



Theoretically informed case study accompanying the film
Center for Independent Living of Persons with Disabilities in Serbia
(CIL Serbia)



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QR-Code to the Homepage and video:

Link to the video: <http://www.inno-serv.eu/cil>

This report is part of the research project „Social Platform on innovative Social Services“ (INNOSERV). INNOSERV investigates innovative approaches in three fields of social services: health, education and welfare. The INNOSERV Consortium covers nine European countries and aims to establish a social platform that fosters a europeanwide discussion about innovation in social services between practitioners, policy-makers, researchers and service users. This project is funded by the European Union under the 7th Framework Programme (grant agreement nr. 290542).



1. Center for Independent Living of Persons with Disabilities in Serbia - CIL

Center for Independent Living provides persons with disabilities personal assistance and training for Personal Assistance (PA) service providers from the public, private and non-profit sector. It has evidence on user driven change encompassing legislative, policy, normative and social change, and resulting in an innovative social service of training for PA service. This innovation rests on an active and formalized role for service users and a disabled people's organization in maintaining service quality and integrity. The service bridges a significant gap between rules on the book and situation in local municipalities in Serbia.

Specific innovative elements of CIL

Operationalizing normative paradigm shift in service provision to persons with disabilities (PWDs):

The main idea is to demonstrate that user involvement in every step of service design, implementation and monitoring is both possible and desirable in Serbia as resource constrained environments dealing with deficiency in human and institutional capacity. CIL mobilizes service users to take on the role of service monitors and build pressure on the government to formalize standards. Therefore, CIL is making the new paradigm possible and real for a growing number of PWDs.

New stakeholder roles

CIL develops local disabled people's organization (DPO) capacities for local budget process monitoring, familiarizes them with legislative and regulatory framework with regards to local social service provision and strengthens their lobbying and advocacy capacities so that they can effectively win local self-government representatives over for provision of PA service¹. DPOs and PA service users are now much more concerned with ways in which their local self-governments spend public monies and they are more interested in local budget monitoring. In the long run, this will contribute to a broader PA service availability/increased user number, greater need for CIL training and service standards.

New engagement model

CIL's engagement model steps away from the traditional pyramid, ladder, or funnel model and looks more like a vortex.

Key characteristics of the service

Organization

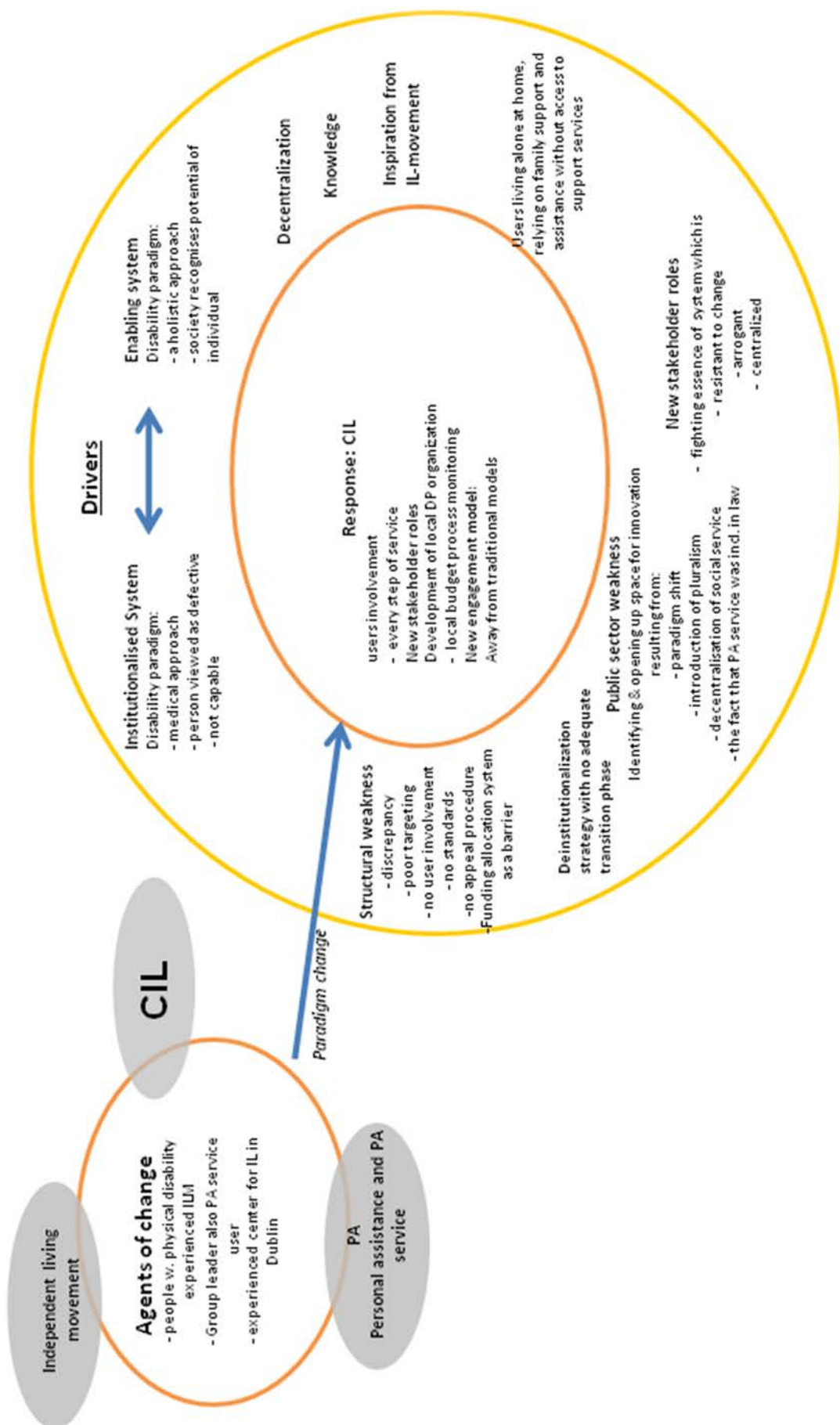
CIL Serbia is a national cross-disability organization established, governed and managed by persons with disabilities with a staff of 27. CIL was founded in 1996.

