

















CASE STUDY

Holistic support people with intellectual and mental disabilities newly established community social welfare services

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Preface

Supported Housing is a form of care for people with intellectual disabilities that allow users to live in accordance with individual needs and resources. De-institutionalization, ie. permanent beneficiary support in the community, outside of stationary institutions of social protection, it is still underdeveloped system in Serbia and sporadically implemented in several communities. The experience of existing services for independent living shows that this practice contributes to independence and greater equality. Networking with similar service: Home Assistance for people with intellectual and mental disabilities as well as the sectors of health, employment and the economy, in a small community such as municipalities Vlasotince, southern Serbia, opens new perspectives in effective holistic support for independent living in the community for this target group. Working together in the realization of this program, members of the network Konekta - IRIS Serbia, was crucial for the effectiveness and achieving the required results. In addition to carrier services in Vlasotince, OSMEH organizations, members of the network, the program support given by the following members of the network Konekta IRIS Serbia:

- » Association for Promoting Inclusion Belgrade (transfer of experiences and good practices as well as the training of professional and support staff)
- » NGO Children's Heart Belgrade (training for professional work with persons with intellectual and mental disabilities of all sectors in the community)
- » NGO Duga Ada (support in equipping the premises and materials for the working engagement of beneficiaries - Independent living with Home Assistance service)
- » Educational Centre Leskovac, national coordinator of the IRIS network (Support in the preparation of the project proposal, the implementation of mentoring programs, the establishment of logistics services)

1. Description of the innovative and sustainable example

Under the project "Establishment and development of support services for Independent Living for people with intellectual and mental disabilities in the municipalities of Vlasotince and Crna Trava", Centre for Education SMILE, Iris Network partner in Vlasotince, in cooperation with municipality of Vlasotince and EDC team has established services for Independent living for 4 beneficiaries (relocated from the institution for stationary stay) as well as Home Assistance service for 25 beneficiaries with intellectual disabilities who live in the territory of the two municipalities. The project is implemented within Programme IPA 2011 and the National Programme "Open Embrace" and financially supported by the Municipality of Vlasotince and the Ministry of Labour, Employment and Social Welfare.

The service provider, NGO SMILE, has hired 8 employees under the project – 6 assistants, 1 caretaker, 1 driver. From health protection sector, two doctors were engaged – 1 psychiatrist and 1 psychologist. Also, significant contribution to the project implementation was given by volunteers – 2 general practitioners and 3 members of the Association from the Department of Ecology (one of the volunteer is a person with disabilities).

Housing service, supported through the project, is provided for 4 beneficiaries. Among them, two beneficiaries were moved from the Institute for Care of Adults "Male pcelice" (Kragujevac) to the housing centre, while two other persons from Vlasotince and Crna Trava are situated in housing premises instead of being institutionalized.

Simultaneously with the Supported housing service, 25 people with mental and intellectual disabilities from Vlasotince are provided with Home Assistance service. The group of beneficiaries is heterogeneous in terms of gender, age, nationality, type and degree of disability.

Beneficiaries participate in the activities of local communities (celebrations, holidays) and visiting public places – cafes, theatre, swimming pool, promenade, in accordance with their capabilities. They also assist in the provision of Home Assistance Service for PwD.

Within working therapy, the beneficiaries of the Supported housing service are active in the maintenance and regulation of green areas in the municipality of Vlasotince, and volunteers from NGO "SMILE" assist them. In addition, beneficiaries and volunteers are currently working on adaptation of a Daily Care and sheltered workshops for People with Intellectual or Mental Disabilities in Vlasotince.

People with intellectual or mental disabilities are facing difficulties and limitations in every-day functioning. This implies limited capabilities in the field of communication, self-care, acquiring social skills, functional skills, leisure and work. They need significant assistance to achieve the highest possible level of independence and integration into the community. Therefore, the solution is based in innovative approach which combines two services – Self Housing and Home Assistance Service, along with inter-sectoral, structured program created in partnership with the health protection sector.

Housing Service allows adequate support to beneficiaries in their natural environment, while retaining some traits of institutional treatments such as structuring conditions, programs and a certain degree of control. The configurations of supported Housing Service include allocations to a special group of people, much less stigmatizing in comparison to institutional treatment. The person is still referring to restrictive social milieu, this time in natural environment. Therefore, particularly important are the program units aimed at organizing community.

Home Assistance service for persons with intellectual and mental disabilities and persons with disabilities should contribute to compensate for such limitations and enable to beneficiaries and their families to behave for them in the highest possible capacity.

After the initial expenses needed at the beginning, the programs of community services are often cheaper than placement in institutions and the quality of services to meet the needs of users is clearly on the side of services in the community.

Financial support to the initial introduction of such services is Financing the establishment of such services is the most important process for the initial establishment of quality beneficiaries support that local administration can provide in terms of very low available budget.

















