, the '[a]verage pension of women is 78.7 % the average pension of men, with the gender pension gap at around 22 %' (Bodoriga-Vukobrat and Martinović 2017, p. 23–24). Ironically, the reasoning behind the decision of the Constitutional Court of Croatia in 2007, when it declared that the retirement age of men and women should be equalised, was a veiled argument that said the equal retirement age is a matter of sexual equality, completely disregarding the everyday burden of unpaid labour and child-rearing traditionally falling to women and insisting on the fact that women have longer lifespans.

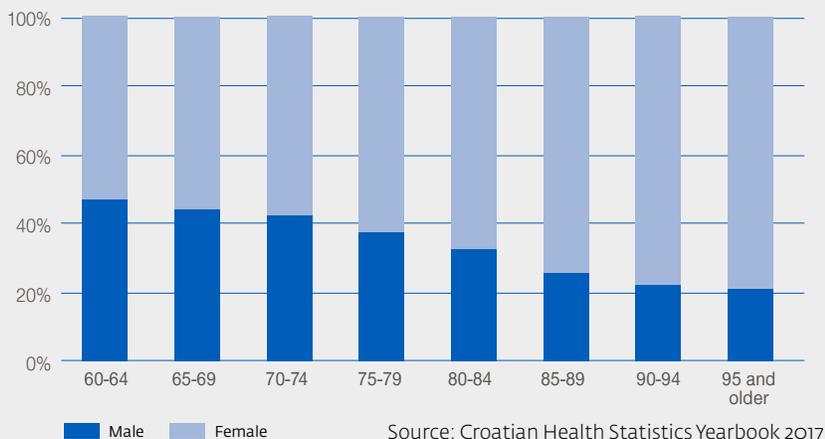
Nonetheless, according to the World Bank, this is still not harsh enough: 'rais[ing] the female retirement age to 65 aims to reduce the gender discrepancy but transitioning at three months a calendar year

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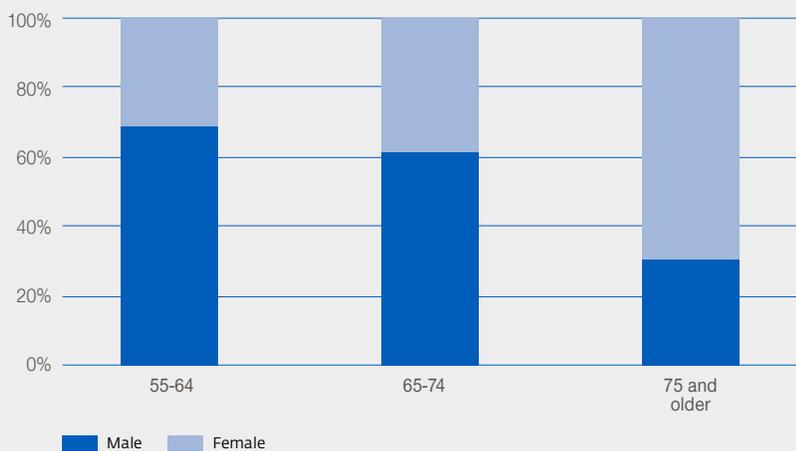
2 The members of this informal organisation (Ženska fronta za radna i socijalna prava) from 2013 to 2015 were: Autonomous Women's House Zagreb, Organisation for Worker's Initiative and Democratisation, Centre for Women's Studies, Centre for Education, Counselling and Research, 'Ready to Work' Initiative, Kontra, Coordination of Women of the Croatian Association of Worker's Unions, Women's Committee of Independent Croatian Unions, Roda (Parents in Action), ROSA (Centre for Women War Victims), Trade Union of Croatia, Union of Retirees of Croatia, Association to Help and Educate Mobbing Victims, Women's Section of the Union of Autonomous Trade Unions of Croatia.

is clearly too slow [...]. By 2030, when the transition to the statutory retirement age of 65 is complete, female life expectancy would already have increased by two or three years' (2011). One other suggestion also speaks volumes, namely the 'highly redistributive' nature of the Croatian pension formula. Further changes to this feature would surely not benefit women who are paid less and therefore contribute less to the pension system.

Graph 6 – Population by age and sex, 2011 census



Graph 7 – Death by sex, 2015



a) Early retirement

The pension age for men is 60 years and 35 qualifying years and for women 55 years and 30 qualifying years. Monthly penalisation for early retirement is between 0.34 and 0.15 % (depending on the number of qualifying years) (Slunjski 2012). To compensate for the earlier possible retirement for women, which could lead to an even greater gap in pensions between men and women, certain incentives to encourage people to wait until their retirement age are only offered to women when they turn 65. Be that as it may, the availability of early retirement largely accounts for extremely high inactivity of women aged 50–60. When it came to widespread job loss because of factories closing down due to the privatisation of previously state-owned companies as well as cuts to public services (which mostly employ women), the women were usually the first ones to leave, since they could retire earlier than men (Petrović 2013). Care work has also been named a key factor in early retirement or inactivity of women aged 45–59 (PRS 2017). As stated in the European Quality of Life Survey 2012 (as cited in PRS 2017), 27 % of female Croatian respondents 35–50 and 50–65 years old claim that their careers have been negatively impacted by their care work for elderly or disabled people, which is the highest average in Europe. One does have to wonder if the proposed measures, such as the request to raise the retirement age or to enable retirees to work while retired, will actually help women, especially considering the fact that we still do not consider housework and care work within our families as socially productive work. Moreover, some measures which could lead to improved activity of women on the labour market include the shared burden of unpaid labour, whether through communalization of care or a better distribution of this burden among female and male members of families and/or communities.

b) Pension gap

Lower pensions for women are certainly a product of their lower activity on the labour market, as well as women being the primary caretakers. One should also not disregard the fact that although women are as educated as men, most of them work in lower paid sectors (service, care, health, education, administration) where they make up the ma-

majority, but rarely reach leading positions (PRS 2013). To make matters worse, in the long term, partially because of the most recent Labour Law, more and more women will start to work part-time and young women of child-bearing age are now mostly employed with fixed-term contracts and openly discriminated against because of this (PRS 2017). Furthermore, as previously suggested, most of the care work falls to women and most women still consider the role of caregiver their most important, if not their only, role in society. Fewer hours leads to lower pay and hence to lower pensions and increased risk of poverty in the future (PRS 2016). 'In a nutshell, the structure of labour markets which do not welcome women or do not provide equal income for them are the main underlying reasons for lower pension benefits of female retirees' (Saritas Oran 2017).

These factors, along with others, make women more vulnerable to poverty: while in 2016 the overall percentage of women at risk of poverty or social exclusion was 28.6 %, the percentage of men at risk of poverty or social exclusion was slightly lower, 27.3 %. There is a wider gap between men and women in the age group of 55 years or over, where the percentage of men at risk of poverty or social exclusion is 28.5 %, while it is 35 % for women.

In the last five years, the gender pay gap has risen slightly from 10 % in 2010, 2011, 2012 and 2013 to 11.3 % in 2014 and 2015 (DZS 2012–2017). The vertical and horizontal segregation of women in the labour market is the main cause for their wages being lower overall compared to men's, or for the so-called gender pay gap: a majority of women work in hierarchically lower occupations in wholesale and retail sector, education, health and social care. Part-time employment is not that common in Croatia, but the percentage of women working part-time jobs is higher (7.1 %) than of men (4.4 %) (Eurostat 2017).

c) Croatian governments' strategic plans

In the last two years, Croatia had three different prime ministers and as many ministers tasked with labour, social and pension policies. The three overlapping strategic plans from the Ministry of Labour and Pension System (the ministry itself changed names between different governments) relate to 2016–2018 (MRMS 2016), 2017–2019 (MRMS 2016)

and 2018–2020 (MRMS 2017) and seem to be short term in their range and vision. All the strategies propose or state pushing the retirement age further back, more demanding conditions for disability retirement, longer stay and/or participation of retirees on the labour market, penalisation of early retirement, betterment of professional rehabilitation, etc.

All the same, the current at-risk-of-poverty rate signals that the standing of people 65 years and older is already dire with the overall rate being 28.0 %. The rate for women was 30.8 % and for men 23.8 % (DZS 2017). This is certainly a consequence of overall longer life spans of women which results in them living by themselves, while having to sustain themselves more and more with meagre family or early retirement pensions. Furthermore, the guaranteed minimum compensation covers only 12 % of the population at risk of poverty (approximately EUR 66 monthly which is not enough to cover necessities) and has not been adjusted for years. Although there have been requests from the ombudsperson to introduce social pensions or state support for elderly people without income, this has not been taken up by any government. At the moment there are 12,478 elderly people without any income, but there may be as many as 21,765 of them if we also include elderly people who receive the guaranteed minimum compensation (PP 2017).