Users: Personal assistants and persons with disabilities

User groups: Persons with disabilities, organizations of persons with disabilities and PA service providers from the public, private and non-profit sector.

Number of users: 285 PAs trained and 275 service users trained.

Factors influencing Social Services Innovation



2. Policy Framework related for Persons with Disabilities in Serbia

Principle/ Guide-lines	Key organisations and actors	Services provided by government	Expenditure, Resources ²
<p>1. Decentralization: from highly centralized to municipal level: Social Protection Law foresees local level provision of social services, with PA service as an option recognized in the law but not a mandatory service on offer. No service standards and no monitoring mechanisms in place</p> <p>2. Pluralism of service providers: Shift away from the state as sole service provider to pluralism in service provision, albeit with acute desire of state institutions to remain sole providers and with significant gaps in public procurement procedures for services</p> <p>3. From institution to community-based social services: greater responsibility for local self-governments but without adequate financial and/or human capacity.</p> <p><i>Welfare system gaps include: Disconnect between policy and practice Lack of bylaws and procedures and law Lack of clarity among experts working on Social Service Procedures on whether and how PA service is to be applied to persons with intellectual disabilities</i></p>	<p>Local self-governments provide funding for the service</p> <p>Centres for social welfare conduct beneficiary assessment and refer to service providers. For new services, local government launches a tender to procure a new service</p> <p>NGOs, DPOs, private firms and public sector organizations can apply as service providers</p> <p>Centre for Independent living of persons with disabilities provides training to service providers and service users</p> <p>Caveats in the system: <i>PA service training is accredited by the Institute for Social Protection but it is not mandatory³. Issue of quality of social services that are being provided by non-trained actors Monitoring of actual service provision is not clearly defined and CIL fills in a gap in this area for 7 municipalities/cities, but a more permanent solution to funding of monitoring activities and full coverage needs to be developed CIL PA service training program targets the service for persons with physical disability.</i></p>	<p>Legal milestones:</p> <p>Social Protection Law, 1991 and 2011⁴</p> <p>Social Protection Strategy⁵</p> <p>Procedures and Standards for provision of PA service (forthcoming)</p> <p>Strategy for Improved status of PWDs in Serbia⁶</p> <p>Law prohibiting discrimination of persons with disabilities in Serbia⁷</p> <p>Law on Professional Rehabilitation and Employment of Persons with Disabilities⁸</p> <p>Public procurement Law⁹</p> <p>Labour Code¹⁰</p> <p>Ratified Convention on the Rights of persons with disabilities, art. 19¹¹</p> <p>Service characteristics</p> <p>300+ PWDs are members of organizations that completed CIL training</p> <p>approximately 100+ PWDs receive services from persons who are not CIL trained service providers and there is no other accredited training provider</p> <p>Most services are funded from the so called 'public works' that are funded for a period of 6 months and then discontinued</p> <p>CIL-trained organizations lobbied local self-governments in 7 municipalities for a continuing funding support for users</p>	<p>1. Costs involved</p> <p>In 2012, local government units set aside approximately 178,000 Euro for PA service. Central government provided an additional 359,000 Euro through public works¹²</p> <p>PAs receive approximately 200 Euro net salary (gross monthly salary about 360 Euro) plus monthly local transportation cost</p> <p>CIL PA training costs are negotiated on a case by case basis and sometimes provided at no cost or with only partial funding.</p> <p>2. Financing of municipal social services</p> <p>Some municipalities have a decision to fund PA in their local action plans for social protection¹³. Others fund PA on a short term project basis. Most have not yet considered it seriously.</p> <p>Underdeveloped municipalities should receive block grants from central government if they adopt local social protection strategy and identify service provision as a priority but grants are not available yet.</p> <p>Users of PA service provided by CIL pay participation fee for PA service amounting to 20% of their allowance for help by another person¹⁴. Allowance ranges from 100 to 200 Euro/ month.</p>

