

International Seminar on the Transition from Institutional Care to Community-based Services (Belgrade, 8 December 2014)

WORKING REPORT FROM THE SEMINAR¹

The seminar “Advancing the Transition from Institutional Care to Community-based service”, held in Belgrade on 8 December, was co-organised by the Ministry of Labour, Employment, Veteran and Social Affairs and the European Expert Group on the Transition from Institutional to Community-based Care (EEG), with the support of the European Commission. The seminar brought together around 150 participants from different Ministries, social welfare institutions for children and adults, judicial institutions, local authorities, universities and the civil society (see List of participants in Annex 1). Representatives of the EU delegation in Serbia and the European Commission also took part.

Opening session

The seminar was opened by **Aleksandar Vulin**, the Minister of Labour, Employment, Veteran and Social Affairs, who highlighted Serbia’s progress in de-institutionalisation of children’s services, announcing that until the end of 2015 no child between the age 0 – 3 will be living in an institution. In relation to adults with support needs, he recognised that different forms of housing need to be provided, and confirmed that any actions taken will be in line with the international standards. He expressed concern, however, about the lack of involvement of other relevant Ministries in the reform processes, adding that efforts of the entire society are needed.

Vladimir Đukić, the State Secretary in the Ministry of Health, highlighted the Law on the Rights of Persons with Mental Disabilities as one of the most innovative pieces of legislation in Serbia. He committed to the Ministry taking concrete steps to advance the needed reforms, rather than just making statements of intention. The State Secretary further committed to supporting the efforts of the Ministry of Labour, Employment, Veteran and Social Affairs (MoLEVSA).

Holger Schroeder, the Head of Cooperation at the EU delegation in Serbia (EUD), started by highlighting the importance of the seminar, which provides EUD with the opportunity to underline the importance of the transition from institutional care to community-based services. He stated that de-institutionalisation and investing in services in the community can benefit everyone in society, but the process requires a change in attitudes and ways of thinking. He noted that it was important to recognise that persons with disabilities have a right to live in the community, as set out in the UN Convention on the Rights of Persons with Disabilities (‘CRPD’), ratified by both Serbia and the European Union. On the

¹ Written by Ines Bulić, on behalf of the European Expert Group on Transition from Institutional to Community-based Care.

question of costs, he noted that they are comparable for institutional care and services in the community, but that the benefits of living in the community outweigh the costs. Mr. Schroeder called for cooperation between different stakeholders in the process, as well as for the inclusion of the civil society. Among the main problems in Serbia he noted the issue of gatekeeping in relation to adults, i.e. the fact that how adults are admitted into institutions is not regulated. He ended by announcing that the European Commission will closely monitor the process in the framework of future EU accession negotiations (as part of the chapter on fundamental rights and on social policy and employment), as well as provide support.

On behalf of the EEG, **John Halloran** (European Social Network) explained the importance of country seminars, noting that the Serbian seminar was the first one outside the EU. He was followed by **Jan Pfeiffer** (Mental Health Europe), who presented the main principles of de-institutionalisation and **Ines Bulić** (European Network on Independent Living), who spoke about the important role of EU funding in supporting the process of de-institutionalisation in Serbia and EEG's *Toolkit on the Use of EU Funds*². **Nataša Kokić**, from DG Employment, Social Affairs and Inclusion at the European Commission set out the key EU policies in support of de-institutionalisation, including the Europe 2020 Strategy, the Social Investment Package, the Social Business Initiative, the EU Disability Strategy 2010 – 2020 and the EU initiatives for equal treatment in employment. Ms. Kokić also spoke about the work of EEG and highlighted its 2009 *AdHoc Expert Group Report on the Transition from Institutional to Community-based Care*³ as a guiding document on the key principles of de-institutionalisation.

Progress towards deinstitutionalisation in Serbia: EU funding opportunities, policy options and challenges

Branka Gajić, the Assistant Minister at the MoLEVSA noted that, at the moment, the most available services are home help for the elderly and day care centres. She therefore highlighted as the priority for Serbia the development of a range of other services in the community. In this respect, the ongoing project funded by the EU - "Open Arms" - should facilitate the transition from institutional care to community-based services, and encourage development of alternative services in the community. Ms. Gajić mentioned as key challenges for the Government: how to most efficiently use the existing resources, which are currently invested into institutional care, for the development of community-based services, and how to identify which community-based services should have priority in the allocation of funding.