Women's reproductive health

a) Women's reproductive health in general

In 1993 a new Health Care Law was enacted and in 1995 primary and secondary health care were separated. The idea was that this separation and privatisation of medical specialists would lead to better health services, including gynaecology and obstetrics.¹ Now it was also possible, under the guise of 'free choice of doctor', to choose a doctor independently of one's residence which was formerly not the case. The privatisation of gynaecological care led to a decrease in the number of gynaecological exams covered by HZZO (the Croatian Institute for Health Insurance) and an increase in the number of exams in private practice. For a patient's gynaecological care to be covered by HZZO, the gynaecologist's office has to conclude a contract with HZZO. For example, in 2015 HZZO had to sign 51 contracts with gynaecologists' offices to meet its quota and to spatially cover all the patients in need of gynaecological care. In practice this means that many women cannot find a gynaecologist who has a contract with HZZO and have to pay the 'market price' for regular gynaecological exams² (Vračar and Weygand 2015). Also, since those gynaecologists who do have a contract already have too many patients,³ many women have to go to private practices

1 Due to the privatisation process, especially of certain health care sectors, which became even worse because of the EU's influence, gynaecological health care became as privatised as dermatological or dental health care. These sectors are a part of Croatia's burgeoning 'medical tourism' which is supported by the state and also enjoys public investments (like private health care in Croatia in general).

2 Yearly exam, including consultations, exam and pap smear would cost around HRK 600 or EUR 80 at a private practice (Matejčić 2017).

3 Average number of patients is 5,500 per gynaecologist who has a contract with HZZO. A gynaecologist from Rijeka holds the current 'record' with 8987 patients (Matejčić 2017). This would mean that every gynaecologist would have to perform 100 yearly regular exams every week to successfully exam all their patients at least one in a year.

in emergencies or for pregnancy tests or to control pre-existing conditions, sometimes leading to those conditions getting worse and possibly with fatal consequences. Unfortunately, on top of all this, there is a stigma tied to women, especially young women from rural areas, who use gynaecological services as immoral or promiscuous and regular gynaecological exams are still not considered to be the same as visiting your primary health care physician.

When it comes to women's reproductive health in general, in 2016 there were 603,1/1,000 (or 552,164) preventive medical exams for women of child-bearing age in private practice and in practices which have contracts with HZZO. Out of 1,677,980 women who have chosen their gynaecologist, only 561,060 or 33.4 % of them actually used gynaecologist services in 2016. The number of consultations because of family planning or access to contraception (118,569) has risen 2.9 % from 2015. In comparison to the total female population of child-bearing age this is not a significant rise. Women in Croatia still do check-ups on their reproductive health primarily because of diseases of the genitourinary system (50.9 %) (CHSY 2016, 2017), which is also worrisome. HZZO covers health care related to pregnancy, childbirth and artificial insemination, as well as preventive and curative care related to HIV and other sexually-transmitted diseases and broadly defined preventive women's healthcare. This means that HZZOs should cover all women-specific care, but there have been reports of pregnant women who had to pay for their check-ups, as well as women paying for ultrasound exams. The following gynaecological services should by all regulations be covered by health insurance: first and control exam, systematic check-ups for pregnant women, prescription of medicine and referrals, consultations, pap smears, insertion and removal of IUDs, transvaginal ultrasounds, breast ultrasounds and HPV vaccines.

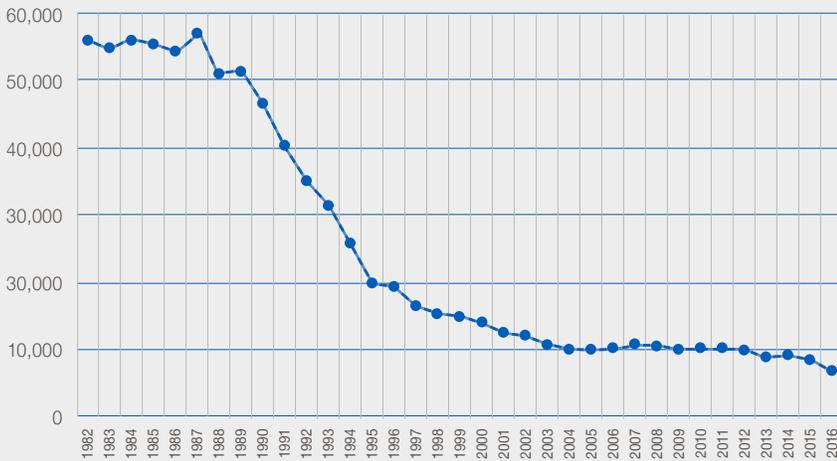
When it comes to strategic plans for development of public health women merit a mention only when it comes to preventive campaigns against HPV and related cancers (in Croatia more than half of the population has some strain of HPV and every other day a woman dies of cervical cancer) and breast cancer. Be that as it may, these campaigns are narrowly focused and there is no mention of possible solutions or any kind of elaboration of what the material conditions

are that led to this prevalence of HPV, for instance, and insufficient pap smears in women (Vračar and Weygand 2015)

b) Right to abortion and contraception under attack

In March 2017 the Constitutional Court of Croatia ruled that the current law on abortion (Law on Health Measures on Exercising the Right to Free Decision on Pregnancy) does not violate the Constitution of Croatia 25 years after the first claim against the law by pro-life activist Ružica Čavar in 1991. However, the government has to pass a new law on abortion in the next two years for following reasons: the law should be 'modernised' in accordance with the new legal and institutional framework and the lawmaker should prescribe educational and preventive measures to assure the exceptionalism of induced abortion (Ustavni sud Republike Hrvatske 2017).

Graph 8: Number of abortions in Croatia, 1982–2016

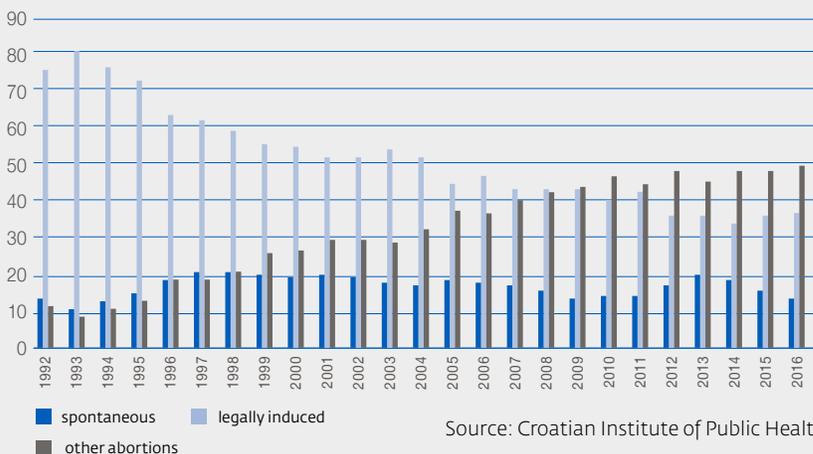


Source: Croatian institute of Public Health

While it can be presumed that the new law will be stricter and prescribe certain measures, such as consultation with a mental health specialist or a priest or a wait time, there will most likely not be a complete ban on abortion or it will be restricted to cases of incest, rape and malformation of the foetus. Current public opinion is still not in favour of a complete ban on abortion, but recent research on young peoples'

opinions about abortion have been worrisome. According to Ilišin, Bouillet, et al. (2013) 38.9 % of respondents are in favour of legal abortion without any restrictions, 28.7 % only for medical reasons, 12.4 % are for complete ban and 20 % are undecided. At this time women seeking abortion have to plead to a commission at the hospital in question only if she is past 10 weeks of pregnancy and the wait period is not prescribed by law (although the wait period exists because of the necessity of having a previous medical check-up). This still does not have a significant impact on the availability of abortion, but if one were to prescribe consultations with a mental health professional or a priest (as some pro-life organisations are demanding), this could have a negative impact especially on women who do not live in large urban areas since this would mean they would have to travel at least three or even more times to undergo an abortion (consultation with a gynaecologist, necessary medical check-up before the procedure, consultation with a mental health professional or a priest, possibly consultation with the commission and then the abortion itself). In this way these pro-life organisations can still claim that they care about both the unborn child and its mother/carrier *and* slowly and systematically limit the right to abortion, as is already happening all around the world. Public opinion is still not in favour of a full prohibition on abortions which is why these organisation have to tread carefully for the time being.

Graph 9 – Abortions by type, Croatia 1992–2016



Source: Croatian Institute of Public Health

According to the Croatian Health Statistics Yearbook 2017 there were 6,904 reported abortions, which is a decrease from 2015. There were 2,520 induced abortions (36.5 %), 944 spontaneous abortions (13.7 %) and 3,440 other abortions (49.8 %). Most of the women requesting an abortion already had children (47.6 %) and were 30–39. The number of women under 20 requesting abortion has been in decline, from 9.2 % in 2007 to 7.1 % in 2016. The number of abortions per 1,000 childbearing-aged women and the number of legally induced abortions per 100 childbearing women has dipped since 1990, that is 1,994. However, although the number of abortion has been in steady decline since 1982, there has been a significant increase in the number of ‘other abortions’,⁴ while the number of spontaneous abortions has not varied significantly. In 1996 the number of other abortions was 19.2% and today this category makes up almost 50 % of all abortions. Gynaecologist and activist Jasenka Grujić commented ironically that this would certainly require urgent epidemiological analysis (Bertek 2017). According to Bijelić and Hodžić (2014) this is a product of medical professional manipulations. In 2010 ten medical specialists were arrested, convicted and banned from medical work because they were scamming the Croatian Institute for Health Insurance. These doctors were receiving patients who wanted to have an abortion at night, reporting the pregnancies as abnormal although they were healthy but unwanted, taking the money from the women *and* claiming the money from the Institute for Health Insurance. One can only presume that this is a consequence of the rising social stigma of abortion and the hostile rhetoric of right-wing initiatives accusing women seeking abortions of murder, selfishness and promiscuity.