3. The social, political and institutional context

3.1 Population/ Government

<i>Table 1 Key statistical data</i>	Serbia	EU27
Total Population	7,241,295 ¹⁵	503,824,373 ¹⁶
GDP per capita in PPS in 2011, EU27 = 100	35 ¹⁷	100
Estimated proportion of persons with disabilities in total population	15,0 %	15,0% ¹⁸
Membership of persons with physical disabilities in DPOs	6,000	N/A
Number of PA service users	400+ ¹⁹	N/A
National government spending on social services	Data un-available ²⁰	N/A
Local government spending on PA service in 2012	19,800,000 RSD	N/A

3.2 Information about the specific welfare state: Service Orientation Serbia

Serbia's welfare services infrastructure targeting persons with disabilities evolved around medical approach to disability and with institution as the welfare solution within a socialist state-as-the-service-provider. Over the past 12 years, the country's legislation gradually shifted to social model of disability. Unfortunately, a requisite shift in funding for and management of social services has not followed suit, or not at the same pace. In 2005, CIL demonstrated that benefits of PA service outweighed costs in an Analysis of Investing In the Organization of Personal Assistant Service Network for Persons with Disabilities in Serbia²¹

Today, social care institutions are eroded and scheduled for closure due to policy emphasis on deinstitutionalization²², without real alternatives on offer on the ground for persons with disabilities²³. The majority of PWDs, however, live at home and rely on family support and assistance. Without access to support services, including PA, even the socially and professionally active persons with disabilities remain dependent on their kin, out of the labour market and - more often than not - in poverty.

In addition to institutional care and allowance for help by another person, the following social services are available to PWDs in Serbia: personal assistance service only in 7 out of 168 municipalities, supported housing, home help, day care centres, respite care and SOS hotline for victims of domestic violence against persons with disabilities²⁴.

Table 2 presents CIL target groups for personal assistance service provider training in relation to the full universe in Serbia

Target groups	Total trained by CIL by Dec 2012	Total in Serbia
Persons with disabilities	300	6,000 ²⁵
Organizations of persons with disabilities	60	Approximately 500 ²⁶
PA service providers from the public, private and non-profit sector	10 local self-governments 9 NGOs service-providers ²⁷	168 500 disabled people's organizations X companies providing social services ²⁸ (number not available)

For a new social service to be launched, a social institution or another service provider organization must obtain license from the Ministry of Labor and Social Policy. Local self-governments wanting to procure a new social service need to launch a public tender for eligible licensed service providers. Once service providers are selected, service users apply with Center for Social Welfare for joint assessment of needs and status. If it is determined in the assessment that a persons is eligible for PA service, then s/he is free to choose from available licensed service providers. Criteria are prescribed by the Minister of Labor, Employment and Social Policy. For a new service, potential service users can raise their claim with the local self-government and, pending a favorable funding decision, the tender procedure can be launched – once bylaws are in place.

