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| Draft Guidelines on Deinstitutionalization |
| Submissions and comments from Slovak DPOs and NGOs |

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| Social Work Advisory Board Forum for Human Rights, Social care home Okoč – Opatovský Sokolec, Agency for supporting services Žilina, Slovak Union for Supported Employment29.6.2022 |

# Introduction

This document was prepared by Slovak DPOs and NGOs supporting people with disabilities, with a financial support of Validity Foundation. It was drafted in direct consultation with people with disabilities, family members of people with disabilities and professionals.

Organisations:

* Social Work Advisory Board (Rada pre poradenstvo v socialnej praci)
* Forum for Human Rights (Forum pre ľudské práva)
* Social care home Okoč – Opatovský Sokolec (Domov sociálnych služieb Okoč – Opatovský Sokolec)
* Agency for supporting services Žilina (Agentúra podporných služieb Žilina)
* Slovak Union for Supported Employment (Slovenská únia podporovaného zamestnávania)

The first step was to prepare an easy-to-read version of the DI Guidelines. Given the concise time frame and the hardly accessible language of the DI Guidelines, we had to produce a simple, easy-to-read version of the document at the outset.

The second step in the implementation of the participatory review was to define the members of the research circles and the conditions for conducting the research. Given that, the DI Guidelines primarily concern people who have survived or are still being institutionalized and family members of people with disability, we defined four basic groups of research circles:

1. people with intellectual and mental disabilities living in community-based social services
2. people with intellectual and mental disabilities living in an institution
3. people with intellectual and mental disabilities who have survived institutionalization and are currently living independent lives in the community.
4. family members of people with disability.

The participatory review was conducted in four research circles across the country. Two to three participants commented on the DI guidelines in each research circle. A collaborative group approach was used across all research circles. The research circles met over several sessions, where at the start, the supporters/facilitators explained the principle of document commenting and asked questions. Then, the co-researchers explained their understandings of the easy-to-read texts of the deinstitutionalisation guidelines.

# Comments on the draft Guidelines on Deinstitutionalization

1. In general, people with disabilities noted that there is a lack of information and recommendations in DI guidelines concerning:
* support of free time activities,
* Employment and activation of people with disabilities in daily life,
* Education during whole life (as a family member said: “*For the transition from early childhood to the school system, she stressed out inclusive education for children no matter what disability they have, within the “ordinary school system”*
* Psycho-social support in the community for people with disabilities who are in transition from institution to community. One of our reviewers wrote: “*realistically those who leave institutions live hard, they have problems with alcohol and drugs, they find it difficult to find work, what they saw in the family affects them and we have to learn a lot of things (how to pay for gas, electricity, how to save, etc*.)”
1. Further, it has been stressed, that more emphasis should be put on support of housing possibilities for people with disabilities, including through specifically designed schemes of affordable but safe social housing, respecting wishes and preferences, including joint living with others. As it has been pointed out, not everyone can live with his/her family or afford ordinary housing possibilities. As one of our reviewers noted (a person with a disability wrote) – “*We live a better life in supporting housing, than we would in our family – f.e. because if our parents use alcohol or drugs…*”
2. We miss in DI guidelines specific recommendations concerning DI for elderly people who are living in institutions for elderly people.
3. We also miss specific information and recommendations in relation to people with disabilities who identify themselves as LGBTI.
4. There should be more concrete recommendations on support to victims of institutionalization and ill-treatment with a particular focus on the education of police officers, state prosecutors, attorneys, judges, and all other relevant decision-makers. As a one of our reviewers said: “*Because people who live in institutions are suffering there, they need freedom and a different life. They cannot defend themselves; they need help from us. This is not life in a big institution where there are a lot of people.”*
5. There should be a stronger focus on personal budgets as one of the most important tools to support independent living – (almost all our reviewers claimed that the appropriate financial support for independent living in the community is a necessity but there is stronger financial support for institutionalization).
6. There should be more recommendations concerning the obligation of accessibility of information and especially easy-to-read information (as one of our reviewers said “*easy-to-read documents will help us. They will help a lot. Even those who can read. I can read, but some texts are difficult for me, incomprehensible, but with the help of pictures and simplification I can understand them*”).
7. The emphasis should be put on the support to families with persons with disability (recognition of an enforceable obligation of respite care, recognition that also informal caring for others is a job and carers should be considered identically to employees and ensured recognition and support).
8. There should be more specific recommendations for early intervention for children with disabilities. Then, as the parents claim, the early intervention service is done in the community – in the “ordinary environment of the family”, not outpatient service within the healthcare facility.
9. There should be also a focus and recommendation on the support of ordinary and informal relations between people with disability and the community.

1. There is a lack of specific recommendations for sensitization of the public.