Although there significant legal restrictions are not probable in the near future, access to abortion will be eroded even more. CEDAW warned Croatia in their 2015 report that this presents a severe violation of women’s rights. The research of the Croatian Ombudsperson for Sexual Equality on the availability of legally induced abortions found that in 30 out of 33 health institutions licensed to perform abortions, legally induced abortion could be performed in 24 of them (80 %) and

4 This category should refer to extra uterine pregnancy, *hydatid mola*, other abnormal conception products, non-specified abortions, etc.

that in six of them this was not possible because of staff's conscientious objections (PRS 2014). In 2016 out of 33 such institutions, four had not recorded any induced abortions (in Knin, Metković, Našice and Vinkovci) (CHSY 2016, 2017). In 2014 out of 375 medical workers who could perform abortions, 195 (52 %) of them were conscientious objectors and 13 refused to perform the procedure for undisclosed reasons. Also, the procedure itself is not covered by the Institute for Health Insurance and the price varies from HRK 990 to 2,500 (approximately EUR 132 to 333).

The number of conscientious objectors has presumably been rising since the mid-1990s. As we stated above, the doctors who performed abortions after hours and put the money in their own pockets did not need the excuse of being a conscientious objector since they could claim that these pregnancies were abnormal. Although there have been some media speculations that these conscientious objectors performed abortions in their own practices, this has not been proven. The doctors do not have to take the risk of being suspended or losing their license for performing abortions illegally (since abortions can, according to law, only be performed legally in public hospitals and one other private health institution which has a licence to perform abortions) considering the fact that they only have to report the reason for abortion in the category "Other" which relates to dangerous medical conditions. In this way they can allegedly manipulate the HZZO and pocket the fee for performing the procedure. The Women's Network Croatia conducted first research on availability of abortion (Ženska mreža Hrvatske 2005) in 2005 when out of 33 institutions licensed to perform abortion 12 (36 %) did not. The Ministry of Health had to urge those institutions to find outside medical staff willing to perform the procedure because of the surging number of conscientious objectors which only partially solved the problem. If you were a woman seeking information on abortion, the first web page shown on Google.hr is klinikezapobacaje.com ('abortion clinic'), a web page which claims that abortions can cause uterine, breast, ovary and liver cancer, post-traumatic stress disorder, sexual dysfunction, drug and alcohol addiction, eating disorders, child abandonment and divorce, pregnancy and birth complications, suicidal thoughts, suicide and, of course, death from other causes. The government did not characterise web pages like this

as harmful to public health and do not consider them illegal. The contact listed on the webpage lead to people connected to pro-life organisations like Vigilare, 'Djetešce, na sunašćel' and Betlehem.

In 2013 there were also the first recorded cases of conscientious objectors among pharmacists. The Croatian Chamber of Pharmacists prescribed that women requesting emergency contraception had to fill out a form with their personal information (including their identification number), although the contraception did not require a prescription. This has changed since and the pharmacist can only consult with customers.

c) Birth practices

In 2016 the new Croatian government changed the name of the Ministry of Social Policies to the Ministry of Demographics, Family, Youth and Social Policy. There has been a lot of talk of demography and the fact that the Croatian population is getting older. Of course many people blame young women and their unwillingness to have more children, to give birth early enough or at all for this.

The Ministry still has not come up with any significant or relevant strategies to solve this question, especially considering the fact that the measures discussed seem superficial and temporary and would not permanently improve birth rates. These measures do not take into consideration the position of young women in the labour market, the fact that Croatia is the leading country in the EU in precarious employment (over 8%) and in economic reasons for the migration of young people to other European countries.

All maternity wards in Croatia currently hold the Unicef title 'Friend of Children' which means they meet the so-called 'Ten Steps to Successful Breastfeeding'. These steps are understandably focused on the newborn child. In 2017 four hospitals were chosen for the pilot project 'Friend of Mothers and Children'. Most of the proposed steps are currently not a common practice in Croatian maternity wards.

However, the NGO Roda ('Parents in Action') organised the campaign 'Let's End the Silence' in 2014 and asked women to simply post their experiences of childbirth written in their own handwriting on Roda's page. Verbal and physical abuse, Kristeller's manoeuvre which can

harm both child and mother, the prevalence of episiotomy (according to official data in 35 % of cases and according to Roda's data in 60 % of childbirths), low rate of accompaniment during childbirth (30–50 % of cases) are just some mother-unfriendly practices in Croatian maternity wards (Drandić 2016). Furthermore, from 2015 to 2016 the number of Caesarean sections rose 2 % and in some hospitals it rose 5 % in a year, according to rodilista.roda.hr.

Croatia is at the bottom of the European Union scale of coverage of children by pre-school education: in 2015, 19.9 % of children were enrolled in nurseries and 57 % of children in kindergartens. Kindergarten and nursery capacities are terribly uneven. The city of Zagreb is the only county that has reached the Barcelona objective which prescribes that all EU member states should cover 90 % of pre-school aged children in kindergartens by 2020. While only in nine (of twenty overall) counties more than 50 % of the children go to kindergarten, in some parts of Croatia there are no kindergartens at all: currently there are no organised kindergartens in 76 municipalities and cities (Dobrotić 2016b). The monthly amount that parents pay for a kindergarten generally ranges from EUR 53 to 106. The price of kindergarten depends on the possibilities of local budgets, and each unit makes a decision on how much of the total cost of the kindergarten (ranging from EUR 186 to 438) it will co-finance and how much the parents will participate. In that way, kindergartens in four local units are completely free, while in some kindergartens the price for the same program is almost EUR 133 (ibid.).

Another problem that indicates the insufficient capacities of the pre-school education system in Croatia is the lack of staff: although the State Pedagogical Standard prescribes a group of five children in the youngest or fourteen children in the oldest age group, in large cities this number often exceeds twenty children. In addition, kindergartens are often poorly equipped with didactic and other materials (ibid.). The Union of Education, Media and Culture (SOMK) organised several protests in 2016 and 2017. They emphasised that educators are under

constant physical and mental strain and demanded the application of the State Pedagogical Standard, which prescribes smaller groups of children. They also urged the government to open new kindergartens in Zagreb and sought financing for teaching and other materials in kindergartens.

In an attempt to remedy the resultant fact that in Croatia, according to estimates, about 10,000 nannies (mostly women) work unreported (Novi list 2015), the government in 2013 adopted the 'Law on Nannies' (NN 37/13). The law introduced registered provision of care for children up to 14 years of age in a residential or commercial space, or in the living space of a parent. In its explanation of the need to introduce this type of childcare services, the Ministry of Social Policy and Youth stated that there is a serious lack of places in pre-school institutions within pre-school education, and that the funds for establishing pre-school institutions are limited and insufficient (Dobrotić 2016b). Unsurprisingly, it turned out that the financial resources of the 'nannies' themselves were also limited and insufficient to solve the problems of the pre-school education system: two years after the law was introduced, there was only 23 registered nannies. Only 13 % of cities and 3 % of municipalities co-finance nannies, while for the vast majority of nannies the cost of starting their own business in their own home is too high, around EUR 2,650. In addition, nannies' services, whose monthly price ranges between EUR 265 and 330, are unaffordable for most parents.

In September 2016 Grad Zagreb County adopted the Decision on Cash Grants for Parents-Caregivers, whereby one of the parents who care for at least three infants (of which the youngest is pre-school age) can receive a monthly financial allowance equal to an average monthly salary, or a wage for parenting. The only requirements for the grant are that the parent-caregiver and the children must live in the same household and that the parent be unemployed at the time of filing the application. In 2016 the City approved 1,761 requests, of which 1,584 (89.94 %) were women (Ombudsperson for Sexual Equality 2016). A representative of the City of Zagreb 'boasted' that approximately 2,500 people whose children were using kindergarten services in Zagreb took advantage of this measure and in this way 'alleviated' the overcrowding

problem in Zagreb' kindergartens. Experts and the Ombudsperson consider that this measure will have a negative impact on women through their access to the labour market in the long term. It is known that there is a positive correlation between the availability of pre-school education and the participation of mothers in the labour market, while this measure encourages the stay-at-home mother model. Some experts warn of the additional problematic dimension of introducing this form of childcare, as well as the nannies instead of institutionalised pre-school education which ignores the educational dimension, particularly important from the point of view of creating more equal opportunities for children, especially children from families with lower socio-economic statuses (Dobrotić 2015, 2016b).

Another important factor in the conflict between family responsibilities and paid work is care for elderly people. According to one study, the most frequent caregivers are spouses (mostly wives), and adult children (more often daughters than sons) (Podgorelec and Klempić 2007). Only about 2 % of the population over 65 are in public homes for the elderly and infirmed. The problems of the Croatian system of care for the elderly are numerous and range from the lack of capacity, unaffordability and quality of care to the difficulties associated with the system's fragmentation and lack of transparency (Dobrotić 2016a). User prices of state and county homes for the elderly range from EUR 240 to 500. A major problem of public homes for the elderly is their low availability: no capacity and long wait lists. When determining the right to housing in state and county homes for the elderly, property or income censuses or health status are not taken into consideration, only the date the application is submitted.