The goals of Serbia's new social service orientation are:

- Continuum of service provision
- Community-based services as a priority
- User able to select a service and service provider
- User participates in service design and service delivery
- User as partner in service delivery

A social welfare system that enables users to satisfy various needs

CIL PA service provider training is instrumental to the development of the following relationships:

- licensed service provider organization and service user
- licensed service provider organization and personal assistant
- service user and personal assistant

According to the Ministry of Labor, Employment and Social Policy official²⁹, CIL training design is an early bird, a champion of change that sets a path for standardization leading to accreditation of other types of training, assistance and support programs.³⁰ The training clarifies PA scope of work through two specific groups of tasks: assistance in everyday operation and assistance in performing formal and professional duties. At the level of educational tools and methodologies, the Program contains a variety of interactive, multimedia and multi-technical tools, including interactive presentations, guided discussions, demonstrations, simulations and role plays, film and video materials, stories with illustrations and other tools. The program is relevant, comprehensive, innovative, coherent and of a high quality standard³¹. The CIL training program was accredited by the National Institute for Social Protection in February 2011.

There is a steadily increase of expenditure in benefits in kind of social protection benefits (including social services), that shows the growing meaning in comparison to social protection benefit in cash. The table below presents the social protection expenditure of selected countries.

4. Challenges and Drivers of Innovation

Structural weaknesses of the system

- Discrepancy between entitlements *de jure* and *de facto* situation on the ground
- Poor targeting and fragmented entitlements that are not individualized
- No user involvement, no effective monitoring system in place and no feedback loop
- No standards of service provision
- No appeal procedure

Innovation: Ideas, criteria, levels and added values

The innovation focuses on public sector weaknesses as opportunities. It identifies and opens up space for service innovation that resulted from: a) paradigm shift; b) introduction of pluralism of service providers; c) decentralisation of social services; and d) a fact that PA service was included in the law as a social service option. CIL managed to connect the dots and fill in for public sector capacity gaps. CIL - PA training and follow up work further make up for lack of adequate guidance and/or monitoring systems.

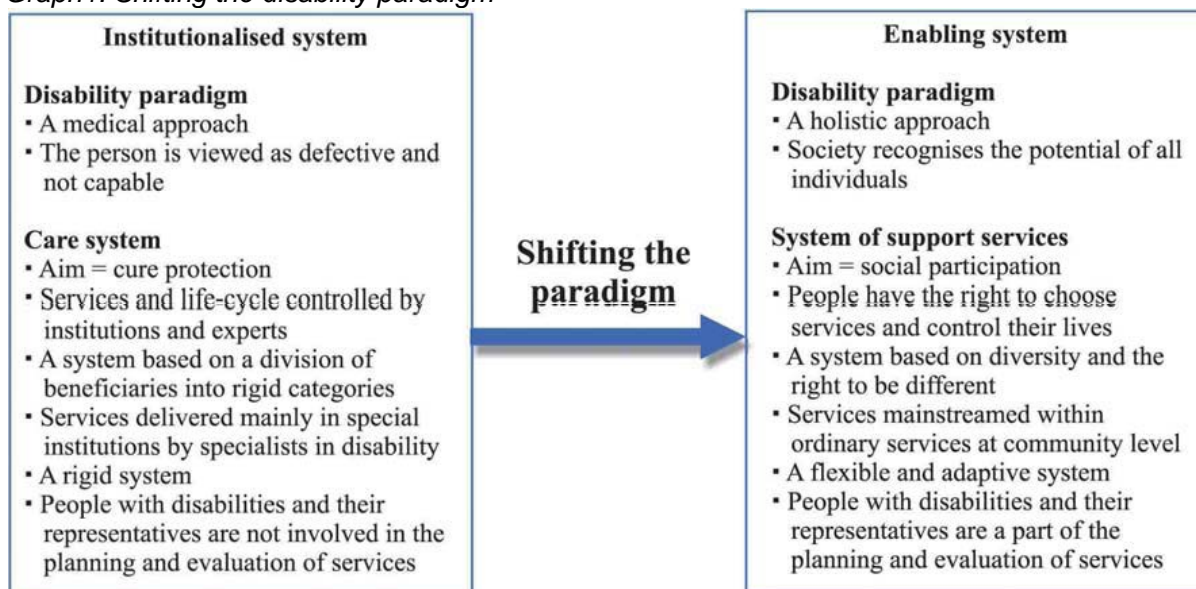
Operationalizing normative paradigm shift in service provision to PWDs:

The main idea is to demonstrate that user involvement in every step of service design, implementation and monitoring is both possible and desirable in Serbia as resource constrained environments dealing with deficiency in human and institutional capacity.

