**Written submissions by the Republic of Lithuania on the Draft Guidelines on Deinstitutionalization, including in emergencies**

**to the United Nations Committee on the Rights of Persons with Disabilities**

**General remark.** Considering the growing older cohort of the general population, the Guidelines lack special attention for the value of deinstitutionalization for to the elderly disabled people.

II. Duty to end institutionalization

5. The Committee has observed that institutionalization processes are not compliant with the Convention and in some cases are long overdue. **Since the process of deinstitutionalisation requires a long-term strategy that ensures that good quality care is available in community settings, appropriate monitoring mechanisms must be put in place to ensure that the support given in the deinstitutionalisation process is adequate. The ombudsperson of each State party could play an important role in this.**

III. Understanding and implementing key elements of deinstitutionalization process

Deinstitutionalization processes

17. Deinstitutionalization comprises interconnected processes that should focus on restoring autonomy, choice and control to persons with disabilities about how, where and with whom they decide to live. **The primary focus of policy should be preparing the community to meet the needs of people with disability living in the community rather than on the closure of institutions. This is particularly important in the context of countries that have recently begun or plan to begin implementing a policy of deinstitutionalisation. It is also important for countries that may be challenged by the sustainability and maintenance of the community models put in place in the context of coming demographic change.**

IV. Deinstitutionalization grounded on a person-centred and differentiated approach

Children **and young people** with disabilities

42. For children with disabilities, deinstitutionalization should **focus on the best interests of the child** and be directed towards protection of the right to family life. For children, the core of the right to be included in the community entails a right to **live and** grow up in a **caring** family. Consequently, for children, an “institution” is any placement that is not family-based. Placements in large or small group homes are especially dangerous for children. International standards that justify or encourage States Parties to maintain a system of residential care are not consistent with the Convention and should be updated. Harmonization of international standards is essential to the protection **of the rights of** children with disabilities.

44. Children **and young people** placed in institutions based on their actual or perceived disability, poverty, ethnicity or other social affiliation, are likely to develop impairments because of institutional placement. Thus, support for children with disabilities and families should be included in mainstream supports for all children. Peer support for children and adolescents is essential for full community inclusion.

XII. International cooperation

137. **More should be done to support countries in providing proper care and community-based services to persons with disabilities, including funding and underwriting the restructuring of institutional service provision.** International cooperation is key to supporting deinstitutionalization reforms. Spending through international cooperation should fully comply with the Convention. Investments into any form of institutionalization, including emergency response investments, or smaller institutions, are not compliant with the Convention, even when presented as “progressive realization”.

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