There is a clear retrenchment trend of the welfare state in this area, which is visible in the discourse behind recent legal changes. These changes are planned with the financial and professional assistance of the World Bank, which emphasises the need to promote the market in care and for-profit service providers and greater individual and family responsibilities in caring for the elderly (ibid.). The same discourse can be seen in an analysis by the Institute of Public Finance: according to its authors, when planning future reforms, the goal should be to make the system of care for the elderly 'fiscally sustainable', while

the 'supply and demand in the market for long-term accommodation for the elderly' is pronounced to be 'unadjusted' (Bađun 2016). Reforms of the system in the last twenty years have mostly sought to reduce the role of the state: since 2003, 78 % of new capacity comes from non-state providers, mostly private, whose prices range between EUR 530 and 1,050 monthly (Dobrotić 2016a). Due to several changes in the Social Welfare Act in 2013, 2014, 2015, 2016 and 2017, more and more private homes for older people are opening: from 2004 to 2014, the total number of requests for placement in old-age homes increased by 52,725. The capacity of state homes increased by only 426 places in the same period, while the capacity of private homes increased by 2,552 places (Bađun 2016). According to numerous reports in the press, public homes usually offer a higher level of security and quality than most private homes. Public homes have more employees (according to the new rulebook, only one nurse and one caretaker must be employed in private homes per 20 beneficiaries), maintain clear criteria and are under constant supervision, both in-house inspections and trade unions, collective bargaining agreements and other agreements (Glas Slavonije 2015).

In 2013, project funding for home assistance and care programs was abolished, resulting in a substantial fall in coverage of the elderly by these programs within the social welfare system. According to the Social Care Act, home assistance and care will only be provided for people whose parents, spouse or children are unable to provide help (Zakon o socijalnoj skrbi NN 16/17). In other words, the care obligation is transferred to the end user and family members: there is an increasing individualisation of care (Dobrotić 2016a). Of course, this leads to the use of the services of unreported (female) caregivers. In fact, the government has recently announced the *Zaželi* (Make a Wish) project which is supposed to employ 3,045 women to work as caregivers of the elderly and disabled in their communities. The program will be financed with the European Social Fund, with the stated aim of reducing women's unemployment, focusing on women over 50, women with only secondary education, women with disabilities, women victims of trafficking, drug addicts, women victims of family violence and homeless women (Ministry of Labour and Pension System 2017).

Our brief overview shows that in the analysed policy areas there were no cuts in cash transfers, on the contrary, some, such as maternity and parental benefits, were significantly increased recently. Nevertheless, there are clear trends of state retrenchment and individualisation of care, especially in the area of elderly care. These trends are fuelled either by not investing in the system, as is the case with kindergartens and homes for the elderly, or by the termination of funding, as is the case of home assistance and care programs. For users, the alternative is using expensive private facilities or turning to (often unreported) individual caregivers whose work arrangements are often precarious and irregular. For those who cannot afford such services, the care responsibility is being transferred to family members, the majority of whom are women (mothers, wives and daughters).

The term 'family' in Croatia is inevitably connected with the NGO 'In the Name of Family'¹ and domestic violence. On the one hand, there is a right-wing movement in Croatia which insists on the 'sanctity' of the institution of family and the foetus' life. On the other hand, we have violence against women which is impossible to overlook and which stems from conservative values prominent in Croatia and the systematic oppression of women when it comes to their life choices, from the right to abortion, sex outside of marriage and divorce to the right to have fair compensation for their work and access to social services.

From today's perspective, a couple of things coincided and made the contours of today's social climate visible: the rising prominence of conscientious objectors in health services and more explicitly the so-called referendum on marriage prompted by 'In the Name of Family'. This constitutional referendum was held on 1 December 2013. Out of 37.9 % of eligible voters who cast their votes, 65.87 % of them voted 'yes' and 33.51 % voted 'no' to following question: 'Are you in favour of the constitution of the Republic of Croatia being amended with a provision stating that marriage is matrimony between a woman and a man?'. The Family Law and the Law on Same-Sex Unions (from 2003) were

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¹ In the Name of Family was at first a 'citizen's initiative' which became an NGO and is currently funded by the National Foundation for Development of Civil Society. According to their web page, it is an organisation which promotes 'general' human values: family and marriage. In reality, it is a conservative, pro-life, homophobic and transphobic organisation cunningly using all the possibilities of the legal system to its advantage. Its founders unsuccessfully tried to become members of Croatian Parliament, Sabor, and later contributed to the election reform, insofar as the candidates have to be voted in 'directly'. This has not yet led to their election to the Sabor, since they barely exceeded 1% of all votes but the party Hrast whose former member was the leading figure of this movement, Željka Markić, managed to enter into a coalition with the ruling party HDZ.

also amended afterwards to correspond to the changed article of the constitution. At this moment marriage is defined as 'a union of a man and a woman' because of this vote. This amendment was used as a way to prevent legalisation on marriage between same-sex partners, since the attempt to legalise it would require changes to the article and in the current climate it seems this will not occur for some time. The conservative activists effectively prevented the legalisation of same-sex marriage because any court would refuse this appeal, deeming this change to the Family Law unconstitutional. However it is important to note that although this amendment passed, this initiative actually cleverly used changes to the Law on Referendum at the time. Before its accession to EU, Croatia changed its Law on Referendum insomuch as it was no longer required at least 50 % of eligible voters to participate in the vote for it to pass. Now it is only necessary for 50 % of those who voted to show up for the vote to pass. In effect, this change to referendum law, because of their fear that EU-ascension would not pass by popular vote, 'gave wings' to the rise of conservative policies and their power.

At first, it did not seem as though this was a definite win for the right-wing initiative, since on 15 July 2014 the Croatian Parliament voted 89 in favour and 16 against the Law on Life Partnership of Same-Sex Partners. Still, same-sex people in life partnerships cannot legally adopt children and in 2017 a gay couple sued the state for discrimination since the Centre for Social Services would not allow them to begin the adoption process on the grounds of 'demands not being fulfilled' (Tomljenović 2017). Couples living in extramarital unions are also discriminated against on this basis. Extramarital unions are regulated by the Family Law which says that the couples in question have to live together for at least three years or for a shorter time period if they have a child together. However, in 2017 only 73 children were adopted in Croatia. From 2007 to 2017 there were, on average, 109 adoptions. This means that a successful adoption process is also hard for married, heterosexual couples. One of the reasons for low adoption numbers are often changes to family law and adoption process, as well as the practice that children cannot be adopted if their parents have not lost or relinquished their parental rights. According to persons working with children with-

out parental care, there are many children who should be adopted but are not because the parents very rarely and after many years of court procedures lose their right to live with their children.

The current name of the proper ministry when it comes to family relations is 'Ministry of Demographics, Family, Youth and Social Policy'. In its current approach to the areas it regulates, the ministry has stuck to the order of the named areas with social policy coming in last. The large economic migrations of young people to the EU has given rise to demographic panic further incited by various demographic experts, the Catholic church and the president of Croatia, Kolinda Grabar Kitarović. Instead of finding proper ways to keep young, well-educated people state-side by giving them adequate support (like better protection of young mothers in the workplace, living wages instead of failed employment measures, better regulation of seasonal work and the rights to workers in tourism,² more places in kindergartens and one-shift schools which would cater to employed parents and so on), the past and current governments have persistently pointed out to part-time employment for women and private child care as a solution to these problems, without taking into account the economic side of the issue. But this is also an area that sheds light on ever prominent nationalism and the still persistent patriarchal notions of womanhood. Therefore, any protection given to women is, first of all, grounded in their role as mothers, wives, obedient daughters and the primary caretakers of all family members.

A further shift to the right is unmistakable when one looks to the 'leaked' draft of the new Family Law. The draft contained more than a few problematic notions: for example, a couple without children is not to be considered a family, people living in extramarital unions could adopt children only under special circumstances, the law would have

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2 Tourism income made up 18.9% of Croatian GDP in 2016. The need for seasonal workers has, according to the Croatian Employment Office, grown from 21,502 people in 2006 to 40,409 in 2017. However, the number of people available did not cover the proclaimed needs of employers in 2017, although in 2006, for instance, there was actually a surplus of people. This is probably tied to the migration of people from Slavonija to Europe where they are employed full-time during the whole year which is not the case with low-paid, physically straining seasonal work. Employee's associations are pushing for more seasonal workers from Bosnia and Herzegovina and other neighbouring countries to compensate for this loss of a cheap and disenfranchised labour force.

prescribed obligatory marital mediation in case of divorce and that the parents have the right and freedom to autonomously decide on their children's education. For example, the children could be excused from participating in parts of the school's programs not compatible with their parent's beliefs, such as in healthcare and sexuality programs). This has been one of the reasons why the Croatian government succumbed to attacks from conservative NGOs and cancelled the changes to school programmes that also included citizen's, healthcare and sexuality modules. All these notions have been amended, but some problematic ones still persist: children born out of wedlock are still discriminated in this law, the issue of support after the divorce and child support has not been adequately solved, among others.