It has been noted above that a normative shift away from medical to social approach to disability is poorly implemented due to a very real gap in capacities, lack of service standards and inexistence of a monitoring function. Accredited CIL training is currently the only quality assurance mechanism available for PA service provision. It is aligned with global disability movement standards for PA service and they guide service users and providers through the process to ensure at least minimum service quality. By involving persons with disabilities in training provision and training participation, CIL mobilizes service users to take on the role of service monitors and build pressure on the government to formalize standards. Therefore, CIL is making the new paradigm possible and real for a growing number of PWDs.

The complexity of a paradigm shift in the context of South East Europe is presented in graph 1. Below:

Graph1. *Shifting the disability paradigm*³²



New stakeholder roles

User involvement in design, implementation and monitoring of service is already a ground-breaking innovation for Western Balkans. It tackles the very essence of a system that is resistant to change, arrogant and centralized. This empowering process builds capacities of PWDs and bonds them together in a strong network that is increasingly perceived - and treated - as a partner by the state.

Beyond the direct service users, CIL mobilizes their associations across Serbia for advocacy on decentralized funding for PA service and for inclusion of CIL-trained DPOs as quality PA service providers. On a practical level, this means that CIL develops local DP organization capacities for local budget process monitoring, familiarizes them with legislative and regulatory framework with regards to local social service provision and strengthens their lobbying and advocacy capacities so that they can effectively win local self-government representatives over for provision of PA service³³.

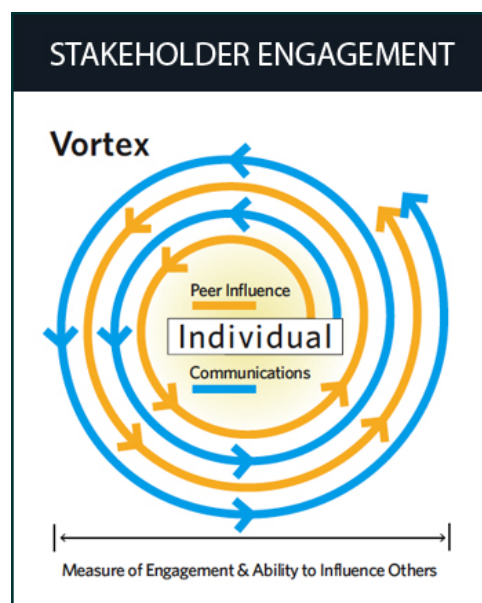
Social policy experts and academics are no longer unquestionably driving prioritization of social services to PWDs. Instead, they are getting used to a new role of supporters, often helping behind the scenes, whereas strategic decisions remain with the independent living movement in Serbia, led by CIL. These changed roles and relationships contribute to a new form of governance. DPOs and PA service users are now much more concerned with ways in which their local self-governments spend public monies and they are more interested in local budget monitoring. In the long run, this will contribute to a broader PA service availability/increased user number, greater need for CIL training and service standards.

New engagement model

Since "personal assistance", key to independent living, means the user is boss, user-led approach to training and outreach effectively pushes the quality assurance enve-

loped. Key to this approach is CIL's 'never let go' engagement model. Once mobilized stakeholders are effectively employed in further advocacy to close capacity gaps.

CIL's "engagement model steps away from the traditional pyramid, ladder, or funnel model and looks more like a vortex" described by Julie Dixon and Denis Keyes.³⁴ "At the center of the vortex is the individual. Her/his depth of commitment to the organization is represented by the size of the continuous field around the center. As the person's commitment deepens, the vortex expands outward. The vortex can be strengthened - and expanded - by the influence of others, but as it grows it also becomes a greater source of influence on others."³⁵ The graph below is an adaptation from the Dixon & Keyes article, with broader emphasis on stakeholders rather than a focus on donor.