Dr. Tatjana Voskreneski, from the Ministry of Health (MoH) and a director of a psychiatric hospital, highlighted the need for strategic de-institutionalisation plans in the long-stay residential institutions. Referring to the existing legal and regulatory framework, she noted that the Mental Health Strategy adopted in 2007 did refer to de-institutionalisation, but that for a long time after its

² Available at: www.deinstitutionalisationguide.eu

³ Available at: <http://ec.europa.eu/social/BlobServlet?docId=3992&langId=en>

adoption nothing was done. This was followed by a Law on the Protection of People with Mental Disabilities adopted in 2013, which despite some criticisms, is considered as adequate by the MoH. Following the adoption of the Law, regulations were drafted about the centres for mental health, but they have not been approved so far for lack of quality standards. Dr. Voskreneski noted that, although the Law cannot be changed, there is still scope to change the sub legal acts (i.e. the regulations) in order to support the process of de-institutionalisation. At the moment, the Ministry is planning a gradual reduction in the capacity of the 5 large psychiatric institutions, with the parallel development of community-based services. Some institutions have already reduced the number of beds, but unfortunately without the development of alternatives; thus resulting in the transfer of residents to other institutions. Looking towards the future, Dr. Voskreneski noted that two large hospitals received project funding to form (community) centres for mental health. She added that each institution will have to draw up their own transformation plan, in line with the EU standards and practice. For the implementation of any strategic and action plans, Dr. Voskreneski noted the importance of central government support (i.e. by the MoH), considering some of the issues which have already been experienced by ongoing projects. These include resistance by the local community to the process of deinstitutionalisation, for fear of job losses and due to stigma. She concluded by asking a question about the sustainability of EU funded projects, the follow up of which remains unknown.

Damjan Tatić, a member of the UN Committee on the Rights of Persons with Disabilities from Serbia, provided an overview of the Committee's recommendations in relation to Article 19 (the right to live independently and being included in the community). He then commented on the situation in Serbia, noting poor accessibility of the built environment and lack of access to personal assistance. Although the legal framework (i.e. the Law on Social Welfare) is adequate, services such as personal assistance have been made the responsibility of the local government, without a mechanism to ensure that it will be provided by them. Mr. Tatić also highlighted that, while there is good practice in de-institutionalisation of children's services, thousands of adults are still segregated in institutional care. He spoke about the difficulty of closing institutions without community-based alternatives in place, and noted the need for a reform of the outdated guardianship system. Finally, in relation to the Law on the Protection of People with Mental Disabilities, Mr. Tatić noted with concern that amendments proposed by organisations of people with disabilities failed to be taken into account.

Saša Štefanović, from the Network of Children's Organisations, delivered the first part of the NGO statement (Annex 2). He focused on the importance of inclusive education and noted that currently children with disabilities are provided with services which in practice often replace regular education, rather than support education in the mainstream. Mr. Štefanović also highlighted the need to better use existing resources and the importance of intersectoral cooperation.

Dragana Ćirić Milovanović, from the Mental Disability Rights Initiative – Serbia, called for an end to admission of children and adults with disabilities to institutions and the development of community-based alternatives. She noted the importance of starting de-institutionalisation with those with the highest support needs, rather than targeting just those who do not require extensive support. Ms. Ćirić Milovanović raised concerns about the lack of sustainability of pilot projects and the lack of financial support to NGOs, many of whom provide community-based services. Finally, she highlighted the need to involve service users in the planning and implementation of reforms – something which has not so far been the case.

The last point was confirmed by **Vesna Avramović**, from the Association of users of psychiatry “Duša”. She reflected on the strong stigma against people with mental health problems in Serbia and their difficult situation. Ms. Avramović noted that mental health care continues to be provided in psychiatric institutions, which are overcrowded, lack professional staff and provide inadequate support. Moreover, residents of institutions continue to be isolated not just from the community, but also from their families. Ms. Avramović highlighted the importance of working with the staff of institutions, many of whom fear they will lose their jobs as a result of the reforms. She also noted the need for more data about the needs of mental health service users and attitudes of the health professionals. Finally, she concluded by highlighting the importance of service user organisations, eight of which are active in Serbia in the field of mental health, and the need for financial support by the Government.

Discussion

During the discussion that followed the opening sessions, the following points were made by the conference participants:

- A member of the **Association of users of psychiatry “Duša”** questioned the use of ECT (electroconvulsive therapy), as well as the practice of plenary guardianship (i.e. a complete loss of legal capacity), which is still applied widely in Serbia in relation to people with mental health problems.
- A representative of the **Centre for Independent Living (CIL)** noted the good normative framework in Serbia, which provides for a range of community-based services. However, she highlighted the many problems that arise in practice, caused by the lack of understanding of what these services entail and how they should be provided, as well as the lack of funding. In addition to the lack of awareness by the centres for social welfare, the Belgrade municipality, for example, published a tender for the provision of personal assistance, where this service was classified as a medical service, with no reference to existing quality standards. The only condition for the tender was previous experience with similar tenders, irrespective of the fact that this was the first tender of its kind. As another example, she noted that some residential institutions provide what is referred to as “personal assistance”. Furthermore, the CIL representatives

raised concerns about the difficulty in obtaining funding for the provision of personal assistance, despite the fact that they are an accredited provider. She therefore called for a strategy to be adopted on raising awareness about the importance of community-based services and the training of officials at the local and national level.