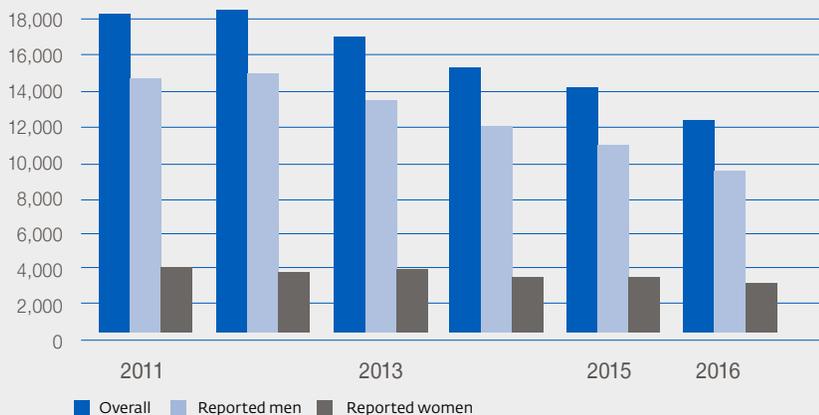
All of this has been in keeping with the feeling that family and marriage, defined in the narrowest sense, should be preserved at all costs, including the stipulation that couples filing for divorce should go to counselling (allegedly not in cases of domestic violence, but this also needs to be proven which means that the survivors of domestic violence would be forced to go to counselling with their abusers if no legal complaint had been lodged or court decision handed down). This presumed 'sanctity' of these (patriarchal) institutions is in line with the argumentation of the right-wing activists used during the campaign to limit the definition of marriage in the Constitution. Be that as it may, to speak of 'retraditionalisation' or 'repatriarchalisation' of Croatian society could be considered incorrect. Namely, although women have gained significant rights in ex-Yugoslavia, even of a significantly larger scope than anywhere else in the West at the time, the cultural norm has not changed significantly most of all for women living in rural areas which were circumvented when some of these measures were implemented. To speak of these aspiring re-processes would disregard different personal experiences and family traditions of these women. It is not a coincidence that today local governments that are not exactly well-off have to pour more funds into women's shelters and day-care centres for children which provide sufficient nourishment for poor children and tutoring. This is a consequence of uneven development and the insufficient reach of measures aimed at women. To simplify: they have to invest more in 'emergency measures' when it comes to violence against

women, because there cannot be any talk of 'repatriarchialisation' and 'retraditionalisation' in these areas, when processes of 'depatriarchialisation' and 'detraditionalisation' have never come to fruition (like the failed agricultural reforms in ex-Yugoslavia which led to somewhat traditional forms of organising in rural areas, allowing no repose for those who went against patriarchal notions which underlined those forms of organising peasants' lives in larger family units) (Sklevicky 1996). This is not to say that women had not gained a lot in Yugoslavia; in fact their engagement in politics and fighting during and after the war to build a new state led to women gaining rights such as right to vote, the right to education or the right to divorce. Women's rights in ex-Yugoslavia which were then overtaken by the states established in the 1990s stem directly from women's contributions to building of the new state and their struggle against fascism during World War II.

Violence against women

As reported in **November** 2012 by Rashida Manjoo, UN Special Rapporteur on Violence against Women, its Causes and Consequences during her ten-day fact-finding mission to Croatia, 'domestic violence affects as many as one in three families, and up to 40 percent of Croatian citizens know at least one victim of domestic violence'. According to police statistics, 45 cases of domestic violence are reported every day in Croatia, with the number rising to 60 on holidays, when family tensions often run high (B.a.B.e. and Women's Room 2015).

Graph 10 – Number of people reported for domestic violence by sex, 2011-2016

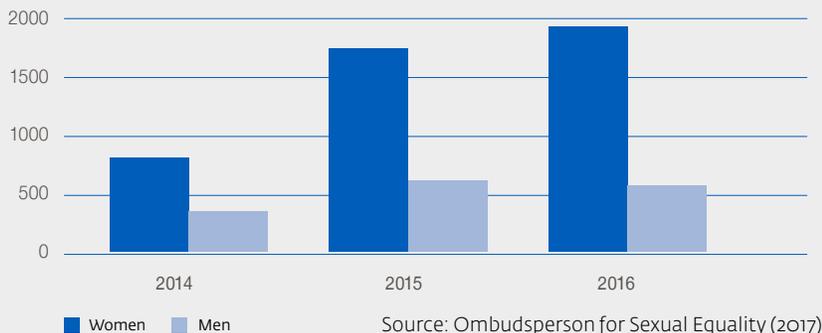


Source: Ombudsperson for Sexual Equality (2017)

In 2015 B.a.B.e. and Women's Room wrote and submitted their Shadow Report to the Committee on the Elimination of Discrimination against Women. These two organisations focused mainly on their area of expertise in their report, domestic violence, rightly pointing out the culture permeating society which leads to ever more violence against women, including such practices as arresting both partners in cases of domestic violence, the practice of court confrontation which causes further psychological violence to survivors, the persistence of the idea that domestic violence is a private issue and that the most important thing in these cases is keeping the nuclear family intact and so on. 'As reported by the UN independent expert, the State authorities tended to focus on preserving family unity, she noted, rather than protecting the victim's human rights. Courts and law enforcement officials seldom employed protection measures, leaving victims at the mercy of perpetrators and often forcing them to flee their family homes' (B.a.B.e. and Women's Room 2015).

Because of this culture it is possible for a pregnant 18-year-old woman to be stabbed 88 times by her ex-boyfriend after he physically attacks her several times in the months leading up to her murder alone and with a group of friends, threatens her life and stalks her, all the while with a completely ineffective restraining order against him and the police unwilling to offer any kind of real protection. The 20-year-old man in question was also responsible for vehicular manslaughter in 2016 with a reduced sentence still to serve. It is not unusual to find media characterisation of men who harass, molest or even kill their partners as 'romantic', 'obsessive' and women as 'fatale' or 'promiscuous'. 'Our everyday sexism' (Seksizam naš svagdašnji) is a Croatian Facebook page run by Croatian feminist activists to track and analyse this kind of media sexism and misogyny. This serves, in its own way, to educate people on the pervasiveness of sexism and misogyny in Croatian society and their reflection in our media.

Graph 11 – Number of criminal acts between people close to each other by sex, 2013-2016



a) Ratification of the Istanbul Convention¹

One of the burning issues for women's activists in 2017 was the ratification of the so-called Istanbul Convention (Convention on preventing and combating violence against women and domestic violence). The ratification has come to a halt because of the opposition of the Catholic Church and aforementioned right-wing activists from organisations such as *Vigilare*, *In the Name of Family* and others. The current government is still reluctant when it comes to ratification and is dragging the process out, which is not surprising considering the fact that they have named men's rights, pro-life and other conservative activists to governmental bodies and committees on women's issues. While the conservative activists insist on their willingness to work on prevention of violence against women, they are nevertheless opposed to the Convention because of the 'gender ideology'² it supposedly promotes. There

1 The Croatian Parliament ratified the Istanbul Convention on 13 April 2018 with a majority of votes.

2 We refer to Catholic notions of 'gender ideology' which in this interpretation encompasses all presumed violations against the 'natural', biologically determined destiny of persons identified as men and women at birth. Of course, there is nothing natural about those notions of family and gender roles which came about during the industrialisation period. As Željka Markić of *In the Name of Family* said during her interview on Croatian National Radio, 'we do not want children in schools getting taught that they can choose what they are, that it matters how they see it, if they are a man or a woman, why don't you [children] examine that, why don't you think about that'. Family is made up of a man and a woman and their (biological) children, as well as close blood relatives; unconventional families made up of same-sex partners, as well as trans*people, are unacceptable, from this

have also been some attempts to cause moral panic by alluding to the supposed danger of trans*people, one of the most economically and physically endangered social groups in Croatia. In fact, they are most of all opposed to women's non-traditional role in society, especially when it does not correspond to the values of the extreme strains of the Catholic Church. It is also important to point out that the former social-democratic government did not ratify the Convention because it imposes expenses and possible penalties on the countries in question, while the current government is on a balance beam between the wishes of its moderate female membership which is willing to ignore the 'gender ideology' of the Convention for the sake of other women and more radical potential voters who are exerting pressure on the party to move further to the right when it comes to women's issues (Čačić 2017).

Croatian feminists and women's activists are fighting hard for ratification because the current modes of ratification of violence against women are obviously not working. Even though there have been national strategies and programs focused on the issue, it is very hard to see any changes not only in public and media discourse, but also in the attitudes of the representatives of the Croatian legal and penal system.

b) Failures in addressing violence against women and its subsequent increase

The new National Strategy for Prevention of Domestic Violence was adopted on the National Day of Struggle against Violence against Women on 22 September 2017.³ According to the Ombudsperson for Sexual Equality (PRS 2017) certain suggestions were not accepted, such as free legal assistance for women survivors of domestic violence, the option to appeal all court decisions, the improvement of the standing of women survivors of domestic violence in court procedures as well as sanctions and protection measures against partner violence.

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point of view. The expression 'gender ideology' is used as a blanket term which refers to all kinds of presumed violations against God and nature.