Drivers and Challenges

Direct personal experience in independent living

A small group of People with physical disabilities in Serbia experienced the independent living movement and lived personal assistance service

The group leader actually spent some time in Ireland in early 1990ies where she experienced PA service and took part in Center for Independent Living, Dublin advocacy for mainstreaming of the service.

Decentralization

Way in which statutory responsibilities are changing as a consequence of broader political and socio-economic reforms in Serbia, and specifically the decentralization of the welfare system.

Knowledge

Accumulation of knowledge, capacity and lived experience contributed to changing social roles by increasing CIL's influence on policy makers, opening up space for dialogue and operationalizing the paradigm shift away from medical model of disability to social model that was proclaimed in the Social Protection Strategy and subsequently the Social Protection Law. Together, these forces resulted in an articulated demand by a disabled person's organization (DPO) to have a voice in policy articulation, implementation and oversight in response to PWD's real needs. Other DPOs in Serbia were mobilized around this change platform.

IL-Movement and inequality

Independent living movement³⁶ as an aspiration

Continued inequality of persons with disabilities and changing social roles.

Agents of change

The group leader actually spent some time in Ireland in early 1990ies where she experienced PA service and took part in Center for Independent Living, Dublin advocacy for mainstreaming of the service. Upon return to Serbia, she founded CIL Belgrade. The second one is the way in which statutory responsibilities are changing as a consequence of broader political and socio-economic reforms in Serbia, and specifically the decentralization of the welfare system.

5. Key innovative elements of this example

Field of service	Education and Welfare
Establishment of organization	1996
Year of establishment of PA service by CIL	2003
Year of accreditation of PA training	2011
Type of organization	Civil society network of 9 CIL offices throughout Serbia
Financing	Combination of reciprocity resources and public resources, both national and local government funded (initially complemented by donor funding)
Size of the organization	Number of staff: 27, number of users: 285 PAs trained and 275 service users trained
Members and participation	Cooperation of actors across different service fields: this model entails cooperation of National Employment Service, Centers for Social Welfare, local self-governments and disabled people's organizations (DPOs). Network of 10 local self-governments 9 NGOs service-providers ³⁷ , 9 local organizations operating across Serbia, and with regular exchanges within ENIL network and with other disabled people's organizations in Serbia
Contact Name of the innovative example Homepage	Center for Independent Living of Persons with Disabilities Serbia Milenka Vesnica 3 Belgrade Serbia Phone/fax: +381 11 367-53-17 and +381 11 367-53-18 Email: office@cilsrbija.org http://www.cilsrbija.org/eng/index.php

Based on a transformative personal experience with CIL Ireland in early 1990ies, one of CIL founders, Gordana Rajkov talked about independent living philosophy and personal assistance service to a small group of free-minded persons and they started a grass-roots, bottom up innovation - a first of a kind in the entire region. The group gradually grew to 70 PA service users relying on donor support for the service.

Together, they 'evangelized' and advocated among PWDs for several years and the idea gathered momentum once initial curiosity about the service turned into articulated demand. This emerging demand lacked confidence and faced challenges including financial, policy and regulatory frameworks, enabling cultures, and persistence of traditional roles and relationships. With a growing network of supporters among disabled people's organizations in Serbia including the National Alliance of Organizations of Persons with Disabilities³⁸, CIL advocated for changes in the Social Protection Law. As Social Innovation Fund Program Director noted, "At start, government did not have the absorptive capacity to mainstream CIL's innovation and CIL contributed to developing that capacity". With that in mind, CIL developed PA ser-

vice training to help guide new actors in provision of this social service and to make up for absence of a monitoring framework and official service quality standards. From this ideas-generation stage (localized application of IL/PA service), CIL intuitively moved into prototyping (mainstreaming of PA service, user-led development of service standards). This allowed for service innovation - training that is now used to build capacities of PAs and users, DPOs, local authorities, Centers for Social Work and relevant national government employees. Thus it seeks to bridge a gap between the way welfare system used to be and the way social services are supposed to evolve. This connecting force of the service gradually builds an enabling environment, with new municipalities buying into the training and subsequently PA service. Truth be told, local self- governments who are funding PA service in Serbia are still struggling with their new role. However, evidence shows that out of the 10 municipalities trained, 7 continue to provide PA service.