2. A qualitative assessment of the local social realities

Social Welfare Development Strategy for the Municipality of Vlasotince period 2011-2016., defines as one of the priorities the establishment of support programs for children, youth and family PwD and persons with intellectual and mental disabilities, with associated goals:

- 1. Organised support services for independent living.
- 2. Provided quality health care and rehabilitation for persons with intellectual and mental disabilities, children and youth with disabilities throughout the municipality.
- 3. Raise awareness in the environment in which persons with intellectual or mental disabilities live, as well as the initiation of advanced programs and expansion of beneficiary's protection services.

The direct target group is selected on the basis of analysis and research of needs. These are persons with the most severe diagnosis whose parents / guardians have so far failed in a different ways to protect their interests in the context of daily services in the community that they do frequently for them in the sense that they derive from total isolation. Researches have confirmed there is significant number of such persons (whether they are receiving the care and aid) but after talking with them and their families / guardians, after extensive certain detailed guidelines from the Centres for social work and health centres, the conclusion is that the Supported Housing Services begin using 4 beneficiaries in the first year of the service, with a tendency to increase the number of returning beneficiaries of stationary institutions of social care in the community. Also, Home Assistance service begin with inclusion of 25 different categories of beneficiaries (PwD, PDDs) mainly from rural local communities in the municipality of Vlasotince, which is an aggravating circumstance for the service provider, due to the distance of some local communities.

Direct approach to a person, as a basic principle of services that the project set up, includes not only the specific methodology, but establishing a participatory approach to beneficiaries / carers in creating the service plan as a plan of support for independent living, as well.

Plan of service providers and beneficiaries of services offers recomendations in all the structural elements of a service such as:

- » Values and principles respect, autonomy, dignity, choice, privacy and independence
- » Relations in a surrounding society, with and among beneficiaries, which in addition to professionalism have to include personal touch and warmth
- » Continuous staff's self improvement
- » Management of the so-called transformational management style
- » Direct provision of services
- » Realization of purposeful life of users
- » The importance of the environment or the community
- » The responsibility



3. Means-tested analysis of the 'beneficiaries'

The expert team made up of representatives of the social protection and health care, makes a framework for the provision of supported housing services. 4 beneficiaries had passed a series of workshops and training for independent living, such as cooking and preparing food, hygiene space and personal hygiene, money management, house rules and individual responsibility, fear and risks, work program. During the training, special attention was paid to the individual needs of beneficiaries – they are involved in decisions about the layout of rooms, giving an individual touch to the appearance of shared premises

To ensure high competence and full protection of the target group, which is sensitive and requires high professionalism, to the beneficiaries of residential institutions back into the community within established a service and other beneficiaries in other institutions to preparing for deinstitutionalization. It is necessary to train skilled workers and associate trough programs accredited by the Ministry of labour and social welfare. Training for professionals in the social welfare system for the process of transformation of institutions and deinstitutionalisation, work with parents, carers and the local community

The implementation of this educational process is enabled and the provision of services for preventing institutionalization, such as reception station and Home Assistance service for people with intellectual and mental disabilities.

A trained professional team services for the integrated protection of persons with intellectual and mental disabilities visiting all beneficiaries who are placed in residential institutions, defines the situation and the needs of beneficiaries as well as opportunities for deinstitutionalization and return to the place of residence, that is, the potential for the use of Supported housing and Home Assistance service.

Mobile Service team for the integrated protection of persons with intellectual and mental disabilities is visiting all beneficiaries who are in place of residence or foster families, identifying the needs of beneficiaries and as well as opportunities for the prevention of institutionalization and remain in their place of residence, that is, the potential for the use of Housing with support and Home Assistance service.





The life story of G.N. from the Kalna village, municipality of Crna Trava

One of the beneficiaries of Centre for Social Work in the municipality of Crna Trava is G.N. from Kalna village – adult with mental dissabilities, totaly incapable for independent life. He lives under custody and protection of professional social workers in Centre, after long time of being left alone in very unpleasant life coditions.

After his mother death, G.N. lived in his birth place. The evaluation of his life conditions, done by Centre for Social Work, revealed that he does not have optimal conditions for a dicent life. Within the report of the Centre, it was emphasized that "living conditions of beneficiary are far below the avarage. He lives in inadequate hygienic neglected areas; changes places of housing often – does not have a residential area". He slept nearby stables, accompanied by cows and goats, without bed. During summers but also during very cold winters typical for this region (sometimes the temperature is lower then -20°C), he often slept between the haystacks. Furthermore, the report is showing that he was not used to take care o himself, not even in terms of basic hygiene habits. The locals used him for tough jobs, and in return they bought him cigarettes and allowed him to sleep a couple of times in their yard. As he was beneficiary of social assistance, he was irrationally spending money – did not know the value of money; did not know how to use prescribed therapy, etc.

In 2012 he was finally placed in the social care institution, but soon left the institution and returned to his old way of life.

In January 2015, he become beneficiary of the service "Supported Housing for people with intellectual and metal disabilities in Vlasotince", provided by NGO Smile from Vlasotince. Team of experts and nurse, who provided service of supportive housing, accepted this beneficiary for the period of adjustment. In the beginning, it was necessary to invest a lot of effort into adopting hygienic habits of the beneficiary. The process of his recovery and adjustment was long and hard, but resulted in a success.

