



Serbia

FINANCING OF CARE SERVICES FOR PERSONS WITH DISABILITIES

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Executive Summary

The Act on Social Care from 2011 marks a key move from ad hoc to the systematic provision of social care services in Serbia. It defines five types of social care services: **assessment and planning services; day care services; support services for independent living; counselling-therapeutic and social-educational services; accommodation services.** It also consolidates efforts to deinstitutionalise and localise the management, financing and provision of social care services.

The line between social care services in general and social care services for PWDs specifically is often blurred, as is the line between services for different age groups etc. The **national government** typically finances long-term institutional care, whereas **local governments** of cities and municipalities typically finance day care services, services of supported independent living, and respite care.

The most prevalent care services for adults are **home care for the elderly.**

The predominant financing model is public financing for all social care services with an addition of earmarked transfers for local social care services. Service providers can secure additional funding through individual projects, whether published by the public or the private sector such as foundations, donors etc.

Day care services are aimed at prolonging the stay of a person with a disability in their family and community and they are funded and managed by local cities and municipalities. They include services of day care, home care, child personal attendant, drop-in centres and other. Day care services are the most prevalent types of local services in Serbia and they attract **81% of the funding** for local social care services. There has been the largest increase of for-profit providers in the sector of day care services out of all local social care services.

Services of support for independent living are provided in order to improve the quality of life of a person with a disability and to support them in living an independent life as an equal member of the society. They include services of living with support, personal assistance and protected housing among others. The services of supported or independent living were provided in **29 cities and municipalities** in 2018, the most prevalent service being **personal assistance for PWDs.** There is a lack of personal assistants especially in the rural areas and there are very long waiting lists.

Services of **respite accommodation** are available for children and young adults with a disability aged between 5 and 26 years as well as for adults and older adults with a disability. Such services, however, were **offered in very few cities and municipalities** with a decreasing trend between 2012 and 2018 and they were **generally undeveloped.**

Long-term institutional care is managed and provided on the national level by the Republic of Serbia. Private service providers are particularly well-established in the sector of long-term institutional care for the elderly in general.

Main Findings

- ★ The key effects of the Act have been the encouragement of the pluralism of social care services providers, continuous deinstitutionalisation, as well as a decreased dependence of service providers on unsystematic project-based funding.
- ★ However, there are great disparities across the country in terms of the quality, accessibility of services, extent of out of pocket fees, as well as how much funding service providers receive.
- ★ Several interviewees pointed to tenders being awarded solely based on the price offered by a service provider and that the quality of services is not sufficiently monitored as some of the key problems.

Introduction

The Republic of Serbia has ratified the majority of international conventions on the improvement of the position of PWDs in society, including the **Convention on the Rights of Persons with Disabilities** ratified in 2009¹ in the Law Confirming the Convention². **The Act on Social Care** from 2011³ is the single most important legislation that governs and manages social care services for PWDs in Serbia. The law represents a move from ad hoc provision of social care services to a systematic provision, defining what can be considered a social care service, who can provide the service and who can use it, what are the aims and objectives of social care services in Serbia and how the services are funded. It has also increased the number of social services with an aim to prevent or at least defer institutional placement of PWDs. The rationale behind the move has been the need to ensure sustainability and continuity of social care services by the more active involvement of the government rather than solely relying on the initiative of service providers⁴. Civil society organisations working with vulnerable children and PWDs have been particularly vocal about this need⁵. The Law defines particular types of social care services and divides them into five categories⁶. Since this factsheet is primarily concerned with day care services, support services for independent living, and accommodation services, these are the ones detailed below.

1. **Assessment and planning services.**
2. **Day care services** – services of day care, home care, personal child attendant, and other services that support the stay of users in their family and their immediate environment.
3. **Support services for independent living** – services of living with support, personal assistance, protected housing, training for independent living and other types of support necessary for the active participation of users in society, and other.
4. **Counselling-therapeutic and social-educational services.**
5. **Accommodation services** – accommodation with a relative, foster or other families for adults and the elderly, institutionalised accommodation, shelter accommodation, and other types of accommodation.