Therefore, the PA service training also equips DPOs to effectively lobby local self-governments for a continuum in service provision. These amounts also indicate that no management, monitoring and evaluation costs are envisioned for service provider organizations, which is a significant vulnerability.

Still, scaling of innovation is envisaged by CIL. The organization now advocates for adoption of bylaws that would make the training mandatory, stabilize funding for the training and the PA service and enable users, CIL, other DPOs and other stakeholders to put emphasis on preserving and improving PA service quality. Accredited CIL training for PA service lasts for 5 full days. Depending on a municipality, the training can include local government representatives, service provider organization staff, service users and PAs.

Accredited CIL Training Program Summary is presented below³⁹

INTRODUCTION

PART I

1. CONCEPTUAL AND THEORETICAL FRAMEWORK OF THE PROGRAM
2. CONCEPT OF THE SERVICE "SERVICE OF PERSONAL ASSISTANCE FOR PERSONS WITH PHYSICAL DISABILITY"
3. GENERAL AND SPECIFIC COMPETENCIES OF PERSONAL ASSISTANT
4. PRACTICAL EXPERIENCES IMPORTANT FOR THIS EDUCATIONAL PACKAGE
5. COMPETENCIES DEVELOPED THROUGH THIS PROGRAM
6. CONTENT OF THE EDUCATION PROGRAM
7. THE AIMS OF EDUCATION PROGRAM
8. EXPECTED OUTCOMES OF EDUCATION PROGRAM
9. IMPLEMENTATION OF EDUCATION PROGRAM

PART II

INTRODUCTION

MODULE 1 – THE CONCEPTUAL AND THEORETICAL BASE OF THE PROGRAM

MODULE 2 - PERSONAL ASSISTANCE AS A SERVICE

MODULE 3 – PRACTICAL KNOWLEDGE AND SKILLS OF A PERSONAL ASSISTANT

EVALUATION AND FEEDBACK

Any stakeholder can request CIL training and government funding or public works. Hopefully soon, training funding will be stabilized.

After the training, CIL continues to monitor service provision and it conducts assessments of user and direct service provider satisfaction to the extent that its budgets allow it to do so. Thus far, satisfaction rates are very high. This is partly due to an enormous power of positive transformation that this service that may not be as new to some European Union countries but is novel to Western Balkans, presents for service users. It is also due to quality of empirically based training they received from CIL at service start.

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¹ Center for Independent Living of Persons with Disabilities in Serbia, *What do you know about budget process? A reminder for civil society organizations in Serbia*, 2012

² Data on total welfare expenditure on persons with disabilities in Serbia are not available. According to the Annual Report by Ministry of Labour and Social Policy supported operation and activities of disabled people's organizations with 4,471,000 Euro. In addition, there are 55,000 beneficiaries of a financial transfer for paid care. Services acquired from the public works are in addition.

³ For PA training to become mandatory, the state needs to adopt bylaws – on licensing, service contracting, service cost, etc.

⁴ Official Gazette RS No.36/91, 79/91, 53/93, 67/93, 46/94, 48/94, 52/96, 29/01, 84/04, 115/05

⁵ Official Gazette RS No. 108 /05

⁶ Government of Serbia, 2006

⁷ Official Gazette RS No. 33/06

⁸ Official Gazette RS No. 36-09

⁹ Official Gazette RS No. 116/08 <http://www.ujn.gov.rs/sr/propisi/zakon.html> and the new law adopted on 29 December 2012

¹⁰ Official Gazette RS No. 24/2005, 61/2005 and 54/2009

¹¹ Official Gazette RS No. 42/2009 ratified in July 2009

¹² Public works are a measure geared towards employment of persons with disabilities for a period of 6 months. This program is funded by the National Employment Office and a question remains regarding quality standards of PA service funded under this measure. In many cases, funding is discontinued after 6 months. Some service providers under this measure received no training in PA service.

¹³ In this way, they indicated their interest in the service but are waiting for bylaws in order to operationalize it.