Today G.N. lives in Vlasotince with significant support of caregivers, taking long afternoon walks with his girlfriend S.J. who is living in the Institute for the Care of Adults "Male pcelice" in Kragujevac. Both of them are using service of Supported Housing. Together they go to the store; taking care of their pet - a dog named Luna; carry out simpler housework with the support of nurses, watch TV and socialize.

The Convention on the Rights of Persons with Disabilities, and the other are Single European guidelines for the transition from institutional care to care and support in the community. Unique European guidelines for the transition from institutional care to care and support in the community is a practical guide for the implementation and support sustainable transition from institutional care to alternative services providing care and support of family and community services for children, people with disabilities, people with mental disorders and elderly in Europe (Common European Guidelines on the Transition from Institutional to Community-based Care European Expert Group on the Transition from Institutional to Community-based Care, Brussels, Belgium, November 2012). One of the result's initiative launched by Commissioner EU employment is establishing a working group for the transition from institutional care to community support. After years of process analysis and collection of examples of good practice and pooling knowledge from all parts of Europe, it was concluded that it is necessary to make certain reforms in the European Union the Member States in accordance with these Guidelines and Manual, which correspond to the strategy of Europe 2020

Law on Ratification of the Convention on the Rights of Persons with Disabilities was ratified by the Republic of Serbia in 2009. The principles on which it is based, represent the evolving standards of medical care and rehabilitation relating to persons with disabilities. Unique European guidelines for the transition from institutional care to care and support in the community is a practical guide for the implementation and support sustainable transition from institutional care to alternative services providing care and support of family and community services for children, people with disabilities, people with mental disorders and elderly in Europe.

Qualitative assessment on the up scaling potential

Experts have concluded that support services based in the community and programs supported living arrangements almost universally provide people with intellectual and mental disabilities a better quality of life than the institutions of the stationary type. This is partly because such programs allow for more social inclusion for individuals with disabilities and can provide better individual protection than institutions, where services are more often group-oriented.

past decades, while the Ministry of Health claim that mental difficulties affect up to 400.000 people. According to a survey from 2013, the presence of depressive symptoms in the adult population is associated with material status, age and gender. Mental health policy of a country consists of measures that should encompass all aspects

















4. Reference to relevant EU policies

Two international documents are relevant to the issue of the people with mental disabilities. The first one is

According to the conclusions of a study of institutions and their alternatives in 28 countries from 2003 to 2007, and commissioned by the European Union, support programs based in the community are often no more expensive than institutional care of comparable quality, and when they did (such as for persons with severe disabilities), community services are more or equally cost-effective since the increased quality of life for beneficiaries offsets the additional cost.

In the 17 residential institutions for persons with mental disabilities, mental health and people with physical disabilities accommodated 5,574 beneficiaries. Most were accommodated outside their place of residence (between 70-80%). The number of citizens who need support for their psychological and physical condition is higher than that, often due to lack of other services in the local community (living room, a small residential community, etc.), Located in institutions, and their rights are compromised due to the inability to satisfy the existential need adequately.

Mental disorders in Serbia is one of the biggest public health problems, caused by significant level of stress in of mental health: from prevention, assistance to the training of staff.

One of the barriers to deinstitutionalization is the stigma often associated with mental disabilities. Stereotypes including that persons with mental disabilities are responsible for their own illness, are dangerous, or that they are like children and be with them both and act - often impact the broader community to accept such individuals. Research shows that the best way to combat this antipathy is to encourage contact between the general public and persons with mental disabilities, but this contact is difficult to achieve as long as persons with mental disabilities remain institutionalized.

Although deinstitutionalization is encountering numerous obstacles, extensive research into the experience of other countries has shown that it is indeed a viable option for all persons with intellectual or mental disabilities. As two leading scholars said: "The most important questions about services no longer concern of whether to replace the institution feasible, but related to the nature of the services that will be replaced, and the extent to which these societies are politically committed to enabling people to ... realize their potential as citizens."



IRIS NETWORK IS A UNIQUE REGIONAL NETWORK THAT BRINGS TOGETHER MORE THAN 160 CSOS, SOCIAL SERVICE PROVIDERS IN SOUTH EAST EUROPE. BASED ON VISION OF EQUAL RIGHTS AND OPPORTUNITIES FOR DECENT LIFE FOR ALL, THE NETWORK HAS BEEN CREATED TO ENSURE SOCIAL INCLUSION AND STRENGTHEN THE ROLE AND CAPACITIES OF NON-PROFIT SOCIAL SERVICE PROVIDERS THROUGHOUT SEE. MEMBERS OF THE IRIS NETWORK PROVIDE NECESSARY SOCIAL SERVICES TO OVER 10000 BENEFICIARIES DAILY.



Authors:

Željko Plavsić and Ljubinka Cvetanović



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