



Research note

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ALIGNING NATIONAL AGEING POLICY WITH GLOBAL PRINCIPLES: SERBIA AND THE MADRID INTERNATIONAL PLAN OF ACTION ON AGEING

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Abstract: Population ageing poses a significant societal challenge throughout Europe, and Serbia is no exception, with its population ranking among the oldest on the continent. This paper examines the extent to which the Madrid International Plan of Action on Ageing (MIPAA) has influenced national ageing policies in Serbia, a country facing accelerated demographic ageing, pronounced regional disparities, and limited institutional capacity. Drawing on qualitative policy analysis and secondary data synthesis, the study assesses the Strategy for Active and Healthy Ageing in Serbia (2024–2030) through a normative and institutional lens, focusing on its alignment with core MIPAA principles—such as intergenerational solidarity, human rights, and active ageing. The analysis employs a document review approach, guided by key dimensions of MIPAA, to evaluate both strategic content and implementation capacity. The findings indicate that while Serbia has made progress in policy formulation and awareness-raising, substantial challenges remain in financing, stakeholder coordination, and service delivery. Gender-based inequalities, particularly affecting older women, and structural constraints in rural and underdeveloped areas are also highlighted. The discussion reflects on how global trends—including digitalization, climate change, and public health risks—interact with ageing policy agendas. The study contributes to understanding how international frameworks shape national responses in transitional settings, offering insights relevant to other post-socialist countries facing similar demographic and institutional challenges.

Keywords: ageing policy; MIPAA; policy implementation; human rights; ageing

1. Introduction

As population ageing accelerates across Europe, countries are under pressure to reform public policies to ensure social protection, economic stability, and inclusion of older adults (Eurostat, 2024a; United Nations Economic Commission for Europe [UNECE], 2017). Serbia illustrates these challenges vividly, with a steadily increasing share of the population aged 65 and over and widening demographic imbalances driven by both low fertility and emigration. With 22% of its population aged 65 and over, the country ranks among the ten oldest in

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Europe, yet it remains near the bottom in terms of life expectancy—lagging approximately 8–9 years behind the most long-lived European countries (Eurostat, 2024b). This contrast reflects the country's complex demographic and health profile. Compared to urban and more densely populated areas, the demographic imbalances are especially pronounced in rural and depopulated regions of Southeastern and Eastern Serbia, where population decline and ageing converge most sharply. As such, Serbia presents both a typical and instructive case for analyzing the policy implications of population ageing in middle-income European contexts.

Serbia is a signatory to the Madrid International Plan of Action on Ageing (MIPAA), adopted in 2002 at the Second World Assembly on Ageing (United Nations, 2002), which represents a global political framework for guiding ageing-related policies. Its overarching goal is to promote a society for all ages, enabling older persons to live with dignity, independence, and full participation. MIPAA defines three core priority areas: (1) older persons and development, (2) advancing health and well-being into old age, and (3) ensuring enabling and supportive environments. In the European context, these principles have been operationalized through the Regional Implementation Strategy adopted in Berlin in 2002, with the progress monitored every five years across key domains such as income security, healthcare, and intergenerational solidarity (United Nations, 2002; UNECE, 2013). While MIPAA offers a comprehensive and ambitious framework, its effectiveness depends on national policy commitment and institutional capacity (Sidorenko & Zaidi, 2018).

This paper provides a policy-focused reflection on Serbia's engagement with the MIPAA, examining how its principles have been incorporated into national policy and highlighting areas requiring further attention. Rather than presenting new empirical research, the paper draws on demographic trends and official statistics to frame key challenges and outline strategic recommendations. By examining Serbia's implementation of MIPAA in light of demographic pressures, resource constraints, and evolving public policy, this paper offers insights applicable to other ageing societies navigating similar transitions. The relevance of this policy reflection extends beyond Serbia's national context. The analysis underscores the continuing relevance of MIPAA as a bridge between international commitments and local realities, especially in contexts where population ageing is accompanied by social and regional disparities (Sidorenko & Zaidi, 2018).