The second key legislation are the **Guidelines on Detailed Conditions and Standards for the Provision of Social Care Services**⁷. The Guidelines regulate, by law and in great detail, structural and functional standards for each service that every provider needs to fulfil, who has a right to service and how this right can be fulfilled. Only licensed service providers are able to legally provide the service, and the licence serves as

1 Convention on the Rights of Persons with Disabilities ratified. 2009. „Official Gazette of RS - International Treaties“, no. 42/2009, from 2 June 2009.

2 Zakon o potvrđivanju konvencije o pravima osoba sa invaliditetom (Act Confirming the Convention on the Rights of Persons with Disabilities). 2009. https://www.paragraf.rs/propisi/zakon_o_potvrđivanju_konvencije_o_pravima_osoba_sa_invaliditetom.html

3 Zakon o socijalnoj zaštiti (Act of 31 March 2011 on Social Care). 2011. <https://www.ilo.org/dyn/natlex/docs/ELECTRONIC/89381/102666/F100182330/SRB-2011-L-89381.pdf>.

4 Interview with a representative of independent living service provider, 28 August 2020.

5 Interview with a representative of DPO which also acts as a service provider, 10 September 2020.

6 Zakon o socijalnoj zaštiti (Act of 31 March 2011 on Social Care). 2011. <https://www.ilo.org/dyn/natlex/docs/ELECTRONIC/89381/102666/F100182330/SRB-2011-L-89381.pdf>.

7 Pravilnik o bližim uslovima i standardima za pružanje usluga socijalne zaštite (Guidelines on Detailed Conditions and Standards for the Provision of Social Care Services). 2013, 2018, 2019. <https://www.paragraf.rs/propisi/pravilnik-blizim-uslovima-standardima-pruzanje-usluga-socijalne-zastite.html>.

a guarantee of the fulfilment of the minimal standards set by the Guidelines. The licence for the provision of social care services is issued by the **Ministry of Labour, Employment, Veteran and Social Policy**. The licence must be typically renewed every six years and can be suspended or taken away if the service provider is not complying with the standards⁸. Social care providers are typically local Centres for Social Work, organisations of civil society, NGOs and DPOs; but several interviewed service providers also identified that there private service providers are increasingly involved in public tenders and are able to offer services at a competitive price⁹. The **Centre for Social Work** is a public authority with local branches across cities and municipalities in Serbia. The Centre decides on the individual rights and needs of a person to use social care services and on the amount (typically in percentage points) of participation of the users in covering the costs of the services. The Centre provides the services of assessment and planning which are excluded from the user participation in costs. It can provide other services only if it has a licence and if there is no other licenced service provider in the local community¹⁰.

The reform of the system of social protection in Serbia started in 2002 and was part of a larger set of social changes¹¹. The key assumption underlying this process was that the central government authorities do not possess sufficient understanding of the situation at the local level and it should thus be upon cities and municipalities to decide what the needs of their citizens are and how these needs should be managed and funded. Another reason cited by some of the interviewees was Serbia's continuous effort to join the **European Union** and align with its

standards, following the trend of **deinstitutionalisation and localisation** of social care services¹². Consequently, a large part of the social care services was transferred to the jurisdiction of cities and municipalities, including day care services, services of supported and independent living and respite care¹³. The key effects of the Act have been the encouragement of the pluralism of social care services providers, continuous deinstitutionalisation, as well as a decreased dependence of service providers on unsystematic project-based funding. However, the insufficient development of some parts of the country has proven to be a great obstacle in the equal provision of social care services¹⁴.

Financing of social care services in Serbia

Social care services are typically either within the mandate of **local governments of cities and municipalities** or within the mandate of the **national government**. The national government, and in particular the Ministry of Labour, Employment, Veteran and Social Policy, finances monetary assistance for PWDs, **long-term institutional care**, as well as the Centre for Social Work. The local governments manage and finance most of the social care services used by PWDs, including **day care services, services of supported independent living, respite care**, and other local social care services¹⁵. In the case of locally financed services, it is up to every city or municipality to decide whether they need the service. If a municipality decides that it is going to provide a certain service, it publishes a tender for providers of social care services to apply to. A city or a municipality decides on

8 Zakon o socijalnoj zaštiti (Act of 31 March 2011 on Social Care). 2011. <https://www.ilo.org/dyn/natlex/docs/ELECTRONIC/89381/102666/F100182330/SRB-2011-L-89381.pdf>.

