

TRANSITION FROM INSTITUTIONAL CARE TO COMMUNITY-BASED SERVICES IN 27 EU MEMBER STATES



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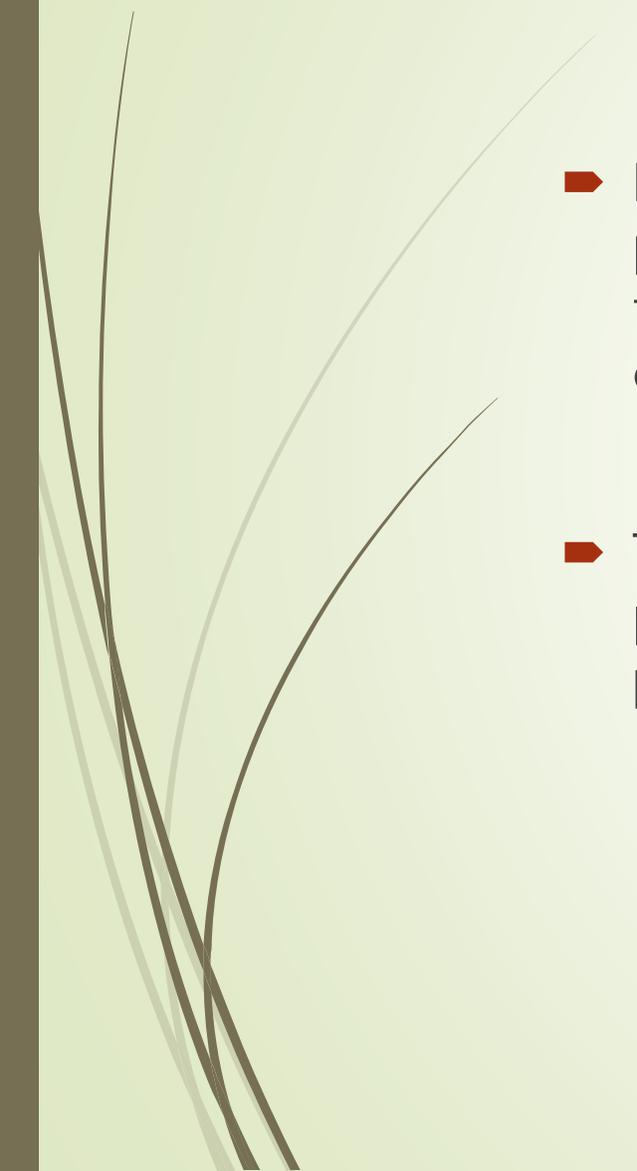


Aims of the study

- ▶ **to collate information about policies and plans, changes over time,** strengths and areas of concerns relevant to advancement in deinstitutionalisation
- ▶ **27 EU countries**
- ▶ **six target groups:** adults with disabilities, adults with mental health problems, children (including children with disabilities), unaccompanied or separated migrant children, homeless persons and older adults.



How?

- ▶ **Desk analysis** of existing legislation and policy documents, already published reports, academic literature, datasets and information from national authorities available in the public domain rather than on primary research
 - ▶ The study collates information from a range of target groups in one place and **offers a broader picture on situations, solutions and positive trends**
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Findings for Children

Evidence of deinstitutionalisation (12)

Bulgaria
Croatia
Czechia
Denmark
(Estonia)
Latvia
(Lithuania)
Netherlands
Poland
Romania
Slovakia
Slovenia

Evidence of increase in institutionalisation

Belgium
(Greece)
Italy

No change

France
Hungary

Not enough data

Austria
Cyprus
Finland
Germany
Malta
Portugal
Spain

All children were reported to be living in the community in Ireland, Luxembourg and Sweden

() = slight change

Findings for Children with disabilities

Evidence of deinstitutionalisation

(12)

Bulgaria
Croatia
(Finland)
(Hungary)
Ireland
Latvia
(Lithuania)
Netherlands
Poland
Romania
Slovakia
Slovenia

Evidence of Increase in institutionalisation

(Greece)
Italy

No change

Czechia
Estonia
France

Not enough data

Austria
Belgium
Cyprus
Denmark
Germany
Malta
Portugal
Spain

All children with disabilities were reported to be living in the community in Luxembourg and Sweden