2. Ageing in Serbia

Population ageing in Serbia is shaped by three dominant and mutually reinforcing trends: persistent below-replacement fertility, increasing longevity, and sustained emigration of younger cohorts. These processes have profoundly reshaped the country's age structure, resulting in a growing share of older adults (Figure 1). Between 2011 and 2022, demographic indicators confirm the intensification of the ageing process in Serbia, with clear gender differences. The share of people aged 65 and over rose by 4.7 percentage points, particularly among women, where it reached 24.5% of the female population. There was also a significant rise in the 85+ population. The ageing index (number of elderly people (60+) per 100 young people (0-19))—a key measure of the extent of population ageing—increased from 121.9 to 153.7, indicating that there are nearly 154 older individuals for every 100 young people. The dependency ratio—ratio between the dependent population (children and the elderly) and the working-age population (15-64) rose from 46.3 to 57.4,

reflecting growing pressure on the working-age population. Although ageing affects both sexes, it is more pronounced among women. They have higher average and median ages, and a much higher ageing index, reaching 180.5 in 2022 (Marinković & Galjak, 2025).



Figure 1. Age-sex pyramids, Republic of Serbia, Census 2011 and 2022.
Note. Data from Statistical Office of the Republic of Serbia (SORS, 2023).

Life expectancy in Serbia remains significantly below the EU average and reveals strong gender differentials. In the period 2021–2023, female life expectancy at birth in Serbia was 77.5 years, compared to 72.3 years for men—a gender gap of over five years (SORS, 2024a). Moreover, regional disparities in health outcomes are substantial: life expectancy tends to be markedly lower in the eastern and southern parts of the country than in Belgrade and Vojvodina, reflecting geographic inequalities in healthcare access, socio-economic conditions, and population composition (Marinković, 2021).

The demographic development of Serbia is also characterized by profound regional imbalances. The most severe depopulation has occurred in Eastern and Southeastern Serbia, where natural decrease and prolonged outmigration have created communities with highly aged populations and weakened local infrastructure (Marinković, 2024). In contrast, demographic patterns in Belgrade and Novi Sad seem more favorable, largely due to the internal migration of younger, working-age, and student populations. These urban areas benefit from a more favorable age structure, though this trend reflects population redistribution rather than demographic recovery.

These population shifts underscore the urgency of adopting regionally sensitive and demographically informed ageing policies, especially in communities where old age intersects with poverty and institutional fragility. Moreover, these trends carry major implications for the sustainability of ageing-related systems. The growing old-age dependency ratio intensifies pressure on pension and healthcare services, particularly in

fiscally constrained areas. Gendered aspects of ageing—such as the predominance of older women, their longer life expectancy, and higher poverty rates—demand tailored protection and care models. Regional disparities also risk reinforcing political and financial neglect, forming a vicious cycle of institutional decline and unmet needs among the oldest and most vulnerable populations.

3. Policy responses and the strategy for active and healthy ageing (2024–2030)

In response to its rapidly ageing population, Serbia has developed several strategic documents aimed at addressing the challenges of demographic change. The most recent and comprehensive policy framework is the Strategy for Active and Healthy Ageing for the period 2024–2030 (Serbia’s Ageing Strategy), adopted in 2023 (The Government of the Republic of Serbia, 2023). This document builds upon earlier strategies and aligns closely with the goals of the MIPAA, particularly in emphasizing human rights, intergenerational solidarity, and lifelong participation. A comparative matrix (Table 1) illustrates the alignment between MIPAA priorities and the goals of Serbia’s Ageing Strategy.

Table 1. Comparative Overview of MIPAA Priorities and Serbia’s Ageing Strategy Goals

MIPAA Priority Direction	Key MIPAA Goals	Serbia’s Ageing Strategy Corresponding Goals	Assessment (Alignment, Gaps, Notes)
1. Older persons and development	Promote active participation of older persons in society and economy; eliminate poverty among older persons.	Increase employment and income security in older age; support lifelong learning and volunteering; reduce poverty risk (esp. for women).	Partial alignment. Strategy emphasizes inclusion and poverty, but limited actions on economic participation post-retirement.
2. Advancing health and well-being into old age	Ensure universal access to health care; support long-term and palliative care; promote mental well-being.	Expand geriatric and palliative care; strengthen primary and preventive health care; promote healthy lifestyles and mental health.	Strong alignment. Comprehensive health goals, though implementation capacity remains a concern.
3. Ensuring enabling and supportive environments	Adapt housing, infrastructure and transportation; ensure security and dignity in older age.	Develop age-friendly environments; improve housing conditions; enhance access to transport and safety in public spaces.	Moderate alignment. Conceptually included, but concrete targets and budget commitments are missing.
4. Mainstreaming ageing in all policy sectors	Integrate ageing into all social and economic development policies.	Adopt intersectoral approach to ageing policy; link ageing to labor, education, digitalization, climate policy.	Good conceptual alignment. Implementation mechanisms (e.g., coordination bodies) need strengthening.
5. Improving data and research on ageing	Improve collection, analysis, and dissemination of data on ageing; support ageing-related research.	Improve age-disaggregated data; align indicators with MIPAA; support evidence-based policymaking and monitoring.	Alignment present. Improved statistical coverage planned, but data on informal carers and long-term care lacking.