- A representative of the **Association for Promoting Inclusion Serbia**, which started piloting community-based services in 2004, raised concerns about the fact that despite the many positive developments, some of the ongoing reforms continue undermining the process of de-institutionalisation. They noted that there is ample expertise in the country on alternatives to institutional care, but what is needed is the political will to carry out the necessary reforms.
- A representative of a **parent association of children with disabilities** noted the lack of support to families, as well as the scarcity of information about the rights of children and families in relation to services. They also raised concerns about the fragmentation of services, which results in families receiving fragmented, inadequate support.
- A representative of **IDEAS** called for the need to consider sustainability of services, which are currently funded the local authorities. He urged for the need to be realistic, in terms of what services can be provided given the available resources.
- **Prof. Miroslav Brkić**, from the Faculty of Political Science and a contributor to the EU funded “Open Arms Project” supported previous statements about the solid normative framework in Serbia, but considerable implementation problems.
- Asked about **strategic planning** in Serbia, it was noted by the MoLEVSA representatives that de-institutionalisation will be included in a framework for the reform of social care, focusing on enabling social inclusion of people with disabilities, which is currently being drafted. To this end, a working group was established by the Ministry, which includes, among others, representatives of the “**Open Arms Project**” (as part of which transformation plans are being developed by a number of social care and psychiatric institutions). This statement was supplemented by the “Open Arms” coordinator Monika Gabanyi, who informed the participants that one of the main components of the project is the work with the Ministry on a strategic document, in order to ensure sustainability of the project.
- A representative of the MoH informed the participants that a new expert group on mental health was formed by the Ministry, with the objective to develop a strategic plan for the transformation of institutions. For the moment, this is not coordinated with the efforts (i.e. the above mentioned working group) of the MoLEVSA in the area of social care. In this respect, there were calls by the participants for improved **coordination** among

the different Ministries and sectors, to facilitate exchange of know-how and ensure that different processes support each other. A representative of MDRI-S noted that a *Roadmap for De-institutionalisation of Services for Adults with Disabilities*, launched just days before the conference by the Office of the Ombudsman and presented in the Parliament, should also be taken into account by the relevant Ministries in view of better coordination between different stakeholders in the country. User involvement, through representation of users in the relevant working groups, was also highlighted as crucial.

Afternoon session – Parallel workshops

In the afternoon session, participants had the opportunity to choose between two workshops, with one focusing on children (moderated by **Katlin Brašić** from UNICEF) and one on adults (moderated by **prof. Miroslav Brkić** from the Faculty of Political Science). Conclusions from both workshops are presented below.

Workshop I: Preventing the placement of children in institutional care

Before the discussion, two presenters provided an overview of the situation and the key challenges in Serbia – **Sanja Miloradović** from the Republic Institute for Social Protection and **Zoran Milačić** from the Centre for infants, children and youth “Zvečanska” (a residential institution for children which is developing services in the community). **Prof. Vito Flaker**, from the University of Ljubljana, presented some experiences from Slovenia.

The workshop highlighted the need for a common vision, which should be that no child belongs in an institution. In relation to services, participants noted the need to clearly define a range of services that are needed, with a focus on family support. Flexibility was also noted as being of key importance, because participants felt that at the moment users need to “fit into” services rather than services adapting to user’s requirements. This means that community service standards should not be overly rigid and restrictive.

The workshop welcomed Serbia’s progress made in the area of foster care that has now become more inclusive of children with disabilities, but raised concerns about the fact that the “new” draft by-law regulating fostering has still not been adopted. Other problems that were noted include: the fact that social care community services for children and youth with disabilities are used as an alternative to education and inclusion, rather than as a catalyst for education and community inclusion.

The financing of community-based services was also identified as a major concern. Whilst local governments are mandated to finance community services, there are no mechanisms to hold them accountable, to ensure they would do so. National funding of community services is currently not regulated, given that the by-law on earmarked transfers to municipal governments for community service provision has not been adopted. Participants agreed that the current funding

from the national level is not strategic and has to be clearly regulated. This situation has led to the lack of sustainability of services (with, for example, only 65% of services funded by the EU through IPA in 2008 continuing to be available 1.5 years after the end of funding).

Finally, the workshop expressed concerns because of the lack of support parents with newborn babies with disabilities receive after the birth. It was noted that the current practices – that separate mothers from newborns - lead to bond breaking and increase the risk of abandonment and institutionalization. With this and the other concerns in mind, the workshop participants called for a plan with clear objectives, resources and assigned responsibilities.