() = slight change

Findings for Adults with disabilities

**Evidence of
deinstitutionalisation**

(8)

Croatia

Czechia

(Estonia)

Finland

Ireland

(Latvia)

(Netherlands)

Slovakia

**Evidence of increase
in institutionalisation**

France

Lithuania

Luxembourg

(Portugal)

No change

Austria

Bulgaria

Cyprus

Denmark

Greece

Hungary

Poland

Romania

Not enough data

Belgium

Germany

Italy

Malta

Slovenia

Spain

All adults with disabilities were reported to be living in the community in Sweden

() = slight change

Findings for Adults with mental health problems

Evidence of deinstitutionalisation

(7)

Austria

Belgium

(Greece)

(Ireland)

(Netherlands)

(Portugal)

(Romania)

Evidence of increase in institutionalisation

Hungary

Latvia

No change

Bulgaria

Croatia

Cyprus

Czechia

Malta

Poland

Slovakia

Not enough data

Denmark

Estonia

Finland

France

Italy

Lithuania

Luxembourg

Slovenia

Spain

All adults with mental health problems were reported to be living in the community Sweden

() = slight change



Some issues with data....

- ▶ Lack of data in many countries, although slightly better in countries monitored by Structural Funds Watch
- ▶ **Data on children much better**, thanks to Lumos and Unicef
- ▶ Existing **data only tell us about where people live**, not whether they are participating as full members of their community, have choice, etc.
- ▶ Issue of terminology and definitions
 - ▶ “institution”
 - ▶ “residential care”
 - ▶ “supported living”
 - ▶ “group home”
 - ▶ “Community living”
 - ▶ “Independent living”
- ▶ Services set up as “Community living” not always in line with Article 19 of the UN CRPD



Some other key findings

- ▶ Policy and plans for future implementation
 - ▶ Five countries have **strong policy indicating solid commitment to DI** and community living (Ireland, Bulgaria - children), Estonia, Latvia, Romania,
 - ▶ In some countries, **DI is mentioned** as part of general policy, sometimes just “in passing” (e.g. Austria, France, Greece, Lithuania, Poland, Slovenia, Spain)
 - ▶ In other countries, **DI is in policy but “vague”** – lack of clear definitions, targets, monitoring mechanisms etc (e.g. Cyprus, Czechia, Hungary, Slovakia)
 - ▶ **Most progress in countries that were part of the 12 countries** where deinstitutionalisation was one of the priority areas for investments for 2014 – 2020.
 - ▶ However, lack of plans for sustaining DI without EU funds. Many of the changes unlikely to have happened without EU social funds. Still seen as the **“DI EU project”, not a mainstream activity.**
 - ▶ Driven by external expectations rather than internal motivation – what role does ideology play?



What did we learn from including other target groups? – Collecting data

- Collecting useful data is **possible** – UNICEF TransmonEE dashboard is a potential model.
- **Possible to identify some key variables** to include in a minimum dataset BUT need clear definitions and guidance to make sure same data is being collected.
- **Need to explore people's lived experience** to know about choice, control, participation, inclusion (i.e. CRPD Article 19).
- **Research on homelessness provided a good model** for understanding the population of interest – eg. risk factors and outcomes.
- **Importance of independent research in documenting change process**, the costs and resources needed and the benefits for individuals.



What did we learn from including other targets group: Housing is key

- ▶ Many countries had signed up to Housing First approach for homelessness or those at risk of housing exclusion – why not for people with disabilities, people with mental health problems, etc?
- ▶ Housing strategies included:
 - ▶ Social housing
 - ▶ Affordable (adequate and appropriate) housing
 - ▶ Housing benefits/rental support schemes
 - ▶ Support to buy
 - ▶ Capping rent levels
 - ▶ Expanding rental market



Where do we go now? Questions to consider

- ▶ Is ideology still a driver of change? **If yes, what is that ideology?** If no, what should we do about it?
- ▶ Do WE need to do anything differently?
- ▶ Why should newer member states of the European Union be committed to change, when founding members still have institutions?