Serbia's Ageing Strategy outlines a multi-sectoral approach across three interconnected pillars: (1) health and care services, (2) participation and inclusion, and (3) supportive environments for ageing. Its key objectives include improving access to integrated health and long-term care, promoting physical and mental well-being, extending working life through active labor market policies, and combating ageism. Special attention is given to supporting older people in rural and underdeveloped areas, where institutional and community capacities are often the weakest. While there is broad thematic convergence with MIPAA principles, gaps remain in the operationalization of certain human rights-based elements, particularly regarding the structured inclusion of older persons in decision-making and the development of accessible lifelong learning systems.

Despite its ambitious scope, implementation challenges persist. These include fragmented service provision, insufficient inter-ministerial coordination, and limited local-level resources. While Serbia's Ageing Strategy aligns with MIPAA principles, its impact will ultimately depend on political situation, stable financing, and mechanisms for monitoring and accountability. To operationalize its overarching goals, Serbia's Ageing Strategy outlines a number of targeted measures aimed at improving the quality of life for older persons. These include the establishment of intergenerational centers, local volunteer networks for supporting older people, and training programs for caregivers and social workers. These measures are consistent with similar examples found in the literature (Fitzgerald & Caro, 2014; Menec & Brown, 2018). The use of digital technologies—such as telemedicine platforms, digital literacy workshops, and assistive technologies—is promoted as a tool to increase autonomy and reduce isolation among older adults (Goins et al., 2002; Nelleset al., 2024). Furthermore, Serbia's Ageing Strategy supports the integration of ageing issues into local development plans and emphasizes cooperation between public institutions and civil society. Municipalities are encouraged to develop local ageing action plans, backed by technical assistance and national funding instruments. However, such initiatives remain unevenly implemented and are often dependent on donor support or temporary project financing, raising concerns about their long-term sustainability (Walker, 2008).

While Serbia's Ageing Strategy aligns with core MIPAA priorities, future revisions should integrate principles such as a human rights-based and life-course approach, as outlined in emerging UNECE guidance (UNECE, 2021). In addition, greater attention should be given to policy areas gaining importance in the evolving global agenda, including preparedness for climate-related risks, digital transformation and artificial intelligence, cybersecurity, and structured support for informal carers through intergenerational policy instruments.

4. Key policy challenges

4.1. Health and long-term care

Older adults in Serbia face limited access to specialized geriatric care, especially in rural areas. Institutional capacity is constrained, and home-based care is underdeveloped. There is a need for systemic investment in geriatric infrastructure, including training, facilities, and mobile services (Devedžić & Stojilković Grnjatović, 2015; Matković, 2012). According to the 2019 National Health Survey (SORS, 2019), while 31.9% of people aged 65 and over rated their health as good or very good, as many as 85.7% reported having a long-term illness or chronic health problem. One in four experienced serious difficulties with walking, one in eleven with vision, and one in seven with hearing. Nearly one-third reported limitations in

doing household activities, while around 10% struggled with personal care. Although older adults visited general practitioners or specialists on average once a month, only 5.2% received any type of home care. This underlines the critical need to expand health and social care services, especially home- and community-based care, to support autonomy and reduce reliance on institutional settings.

The erosion of informal family care—once a central pillar of elder support, is placing increasing pressure on formal care systems. These challenges are particularly severe in depopulated and economically disadvantaged regions, where service availability is low and social support is diminishing. Strategic investments in community-based services, combined with stronger inter-ministerial coordination and support for informal caregivers, are essential to ensure equitable access and maintain the autonomy of older persons (Mijatović, 2003).

4.2. Financial security and pension system

In addition to health-related challenges, older people in Serbia face considerable social and economic vulnerabilities. The sustainability of the pension system is under pressure due to a shrinking working-age population and increasing longevity (Stojilković, 2011). Pensions are often insufficient to guarantee dignity in old age. Flexible employment options and promotion of later retirement could improve both financial outcomes and intergenerational equity (Stojilković, 2011; Walker & Maltby, 2012). According to the 2022 Census, 91% of the older population receive some form of pension income, but only 1.7% are employed and 4.8% perform unpaid domestic labor (Stojilković Gnjatović, 2025).