¹⁴ CIL is applying that principle since it started to provide PA service in 2003, because this allowance is a sort of "direct payment scheme", as money is given to person with disability to "buy a service". After adoption of bylaws, this will become mandatory

¹⁵ Source: 2011 census, National Statistics Office

¹⁶ Source: CIA, The World Factbook, July 2012 [est.www.cia.gov/library/publications/the-world-factbook/geos/ee.html](http://www.cia.gov/library/publications/the-world-factbook/geos/ee.html),

¹⁷ First estimates for 2011 GDP per capita in the Member States ranged from 45% to 274% of the EU27 average in 2011 http://epp.eurostat.ec.europa.eu/cache/ITY_PUBLIC/2-20062012-AP/EN/2-20062012-AP-EN.PDF

¹⁸ According to World Health Organization estimates

¹⁹ Approximately 300 persons receive PA service from CIL trained service providers. Another 100+ PWDs receive service from other providers.

²⁰ Part of the problem regarding social services in Serbia lies in a multitude of funding sources: direct transfers, funding for projects of DPOs, other NGOs and from lottery make it almost impossible to establish specific amounts for service funding.

²¹ Dr. Mirosinka Dinkić and Jelena Momčilović, Cost of Independence, Cost-Benefit Analysis of Investing In the Organization of Personal Assistant Service Network for Persons with Disabilities in Serbia, Belgrade, September 2005, http://cilsrbija.org/ebib/COSTS_benefit.pdf

²² In line with art. 19 UN CRPD; however, as noted by ENIL, European Coalition for Community Living (ECCL), CIL

²³ According to 2011 data by Republic Institute for Social Protection <http://www.zavodsz.gov.rs/>, there are still 3,088 adults with disabilities (aged 18+) in social care institutions in Serbia. Community based services must be developed as institutions close out. The problem is also noted by Regional Center for Minorities <http://www.minoritycentre.org/sh/node/1946>

²⁴ A service provided by a single NGO Iz Kruga www.izkruga.org

²⁵ Source: CIL research, based on membership in disabled people's organizations

²⁶ Ministry of Labour, Employment and Social Policy has approximately 500 DPOs on file throughout Serbia. However, DPO membership includes persons with different types of disabilities and the PA service provider training targets organizations that gather wheelchair users, thus not a full universe.

²⁷ CIL data

²⁸ Private companies and social enterprises are eligible for provision of service under the Law but there is no data on any company actually providing the services as of December 2012

²⁹ Suzana Paunović, Assistant Minister of Labour, Employment and Social Policy, 2011

³⁰ According to Expert Reviewer contracted by the Ministry of Labour, Employment and Social Policy, Vladan Jovanović, review submitted in support of CIL's application for accreditation with Institute for Social Protection in 2011

³¹ Ibid.

³² The Disability Monitor Initiative South East Europe, *Beyond De-Institutionalization: The Unsteady Transition towards an Enabling System in South East Europe*, 2004

³³ Center for Independent Living of Persons with Disabilities in Serbia, *What do you know about budget process? A reminder for civil society organizations in Serbia*, 2012

³⁴ Julie Dixon and Denis Keyes, *The Permanent Disruption of Social Media*, Stanford Social Innovation Review, Winter 2013 http://www.ssireview.org/articles/entry/the_permanent_disruption_of_social_media

³⁵ Ibid.

³⁶ Adolf D. Ratzka, Independent Living Institute, Stockholm, <http://www.independentliving.org/docs7/ratzka200507.html> "With origins in the US civil rights and consumer movement of the late 1960s the Independent Living movement replaces the special education and rehabilitation experts' concepts of integration, normalization and rehabilitation with a new paradigm developed by disabled people themselves. The first Independent Living ideologists and organizers were people with extensive disabilities. Today the movement's message is still most easily grasped by people whose everyday lives depend on assistance with the activities of daily living, since they are most exposed to custodial care, paternalistic attitudes and control by professionals. The Independent Living philosophy postulates that disabled people are the best experts on their needs, must take the initiative, individually and collectively, in designing and promoting better solutions and must organize themselves for political power. Besides de-professionalization and self-representation, the Independent Living ideology comprises de-medicalization of disability, de-institutionalization and cross-disability (i.e. inclusion regardless of diagnoses).

³⁷ CIL data

³⁸ Contact information on National organization of persons with disabilities in Serbia (NOOIS) <http://www.edf-feph.org/Page.asp?docid=20833&langue=EN>

³⁹ For more details, please see the attached document Accredited CIL program Training outline. A full accredited training program curriculum is also available in Serbian