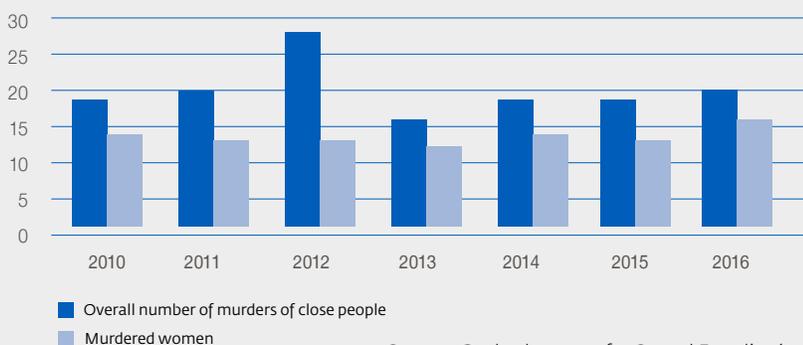
³ This date commemorates the killings of three women during divorce proceedings in 1999. Mate Oraškić killed his wife Gordana, the presiding judge, Ljiljana Hvalec, lawyer, Hajra Prohić, and wounded the court secretary, Stanka Cvjetković.

Graph 12 – Number of women killed, 2010-2016

	2010	2011	2012	2013	2014	2015	2016	Overall in 7 years
Overall number of murders	100	100	100	100	100	100	100	100
Murders of close persons	49.5	48.8	47.6	48.4	49.4	49.3	47.1	47.1
Women killed by male family members	50.5	51.2	52.4	51.6	50.6	50.7	52.9	52.9
Percentage of killed women in relation to overall number of murders of close persons	50.5	51.2	52.4	51.6	50.6	50.7	52.9	52.9

Source: Ombudsperson for Sexual Equality (2017)

Graph 13 – Number of murdered women, 2010-2016, in relation to overall number of murders of close people



Source: Ombudsperson for Sexual Equality (2017)

According to the data available for 2016 (PRS 2017), the number of criminal offences when it comes to domestic violence is falling, however most cases of domestic violence still go unreported. Even so the data on the murder and manslaughter of women in the past seven years (Graphs 12 and 13) show that the number of women murdered by people close to them (legally defined as married couples, their children with each other and other people, couples living in extramarital arrangements, blood relatives, foster parents and children) is rising, while the number of criminal offences is declining. To speak plainly,

the current strategies are not working if we presume that women are less and less willing to report domestic violence because of weak institutional responses to their plight and that because of this weak response more and more women end up dead by the hand of those close to them. It is also important to note that criminal statistics still do not report on or recognize violence against women when it surpasses the narrow definition of 'domestic violence', or violence between couples and between parents and their children. The Croatian legal system is still not sensitive to this situation and it is quite usual for the perpetrators to be released while the court process is going on, that there are no effective protective measures for women in case they are being stalked by their former partners and for the judges to punish the perpetrators financially without prison sentences, no matter the gravity of the offence. It is also interesting to note that female judges in misdemeanour, commercial and municipal make up three quarters and in county courts two thirds of all judges. One quarter of constitutional judges are women and two fifths of Supreme Court judges are women (MW 2017). The number of female prosecutors in all instances has also steadily been on the rise since 2000 (DZS 2017b). Only 15% of all protective measures proposed by the police were accepted by Croatian courts (PRS 2017).

It is quite usual for the media to publish revealing details even on underage survivors of sexual violence and incest or for the court to issue detailed information on the abuse to the public. Sexual violence against women is also on the rise with more and more reports of incestuous and non-consensual relationships. Other types of non-physical violence against women, such as economic abuse, psychological and other, are rarely discussed or recognised, notably when it comes to violence against women by their former or non-marital partners as well as economic violence. It is very hard to introduce nuanced notions of violence against women because of the prominence of physical violence against women and permissibility surrounding it.

The future seems even more disquieting considering the standpoint of young people on violence against women and violence in their first romantic relationships. As reported by the organisation CESI in their study on violence in teenage relationships, young people consider

the following actions by women deserving of physical violence: if he is angered by her behaviour (45 %), if she does not listen to him (45 %), if she is unfaithful (44 %) and if she does not take care of him properly (45 %) (N1 2016). Their opinions are of course the opinions of their parents and/or milieu and prove the necessity of better mandatory education on women's rights, consent, domestic violence, sexuality in general, prevention of sexually transmitted diseases and infections as part of the school curriculum, not to mention education on tolerance, political participation, class, race, ethnic and gender differences and misconceptions.

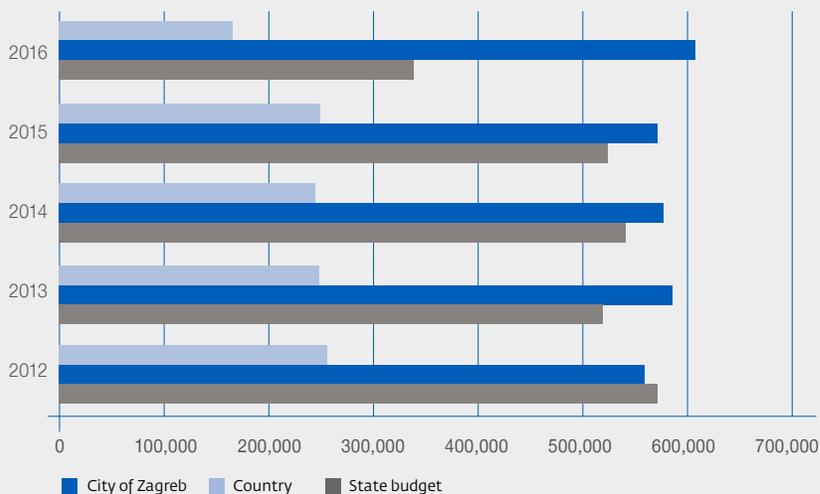
Financing of women's shelters, organisations and institutions

a) Women's shelters

When it comes to women survivors of domestic violence, concrete measures for life after abuse are also severely lacking. Let us take the example of shelters and counselling centres. Such institutions are financed by the state bodies and local government, but the percentage of funds varies between local governments. According to the research on the financing of shelters for women victims of domestic violence done by the Ombudsperson for Sexual Equality (2012), it is not uncommon for local governments with lower budgets to participate in a more significant way in the funding of these shelters and for the well-off local governments to give lower percentages to shelters for women (PRS 2012). One could presume that this shows a possible connection between economic position and violence against women. Of course, some of these shelters are funded by other means like the Catholic Church. According to a prominent activist in this area Neva Tölle (Pauček Šljivak 2017), funds for shelters have been slashed over the past few years and are no longer sufficient for all the needs the shelters have in one year. There is no longer systematic funding of women's shelters and counselling centres which explains the eagerness of feminist and women's activists for the government to ratify the Istanbul Convention. There are currently 19 shelters and counselling centres for survivors of domestic violence listed on the Ombudsperson for Sexual Equality webpage in the following cities: Bjelovar, Čakovec, Dubrovnik, Karlovac, Osijek, Pula, Rijeka, Sisak, Slavonski Brod, Split, Šibenik, Varaždin, Vukovar, Zadar and Zagreb. Only seven provide accommodation for survivors of domestic violence. Since they are mostly

financed by their cities, counties, private companies and other types of organisation, it is hard to estimate the current state of their finances. In a way, this decentralisation of funding of women's shelters makes it very hard to track down the spending cuts made by local government, since most of these organisation do not publish full financial reports on their web pages. However, it is noticeable that many of them are highly dependent on the local government¹ which jeopardises their survival and that many of them cannot afford the basic necessities for their users (clothes, food, children-specific products, products for personal hygiene etc.). We will in this case use the example of the Autonomous Women's House Zagreb, one of the oldest such institutions, which also provides shelter to women from Zagreb and other parts of Croatia.

Graph 14 – Funds provided by the state, city and county to Autonomous Women's House Zagreb in HRK, 2012-2016



Source: Yearly Reports of Autonomous Women's House Zagreb, 2012-2016

¹ This does not necessarily mean that the local governments do not want to finance women's shelters. The transfer of the burden of financing these institutions ('functional and fiscal decentralisation') has caused quite an uproar. Namely, the cities and counties finance elderly and sick help, Red Cross, firefighting, kindergarten, etc. The city and county organisations complain that this has led to a loss of funds from the state on their part and problems in funding necessary services of public importance.

As can be seen in Graph 14, the funds from the county and from the city of Zagreb were significantly reduced in only one year (in 2016). However, as we already stated, those funds were not enough for the House even before the crisis and before the reduction of funds in 2016. Only a few women's shelters receive funding from the state. The funding of something that should be without a doubt financed by the state is left to the whims and declining budgets of cities and counties outside of Zagreb. To have a successful policy against violence against women, the state should first of all provide shelters and consultation centres. The current need for places in shelters is not satisfied and at least 700 beds more should be provided. Of course, we have not even touched upon the long-term prospects of these women: providing them with education and re-qualification, housing, establishing employment measures aimed at women survivors of violence and offering them everyday help when it comes to childcare.

b) The Office of the Ombudsperson for Sexual Equality

As can be seen in Graph 15 the funds spent by the Office of the Ombudsperson for Sexual Equality have grown since 2004. It has for the most part grown because of funding from the EU. However, the Office has a low rate of actually using the funds from EU. Its financing is closely tied to project funding, meaning it is influenced by wider 'trends' in policies in the EU. This could be a push in a new, exciting direction or lead to masking specific problems of women in certain areas or members of certain classes.

