



Reflections on the 2019 European Semester: Country Specific Recommendations

European Expert Group on the Transition from Institutional to Community-based Care

Introduction

On the 5th June, the European Commission published the [Country Specific Recommendations \(CSRs\)](#), tailor-made policy advice to Member States on how to improve the impact of policies and better invest resources.

In the last few years, the European Expert Group on the Transition from Institutional to Community-based Care (EEG) has closely followed and worked on the European Semester process to ensure that policies on the transition from institutional to community-based care would be adequately integrated and monitored in the process. Earlier this year, the EEG prepared its reflections on the [2019 Country Report](#), analysing how the state of deinstitutionalisation in various EU Member States was reflected and providing advice to the European Commission in the drafting of the CSRs.

Following the CSRs publication, the EEG has prepared its reflections taking into account its recommendations issued following the Country Reports. These reflections also include recommendations on what should be included in the Operational Programmes for the post-2020 funding period and the next investment priorities.

Analysis of the 2019 CSRs and our recommendations

The EEG is pleased to see that the 2019 CSRs contain a strong focus on social inclusion through recommendations, which are centred on more inclusive education systems, access to the labour market for people in vulnerable situations and better coordination among services (i.e. health and social services). Although no CSR – except the ones for Latvia – has a specific mention of the transition from institutional to community-based care, the above-mentioned areas are critical to an effective deinstitutionalisation process.

Albeit not mentioned, the EEG strongly believes that the need to further and better invest in the transition from institutional to community-based care should be included in the implementation of the CSRs by all Member States. This would include support to families and the development of family and community-based services. Similarly, deinstitutionalisation should be an investment priority in all the next Operational Programmes.

In the case of **Belgium**, the EEG is pleased to see that improving “the performance and inclusiveness of the education and training systems” is mentioned specifically in the second CSR, responding to Belgium’s

well-known problem of segregation of children with disabilities. It is also positive that the recommendation focuses on strengthening “the effectiveness of active labour market policies, in particular for the low skilled [...] workers” as well as addressing skills mismatches through training. Both of these positive recommendations for fostering inclusive education and supporting employment will improve opportunities for people in marginalised situations. Provided that these measures are accompanied by investments in personal support and community-based services, this will reduce the possibility of poverty, social exclusion and the threat of institutionalisation. However, it is highly regrettable that no recommendation addresses the burning issue of a persisting culture of institutional care in Belgium, or the need to establish a deinstitutionalisation strategy between the federal and federated entities, as addressed in the Country Reports. It is a lost opportunity that should be addressed adequately by making deinstitutionalisation an investment priority in the next Operational Programmes for Belgium and the allocation of adequate resources to carry it out.

The EEG finds it positive that the CSRs for **Bulgaria** acknowledge that Bulgaria “invests insufficiently in education, particularly in pre-primary and primary education” highlighting that these areas “are instrumental to creating equal opportunities from an early age.” Early inclusive education is crucial for Bulgaria’s efforts on social inclusion and deinstitutionalisation. The Country Report emphasised the need for Bulgaria to continue efforts on “prevention, family support and early intervention”, which regrettably are missing in the CSRs. It is however welcomed that the CSRs recognise that “social services are hampered by low quality and lack of an integrated approach towards active inclusion”. The EEG is also pleased to see that the Bulgarian CSRs mention the need to “address social inclusion through improved access to integrated employment and social services and more effective minimum income support.” Furthermore, the EEG welcomes the recommendation to “improve the quality, labour market relevance, and inclusiveness of education and training, in particular for Roma and other disadvantaged groups”, as children of Roma origin and children with disabilities continue to be placed in residential care in Bulgaria. Nevertheless, better access to integrated employment, education and services is only one step. To ensure full and effective deinstitutionalisation, the EEG would like to see an added recommendation on improved quality and accessibility of mainstream, community-based social and support services. This recommendation could be further strengthened by adding improved family-based care and support for families to prevent placement of children in alternative care. Universal social services, targeted to all families with children, especially in early ages, should be broadly developed. This is a milestone measure in the context of the prevention of future risks.

The 2019 Country Report for **Croatia**, including the Annex D, highlights the importance for “the move from a model based on institutional care to one relying on support for family- and community-based care for children who cannot stay with their families and the disabled” and identifies that this move “faces challenges.” It also points out that the number of children growing up without parental care is growing. The Country Report acknowledges that there has also been moderate improvement in deinstitutionalisation of adults, including people with disabilities. However, neither a major legislative framework to consolidate the shift towards community-based support, nor sufficient funding for this shift, has been secured. Consequently, the process of deinstitutionalisation of both adults and children has practically come to halt in recent years. We can also observe an increase of disabled adults being placed in foster care due to the lack of support and good quality, accessible community-based services; a practice which has been reinforced by the recently adopted Act on Foster Care. Coordination between different sectors (health, social, education) as well as local governments also remains a challenge. Annex D policy objective 4 emphasises need to invest in inclusive education, social services and infrastructure of centres to support vulnerable groups and families and in the transition from residential/institutional care to family and community-based care. Similarly, the 2019 CSRs for Croatia, in particular the second CSR, calls for

investment in education, social inclusion and labour market measures. While improved access to an inclusive labour market and education system are important elements of deinstitutionalisation, it is important to ensure that they are accompanied by an increased investment in good quality, accessible mainstream and community-based services. With regards to harmonising social protection systems, CSR1 calls for reducing territorial fragmentation of public administration and CSR3 calls for investment to increase the administration's capacity to design and implement public projects and policies.