4.3. Social inclusion and intergenerational solidarity

Community-based and intergenerational initiatives, including educational and community engagement programs, are needed to foster inclusion and mutual support, as they have demonstrated positive effects in reducing social isolation among older adults (Formosa, 2014; Todorović & Vračević, 2019). Elderly households—those composed of one or two persons aged 65 and over—represent 21.6% of all households, and two-thirds of these are single-person households (Stojilković Gnjatović, 2025). These demographic patterns increase the risk of social isolation, particularly for older women, who also experience higher levels of financial insecurity. In 2023, 24.6% of women aged 65 and over were at risk of poverty, compared to 20.0% of men (SORS, 2024b). Traditional family support structures, once the cornerstone of elder care, have weakened due to demographic shifts, migration, and changing social norms. This has created growing pressure on formal systems of social protection. Ensuring a dignified old age requires a stronger policy focus on intergenerational solidarity, more inclusive community services, and tailored support for vulnerable subgroups, particularly in depopulated and economically disadvantaged regions (Mijatović, 2003). Earlier examples of good practice in Serbia include: in-home assistance in Indija; a Day Center for the elderly and infirm in Sremska Mitrovica; an Elderly Care Program in rural areas of Trstenik; Elder Self-Help Groups and support for displaced and refugee older persons in Kragujevac; as well as a helpline for elderly support in Belgrade (Satarić, 2008). Although these initiatives were implemented more than a decade ago, they illustrate the potential of community-based approaches to elderly care. Such early experiences could inform the local implementation of Serbia's Ageing Strategy and help scale up best practices.

A comparative perspective underscores both the shared challenges and diverse approaches that countries have taken in implementing the principles of MIPAA. For example, Slovenia, as a fellow post-socialist country, has made notable strides in integrating ageing policy across sectors through a robust intersectoral framework and a dedicated coordinating body, as outlined in its national reports to UNECE (UNECE, 2022). Germany exemplifies a high-capacity welfare state that emphasizes life-course approaches, digital inclusion, and comprehensive social protection mechanisms for older persons, particularly through its Federal Ministry for Family Affairs, Senior Citizens, Women, and Youth and national digital strategies (Federal Ministry for Family Affairs, Senior Citizens, Women and Youth—BMFSFJ, n.d.; OECD, 2020). In contrast, Chile, a middle-income country outside Europe, has focused on community-based services and intergenerational programs—such as Centros Diurnos and neighborhood-level initiatives—to address regional disparities and mitigate socioeconomic inequalities among older adults (Economic Commission for Latin America and the Caribbean—ECLAC, 2022; HelpAge International, 2019). Compared to these cases, Serbia's efforts appear constrained by institutional fragmentation and limited funding. However, recent strategic initiatives reflect a growing awareness of the importance of social inclusion, gender equity, and territorial cohesion in ageing policy (The Government of the Republic of Serbia, 2023). These international experiences may offer valuable lessons for advancing Serbia's implementation of MIPAA and for strengthening the resilience of its ageing-related services and governance frameworks.

5. Conclusion and policy recommendations

To ensure effective implementation of the MIPAA in Serbia, a coherent and forward-looking policy approach is essential. Strengthening local implementation capacities—particularly in under-resourced and depopulated municipalities—requires targeted financial and technical support to develop sustainable, age-friendly environments. Intersectoral coordination must be institutionalized to bridge gaps between health, social protection, labor, housing, and education policies, while investment in workforce development—particularly in geriatric medicine, social work, and caregiving—remains a critical priority. Recognizing and supporting informal carers, especially women who disproportionately bear care responsibilities, is vital for ensuring equitable ageing outcomes. Addressing gender and regional inequalities, with a focus on disadvantaged areas such as Eastern and Southeastern Serbia, must be an integral component of the national ageing agenda.

Furthermore, Serbia should strengthen its monitoring and evaluation mechanisms by aligning with MIPAA indicators and enhancing data disaggregation across age, gender, and region. Policy adaptation must also anticipate emerging challenges, including digital transformation, climate change, and the implications of artificial intelligence for older populations. Despite its longevity, the MIPAA framework has been criticized for its largely normative character, with limited enforcement mechanisms and a weak evidence base to evaluate implementation progress (Sidorenko & Zaidi, 2018). To enhance its policy relevance, Serbia's future engagement with the MIPAA should focus on measurable outcomes, institutional accountability, and stronger alignment with the evolving human rights and sustainable development agendas. In this context, promoting positive images of ageing through public awareness campaigns can help reduce ageism and foster the active engagement of older persons in community life. By embracing these priorities and

remaining engaged with evolving global frameworks—such as the upcoming UNECE Strategy on Ageing—Serbia can build a more inclusive and resilient society that reflects the needs and rights of its ageing population.

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