Graph 15 – Planned funds (in Euro) and Realised funds (in Euro)



Source: Ombudsperson for Sexual Equality (2015a)

Especially vulnerable groups

a) Roma women

Roma people make up for 0.40 % of all citizens of Croatia according to 2011 census. Around 60 % of Roma women enter non-marital relationships when they are 13 or 14 and many of them become mothers at 15. The average number of children per Roma woman was 4.47 and the average age of the mother at the time of first childbirth was 18.33. A total of 21 % of Roma women had healthcare only while pregnant and 40 % of them do not have any kind of healthcare insurance. Most of the surveyed women were unemployed and were never active in the labour market (OSF, REF, UNICEF 2015). The main concern is access to education: although 95 % of Roma children attend grammar school, this percentage falls to 31 % of Roma children enrolled in schools between the ages of 15 and 18. However, 91 % of surveyed parents expressed the desire that their children finish secondary education. All of this data suggests that the majority of Roma women's problems could be alleviated by encouraging them to continue their education (in this case, at least secondary) and introducing sexual and reproductive education as a mandatory part of the overall curriculum. Along with free access to contraception this would help Roma women make informed decisions on their willingness to give birth early and lead to better outcomes when it comes to secondary education, as well as work and life opportunities during their lives. Of course, all of this pertains to other marginalised groups as well as girls and young women living in poverty and/or in rural areas.

b) Disabled women

Disabled women made up 9.3 % in 2015 and 9.4 % in 2016 of all women in Croatia, according to the Register of Disabled Persons held by the Croatian National Institute of Public Health (DZS 2017b). There are current-

ly 204,033 women with disabilities and 83,095 of them are of working age. Some 72 % of them only finished primary school or even less, 20 % graduated from high school, 3 % have a higher education degree and 5 % completed some kind of special education. Since a disproportionately large amount of disabled women only finished the legally mandated education (eight years of primary school) or even less, they are at a bigger risk of unemployment and extremely low pay. Most of them are employed as cook assistants, cleaners or administrative workers. They are also at a bigger risk of violence against them and rarely report this to the police since they are often relying on their partners or family members as caregivers and are financially dependent on them.

One burning question, when it comes to disabled women, is the right to motherhood and starting a family. Biological reproduction of disabled people is still a taboo. Many hospitals are not equipped for gynaecological exams and childbirth for women with disabilities and they are very often faced with prejudice and uniformed medical professionals in case of pregnancy or the existence of a sex life.

c) Bisexual and lesbian women

We have already touched on specific attacks closely related to attacks on women's reproductive rights in general when it comes to women as part of LGBT community. All of these cuts have of course affected bisexual and lesbian women, especially those who are at risk of poverty and/or are unemployed or precariously employed. Although there have been some positive changes to the legal framework with regards to the rights of the LGBT community (like the Life Partnership Act), some rights, such as the right to adoption or IVF are still restricted for LGBT people. According to research on LGBT equality in the workplace (Jurić, Jakovčić, Udruuga LORI 2017), more than half of the surveyed LGBT people living in registered unions have not notified their place of employ of their changed marital status, although they and their partners could gain certain social rights and tax benefits. One fourth of them is still effectively 'in the closet' in their workplace because of a homophobic work environment. Those working in education are not only keeping their sexual orientation a secret but are forced to do so, because their colleagues think that this will have a negative impact on children. In effect, LGBT people are

still not living openly and freely because of a homophobic atmosphere in society and a fear of physical, emotional and economic violence.

d) Trans*people

In the last two years, since Croatian law enabled the legitimization of trans*people before their gender-affirming surgery, there have been 65 requests for the administrative change of sexual designation on personal documents by trans*people. So far 59 requests were officially recognized. This process is of course not free and the following requirements must be met: confirmation from social services, psychiatrists, psychologists, the medical commission, confirmation that there were never and there are currently no court proceedings against them and the payment of an administrative fee. There are very few experts working with trans*people in Croatia: a handful of psychologists, one psychiatrist, one endocrinologist, one gynaecologist and no vaginoplasty or phalloplasty medical professionals, according to the Transaid organisation. Persons who would like to reaffirm their gender can only receive hormone therapy in Croatia and the health insurance covers hormones only partially in case of transwomen. Gender-affirming surgeries are not performed in Croatia at the moment (Vladisavljević 2017).

This means that only those people who can afford to cover all their medical expenses can, if this is something they desire, fully affirm their gender. In effect there is a wealth census when it comes to trans*people. All of these medical and legal procedures require significant amount of money and therefore restrict access to these already hard to obtain services.

Although it is noteworthy that the law enables people to declare their sex or gender as they desire, there is still no possibility for anything in between, meaning people who are not born or do not identify as either a man or a woman. There is no public discussion on inter*people and inter*children who are in the majority of cases made to correspond to one or the other sex through operations and use of hormones. In around 90 % of cases of inter*people the young children are aligned with the female sex and may suffer serious psychological and physical consequences because of these operations.

a) Overview of left and feminist actors

Since 2009 and widespread student occupations, a number of new left organisations, including small parties, have come to life. Some of them have focused on worker's rights, trade unions and history, such as the Organisation for Worker's Initiative and Democratisation which for years now has organised the Women's Union School aimed at female union members.¹ This organisation has also collaborated with NGOs K-zona (the publisher of the feminist website Vox Feminae), Udruga Zora and Lesbian organisation Rijeka 'LORI', as well as Zagreb Pride and Trans Aid on a project called 'LGBTI Equality in the Workplace' and tried to develop amendments to labour contracts which protect the rights of LGBTI workers.

In 2017 the political platform and later on registered party called Zagreb is OURS! which consists of NGO employees, culture workers and left activists among others managed to get seats on the City Assembly of Zagreb and entered a coalition with three other political parties, the New Left, Sustainable Development of Croatia and the Worker's Front. This coalition also boasted the gender parity of their candidates. This might seem like an important improvement, since most parties in Croatia would rather pay penalties for not introducing the legally defined quota of female candidates than actually name enough women. However, quotas do not suffice and gender equality measures require concrete organisational and programmatic solutions. Party programmes addressing women's and other gender issues have to encompass a whole range of measures, tied not only to the workplace and access to social services. Left parties must keep in mind that the distribution of work in the household or on the labour market repro-

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¹ Co-author M. Čačić is a member of the Programme Committee of Women's Union School as a non-member and partner of OWID.

duces itself in left organisations as well. Unfortunately, these parties still do not have a prominent and well-rounded feminist programme or a specific part of their programme dedicated to 'women's issues'.

One exceptional example of a broad coalition of unions and women's organisations aimed at women's and workers' rights was the Women's Front for Social and Labour Rights formed in 2013. The Front actively participated in the public discussion on the new Labour Act and Pension Law in 2013 and 2014 and organised a public campaign which raised awareness about their negative impact, focusing especially on women. The Front took a stand against introducing flexible working arrangements and demanded better conditions for women. They provided extensive and necessary commentary and analysis of changes to labour and pension legislation at the time.

A group of younger feminists founded the fAKTIV (Feminist Collective) several years ago as a return to disruptionist feminist activist practices in Croatia. They organised several extremely well-attended actions and protests attractive to the media, most importantly the Night March on 8 March and used the well-known date as an opportunity to react to violence against women and right-wing attacks on women's reproductive rights. In the last couple of years they have expanded their activities and demands beyond these singular issues. Zagreb Pride has also explicitly named labour rights as a very important part of their demands and slogans related to labour concerns were front and centre during Pride Month the last few years.

There are, of course, many prominent women's and feminist organisations and groups, such as Roda, B.a.B.e., CESI, Ženska soba, K-zona, Ženska mreža Hrvatske and Pariter which all provided invaluable sources for this study and we tried to touch upon some of their areas of expertise and activities.

Another positive example would be the Platform for Reproductive Rights founded in 2017. The Platform organised a counter-protest during the right-wing Walk for Life in 2017. The Platform's activists blocked the path of the march, which led to their arrests and their being charged with misdemeanours. On the Global Day of Action for Access to Safe and Legal Abortion (28 September) the Platform organised protests in Zagreb and Rijeka. The mere use of the term 'reproductive

rights' instead of a narrower one, 'right to abortion', signals a possible realisation of the fact that a feminist approach should also cover social and labour rights. This was reflected in the demands and statements made on 28 September such as: 'the right to abortion is also a class issue, a question of public health and overall social responsibility' or 'women should also have the conditions to give birth to a child and raise it' highlighting reproductive justice as an important issue. The Platform has managed to unite feminists from all organisations, generations and ideological backgrounds (liberal, radical and socialist and Marxist feminists) for the time being.

b) Suggestions for left actors

The principal goal of all of these organisations should be the inclusion of younger women in the movement. Be that as it may, among the membership of left parties and other organisations there is already a significant number of women. They are faced with the challenge of trying to create and implement feminist principles when it comes to interpersonal relations and their programmes and agendas. One of those measures could be founding or reviving women's sections and the previously mentioned implementation of feminist principles at all levels and not only the insistence on quotas and other short-term and ineffective solutions.

When it comes to unions, one of the first steps should be the organisation of precariously employed and unemployed people in general. Of course, many of these people are women and the problem of their inability to pay union membership still persists. Women usually join or become active in their union when push comes to shove: when they are not being paid, if they are going to lose their job or when no male colleague can take the charge. Since the unions are losing membership, they are also losing funds for their activities including educational work and cannot afford to focus on a broad set of social issues. Some problems of female participation in unions can be alleviated by persistent, specific work and the education of women. All the actors mentioned above should, naturally, work together on the better inclusion of women at all levels. Women should create autonomous spaces and work on education about women's issues and feminism when

it comes to all members. This is strenuous and long-term work, but it could be alleviated by constantly applying feminist principles (right to self-determination, self-organisation, non-hierarchical organising, autonomous organising of women, insistence on the perspective of social reproduction theory and necessity of feminist takes on all relevant issues and so on) and taking account of needs and issues regarding ethnic minorities, the LGBTQIA+ community, those living in rural areas and disabled people. There are also quite obvious and simple first-hand solutions to enable female participation such as organising childcare during meetings and protests.