Workshop II: Transition from institutional care to community-based services for adults

Neda Mišćević, from the Association for Promoting Inclusion (API) in Croatia, presented Croatia's experience with de-institutionalisation. API is the implementing partner of the Ministry of Social Policy of Youth in this process, which has started on a larger scale four years ago. The workshop, therefore, focused on sharing lessons learned and common challenges in the two neighbouring countries.

One of the key lessons from Croatia, which was also supported by the workshop participants, was that it is not necessary to build new infrastructure in order to start the process of de-institutionalisation. Instead, rented apartments or properties belonging to the service users can be used to help them move back into the community. Similarly, it was noted that, rather than delay the process of de-institutionalisation until all the community-based services are in place and the society is "ready", the two processes (i.e. the closure of institutions and the development of community-based alternatives, including training and awareness raising of social welfare centres and the public) need to happen in parallel. There was once again discussion about the sustainability of EU funded projects and the importance of government support to continuing the work that has been done, and making it part of the range of services provided.

The workshop urged for a change in attitudes, which should move from a paternalistic approach to the one based on partnership. It called for a more systemic approach to developing community-based services such as supported living (referred to as 'organised housing'), and the involvement of the MoH (where one cannot speak of any substantial number of residents who have been reintegrated into community). Finally, the workshop highlighted the need to work with the communities, in order to tackle the stigma and opposition to de-institutionalisation by the general public.

Conclusions

In the concluding session, the co-organisers of the seminar delivered the main conclusions of the day and recommendations for the way forward. **Nenad Ivanišević**, the Secretary of State in the MoLEVSA, re-confirmed the Ministry's

commitment to continue implementing the process of transition from institutional care to community-based services. He highlighted the need to decentralise the way services are funded, in order to ensure that local authorities have the capacity to provide those services which they are responsible for. In this respect, he also noted that the money should follow the client. Mr. Ivanišević agreed with the seminar participants who called for more work with the communities and the society as such about the importance of de-institutionalisation. He concluded by saying that the MoLEVSA remains a partner in the process and is open to working with other stakeholders.

Nataša Kokić reminded the participants about the importance of coordination and of avoiding parallel processes and efforts which do not mutually support one another. She added that de-institutionalisation should not be seen as an isolated process, but rather a part of broader reforms, in line with Serbia's international and EU commitments.

On behalf of EEG, **Jan Pfeiffer** called for a commitment by all actors to being transparent, and reminded the participants about *the Common European Guidelines for Transition from Institutional to Community-based Care*⁴, which remain an important reference document to be used by the Government, local authorities, service providers and other stakeholders involved in the process of de-institutionalisation.

This report has been drafted by Ines Bulic, from Inclusion Europe, for the EEG. Note that its contents doesn't necessarily reflect the views of each organisation in membership of the EEG.



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⁴ Available at: www.deinstitutionalisationguide.eu

Summary of the seminar conclusions

- There is a need for improved coordination among the different Ministries, especially the Ministry of Labour, Employment, Veteran and Social Affairs (MoLEVSA) and the Ministry of Health (MoH), as well as other actors, in order to avoid parallel processes that are not mutually supportive. As one of the initial steps, there should be some coordination between the working groups established by the two Ministries.
- Sustainability of EU funded projects has been noted as an issue and calls for a commitment by the Government to ensure continuation of EU funded de-institutionalisation initiatives and good practice models.
- Despite a sound normative framework, implementation is still lagging behind, and there is a need to develop a range of services in the community, including family support services.
- In relation to children, there is a need for improved early intervention services and for improved access, with adequate information, by families to the needed services.
- User involvement in different stages of the reform should be recognised as being of key importance, with adequate funding provided to organisations of service users by the Government.
- More efforts are needed when it comes to de-institutionalisation of mental health services, including strategic plans for the transformation of psychiatric institutions. The objective should be not just to reduce the number of beds, but ensure that residents of psychiatric institutions can be successfully reintegrated into community.
- There is a need to better allocate existing resources. This implies establishing which community-based services should be prioritised for funding, and ensuring that local authorities have the resources necessary to provide services provided for in the Law on Social Welfare.
- Reforms are needed in the area of education, with the objective to provide inclusive education for children with disabilities.
- Reforms are also needed with regard to legal capacity, resulting in the introduction of supported decision making and abolishing plenary guardianship.
- Wider education, training and awareness raising initiatives are needed, targeting in particular centres for social welfare, local authorities, but also the media and the general public, in order to improve understanding about different forms of community-based services and what the process of de-institutionalisation entails. Related to this, a change of attitudes – from paternalism to partnership – is considered as key to making the process a success.