The Country Report for the **Czech Republic** stated that “long-term care focuses mainly on institutional care, which may not always be cost-efficient” and that “the system would benefit from further investment in primary, integrated, and psychiatric care, including in the required infrastructure. As a result, in the Czech CSRs, the European Commission recommended improving the long-term fiscal sustainability of the health-care system. While positive, the EEG recommends implementing this CSR by broadening its scope beyond the health-care system. In order to ensure a (financially) sustainable and effective deinstitutionalisation process, it is essential to invest sufficiently in mainstream, accessible, community-based care and support services on an on-going basis. Therefore, the development of adequate community-based services and the better integration of health and social services should also be a core part of the next Czech Operational Programme.

The EEG finds it positive that the CSRs from **France** included fostering “labour market integration for all job seekers, ensure equal opportunities with a particular focus on vulnerable groups [...] and address skills shortages and mismatches.” Support for employment offers opportunities for autonomy and upwards mobility of persons from marginalised groups. If accompanied by adequate investments in good quality, accessible, mainstream and community-based support services, these initiatives can go a long way towards preventing the institutionalisation of adults. Regrettably the CSRs overlook France's persisting prevalence of institutional care settings and lack of community-based services. Furthermore, measures for preventing the institutionalisation of children and supporting families in the shift to community-based care seems to be largely absent. This is also reflected in Annexe D, which contains no reference to inclusion of persons with disabilities, except for a reference to inclusive education and training. This is a missed opportunity that ignores what is proving to be a pressing issue in the French context. The EEG strongly advises to tackle these pressing issues when drafting the French Operational Programmes and to include an investment priority on the transition from institutional to family and community-based care.

It is very positive that the second CSR for **Greece** calls on the country to “focus investment-related economic policy on [...] education, skills, employability, health” with a focus on “the need to ensure social inclusion.” It is essential that this point on “social inclusion” be interpreted in light of the stress put on deinstitutionalisation in the Country Report, and the mention in the CSR's recital 13 of the need to “[Support] the most deprived and promoting the social integration of children at risk of poverty, of persons with disabilities”. Taking this into account, the EEG recommends implementing the CSRs by tackling the pressing issue of the existence of institutional care settings for children with disabilities, the lack of policies for alternative good quality, mainstream, accessible and community-based care and support settings, as well as the lack of suitable family-based care and support for all children and teenagers. These issues should also be further addressed by including deinstitutionalisation and the provision of adequate community-based services as investment priorities in the next Greek Operational Programme.

In the Country Report for **Hungary**, it was noted that “the conditions for independent living could still be improved” and that “the supply of support services for community and home care is strongly limited.” We regret to see that the Hungarian CSRs do not mention the need to improve the conditions for independent

living, as it had been suggested by the EEG. Since the deinstitutionalisation process is currently taking place in Hungary, there is a strong urgency to make substantial changes to the process for it to be compliant with human rights standards. The EEG calls for these to be put in place urgently. Nonetheless, we welcome that the Hungarian CSRs include the recommendation to “continue the labour market integration of the most vulnerable groups” and to support preventative health measures. If accompanied by adequate investments in good quality, accessible, mainstream and community-based support services, inclusion in the labour market, as well as adequate prevention of social exclusion and segregation, these can be positive elements in the deinstitutionalisation process and a step towards better social inclusion.

In the Country Specific Recommendations for **Portugal**, it is hopeful to see that there have been improvements in labour market conditions that are resulting in fewer people at risk of poverty or social exclusion. However, as stated, income inequality remains high despite this improvement. Currently, the impact of social transfers and poverty reduction is not achieving its intended outcomes. As such, the EEG is pleased to see that in the second CSR, there is specific mention to “improve the effectiveness and the adequacy of the social safety net” as a response to the gaps in Portuguese society created through high levels of income inequality. Furthermore, in this area of work, the same CSR calls for Portugal to “adopt measures to address labour market segmentation”, “improve the skills level of the population” by making adult learning more relevant to labour market needs, and finally “increase the number of higher education graduates”. While the CSRs for Portugal do not explicitly reference deinstitutionalisation, calls to strengthen the efficacy of the social welfare system, and address gaps and skills mismatches in the labour market will have a positive impact on people at risk of poverty or social exclusion. This, together with adequate investments in good quality, accessible, mainstream and community-based support services will reduce the threat of institutionalisation.

About the EEG

The European Expert Group on the Transition from Institutional to Community-based Care (EEG) is a broad coalition gathering stakeholders representing people with care or support needs and their families, including children, people with disabilities, homeless people, people experiencing mental health problems; as well as service providers, public authorities and intergovernmental organisations. The Group has as its mission the promotion of person-centred, quality and empowering models of services and formal and informal care that fully respect the human rights of all people with care or support needs. The Group supports national efforts to implement the necessary reforms, in compliance with the United Nations Convention on the Rights of Persons with Disabilities (in particular with Article 19), the United Nations Convention on the Rights of the Child and the European Charter of Fundamental Rights.

Contact details

EEG Coordinator: coordinator@deinstitutionalisation.com
www.deinstitutionalisation.com