Here are some general proposed measures for left organisations:

- ◆ establishment of so-called women's sections with no membership restriction based on gender (already established in the Worker's Front party and unions) and/or right to amend the documents and give insight into women's specific perspective (all of this should not, of course, only be reserved for women, but also for the above listed 'vulnerable groups' no matter the gender);
- ◆ autonomy and re-politicisation of unions' women's sections; right to deal with wider social issues directly impacting female membership;
- ◆ guaranteed presence and right to vote of members of women's sections in all working groups and similar bodies dedicated to single issues (like housing, healthcare, budgeting);
- ◆ establishment of media outlets as a way to inform and educate membership and sympathisers;
- ◆ establishment of political educational programs, especially those aimed at female membership (women's participation is lower in regular programs such as this, since they are still not a majority of leaders in unions, for instance) and specific women's and feminist issues;
- ◆ women's and feminist content as a regular part of major educational events;
- ◆ widening the scope of issues considered 'union business' (the politicisation of unions);
- ◆ insisting on legally prescribed quotas for election lists, although this does not necessarily lead to better participation of women

in unions or political parties and can only serve as a temporary and inadequate tool to force women into participation, because it is a short-term and ineffective solution;

- ◆ paying special attention to young members by addressing relevant issues such as migration, precarious labour, the discrimination of young women, availability of social services or unemployment policies;

- ◆ waiving membership fees or reducing them in special cases, especially when it comes to people who work in the grey economy, as seasonal workers, people who are underemployed or precariously employed; membership should not be conditioned by employment and the ability to pay the fee every month (women make for large swaths in all these groups);

- ◆ adopting a communication policy which restricts long meandering speeches and going off-topic, as well as making it possible for members to write out their opinions for someone else to read at meetings and assemblies while respecting the abovementioned restrictions on length and topic;

- ◆ establishment of a commission which deals with interpersonal problems among members, including sexual violence and harassment;

- ◆ proper response to disrespectful behaviour to women, opening the floor to discussions of problematic behaviour and culture in the organisation in question;

- ◆ establishment of a clear and brief codex of behaviour, which would encompass basic principles of the organisation and include acceptance of feminist and anti-racist principles;

- ◆ realisation that women's politics and feminist thinking has an impact on every possible politically viable sector;

- ◆ acknowledgement of the usual labour distribution in which female members do certain kinds of jobs and tasks typically prescribed to them ('secretarial jobs') and men take on the role of the brains of the operation. This is why every member should be aware of the required talent and knowledge necessary for every menial task and every intellectual endeavour and have the opportunity to try their hand at different tasks and be able to stand in for their absent comrades on special occasions. However, it is important to note that not all members have the same previous knowledge of certain areas and this knowledge

should be used to guide and educate others, it is not to be kept away from those who wish to learn and perform certain tasks, and people who deal with 'unthankful' typically female tasks should be given respite and acknowledgment of their importance but also the chance to further their knowledge and be given a replacement in case they grow tired or have no interest in those tasks for the time being or ever at all.

Here are some proposed policy initiatives for political actors:

I. LABOUR AND PENSIONS

- ◆ removing the legal possibility of firing pregnant women or young mothers during or after their maternity leave;
- ◆ women's and men's legal retirement age cannot be equalised under the pretence of gender equality, since the unpaid care labour does not count towards pensions;
- ◆ women taking over the majority of the burden of care for the elderly and children significantly raises the possibility of old age poverty which is why we should try to communalize care work.

II. HEALTHCARE

- ◆ government-funded campaigns on women's health;
- ◆ possibility of online and telephone consultations (like for women on islands and other isolated areas);
- ◆ mobile gynaecological care;
- ◆ improving overall vaccination rates and research on HPV;
- ◆ humanisation of maternity wards and education of medical professionals;
- ◆ no taxation or paying out of pocket of female hygiene products and contraception;
- ◆ abortion is currently the only medical service in our health system which is not even partially covered by insurance and this should not be the case, since those who can pay will always be able to pay for and acquire these services, and those who are poor will always have problem exercising their right to abortion;
- ◆ door-to-door education and consultation with women who do not respond to invitations for mandatory gynaecological exams (as part of national breast, intestine and uterine cancer preventions programs).

III. CHILDCARE AND CARE OF THE ELDERLY

- ◆ no taxation of baby food and hygiene products;
- ◆ building of new capacities for childcare and elderly care; investment in training of care professionals;
- ◆ adequate pay for people employed in the care sector;
- ◆ more community nurses to help elderly people living on their own and young mothers.

IV. VIOLENCE AGAINST WOMEN

- ◆ 5-year guaranteed funding of women's shelters and consultation centres;
- ◆ building of new space and/or allowing the centres to use state- or county-owned apartments and houses;
- ◆ further training of people working in social services, the legal system and the police;
- ◆ employment measures aimed at women survivors of violence.

V. OTHER

- ◆ establishment of housing policy, especially for young people;
- ◆ improving the position and infrastructure for homeless people, also dealing with the plethora of legal obstacles to their participation as citizens;
- ◆ improving access to education and healthcare for Roma women.

This is, of course, not a definitive list, but just a starting point for a few women-centred measures. There are many others which are more or less subtly suggested in and scattered throughout this text.

c) Conclusion

When we first started to look at various data, we found that both men and women in Croatia suffered the grave consequences of the recent economic crisis. Only when we turned our eye to the devastation that happened during the 1990s and in the early 2000s did it become possible to see the different effects of cuts to social services and privatisation processes on women as a group. In a way, for Croatia the impact of austerity measures since it declared its independence can be best

described as 'death by a thousand cuts'. The process of transformation from socialism to capitalism took its toll most of all by significantly reducing labour rights, implementing failed pension reform, privatising healthcare and these first 'reforms', implemented in the 1990s and later on, on the advice of the World Bank and the International Monetary Fund, laid the groundwork for the complete devastation of the social state built in Yugoslavia.

When it comes to the gender-specific effects of these processes, they had a profound impact on women's lives because it is still expected of women exclusively and without compensation to do the 'labour of love'. All this generously given love unfortunately started a vicious cycle which ends with high risk of poverty in their old age as a reward for 24 hours spent weekly on childcare and 16 hours of housework by women, according to Ksenija Klasnić's study on housework and carework in Croatia. Once the social apparatus started to fall apart, women had no choice but to shoulder that burden once again. The same thing happened in healthcare: what is a necessary medical service for women (as much so as having a general practitioner) became one of the most privatised sectors of healthcare services which will inevitably lead to a further decline in women's reproductive health. A large number of women have not even chosen a gynaecologist and among those who have, large swaths of them do not use those services at all. It is not unusual for a young woman to go to gynaecologist exclusively to confirm a pregnancy and give birth, and for mature women to visit a doctor's office only in case of a lump or other symptoms.

Moreover, these cuts revealed the hidden tip of the economy's iceberg: women's unpaid labour. In short, there can be no true equality among men and women until this is considered shared labour, crucial for the survival of our society and economy. As Tithi Bhattacharya wrote, 'the essence-category of capitalism, its animating force, [is revealed] to be human labour and not commodities. In doing so, it exposes to critical scrutiny the superficiality of what we commonly understand to be "economic" processes and restores to the economic process its messy, sensuous, gendered, raced, and unruly component: living human beings, capable of following orders as well as flouting them' (Bhattacharya 2017)

If we accept that women's unpaid labour is of great importance, that we should fight to communalize it, so as to share it among all of us, and understand that when women are fighting for their rights, then this is not exclusively a women's struggle and they are fighting for us all. This is a burden that should not fall only on women's sturdy shoulders, strong legs and soft breasts. The first step for left actors would be to finally start their work on women's rights within their own organisations and to make them a part of their policies. This would also be a first step toward cooperation with women's and feminist organisations and movements. We should ask ourselves what could not be considered a 'woman's issue' and respond by implementing feminist viewpoints in all our particular policies, since women's reproductive work is the foundation of our society and it is currently crumbling under the pressure.

When it comes to left political organisations, but also society at large, it falls to women once again to perform what could be considered care work in their political organisations as well. This is a burden that should be redistributed by active policy on the usual labour distribution which transferred without notice from our society to our left organisations. To be able to cherish and respect the work of people we work together with on developing the idea of a better society, we should acknowledge hours and labour invested in even the most simple tasks. Respecting the work and knowledge of every single person is the first step to establishing feminist principles within organisations and developing broad alliances with other political actors. The second step would be to finally use the narrative of austerity measures as a political tool and to acknowledge a particular effect they had on women. We cannot speak of reproductive justice and health without taking into consideration that these attacks on our reproductive rights might be directly or indirectly tied to the devastation of healthcare systems and that the rise of conservative actors is somehow tied to the despair and hopelessness pervading our society. The third step would be to give people the focus in their own struggles and give them a haven where they would find respectful, caring and generous brothers and sisters in arms.

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