9 Interview with a representative of independent living service provider, 28 August 2020.

10 Zakon o socijalnoj zaštiti (Act of 31 March 2011 on Social Care). 2011. <https://www.ilo.org/dyn/natlex/docs/ELECTRONIC/89381/102666/F100182330/SRB-2011-L-89381.pdf>.

11 Interview with an expert on social care protection in local cities and municipalities, 4 September 2020.

12 Interview with a representative of DPO which also acts as a service provider, 10 September 2020.

13 Namenski transferi (Earmarked Transfers). 2017. Republic Institute for Social Protection (Republiki zavod za socijalnu zaštitu). <http://www.zavodsz.gov.rs/sr/podru%C4%8Dje-delovanja/unapre%C4%91enje-mera-socijalne-za%C5%A1tite/namenski-transferi/>.

14 Interview with a representative of DPO which also acts as a service provider, 10 September 2020.

15 Zakon o socijalnoj zaštiti (Act of 31 March 2011 on Social Care). 2011. <https://www.ilo.org/dyn/natlex/docs/ELECTRONIC/89381/102666/F100182330/SRB-2011-L-89381.pdf>.

the exact amount of funding during the adoption of an annual budget, based on the needs of the local users of social care services, and on the number of existing providers of social care services¹⁶.

Local cities and municipalities provide around **three-quarters of the funding of local social care services, or 2.8 billion RSD**¹⁷ (approx. 22.3 million EUR), from their budgets¹⁸. Because of the lack of funding, the local governments can in certain cases use additional funding from the national government. The so-called **“earmarked transfers” (namenski transferi)** are an instrument of national support to local governments in providing social care services. They are supposed to mitigate the unequal development across Serbia as part of the larger strategy for local development, meaning that less developed municipalities receive funding from the government to encourage more even development across the regions of Serbia¹⁹. The Ministry of Labour, Employment, Veteran and Social Policy granted 400 million RSD (approx. 3.2 million EUR) in earmarked transfers in 2016 when the program started²⁰. In 2018, earmarked transfers funded **17%** of total spending on local social care service, or around **620 million RSD** (approx. 5 million EUR)²¹. Notably, there has been a disagreement on the benefit of earmarked transfers between the interviewees. While to some, earmarked transfers are an outstanding way

of bridging the gap between more and less developed cities and municipalities²², for others, they represent a good idea in theory but not in practice. There were cases of local governments using solely earmarked transfers to fund their social care services and not providing any funding at all or only very limited funding from their local budget even though some of these municipalities were required by law to participate in the funding²³.

Despite the effort to bridge the gap between more and less developed cities and municipalities in Serbia, there remain great disparities across the country. Large cities typically dominate the funding of social care services in terms of the amount, with the capital of **Belgrade** spending **1,26 billion RSD** (approx. 10 million EUR) on, or more than a third of the total expenditure of local municipalities on social care services in Serbia. Average expenditure on local social care services per capita amount to approximately 454 RSD (approx. 3.6 EUR) per year. The median expenditure per citizen per year is 330 RSD (approx. 2.6 EUR), meaning that 50 % of municipalities spend less than that. Municipalities with the largest spending on social care services per capita are typically large cities such as Belgrade and Novi Sad or municipalities with a small number of citizens that have prioritised social care services²⁴.

16 Interview with a representative of DPO which also acts as a service provider, 10 September 2020.

17 Serbian dinar, 1 EUR equals approximately 118 RSD (October 2020)

18 Mapiranje usluga socijalne zaštite i materijalne podrške u nadležnosti jedinica lokalnih samouprava u Republici Srbiji. 2020. Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia. http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2020/09/Mapiranje_usluga_socijalne_zastite_i_materijalne_podrske_u_nadleznosti_JLS_u_RS.pdf.

19 Namenski transferi (Earmarked Transfers). 2017. Republic Institute for Social Protection (Republiki zavod za socijalnu zaštitu). <http://www.zavodsz.gov.rs/sr/podru%C4%8Dje-delovanja/unapre%C4%91enje-mera-socijalne-za%C5%A1tite/namenski-transferi/>.

20 Ditto.

21 Mapiranje usluga socijalne zaštite i materijalne podrške u nadležnosti jedinica lokalnih samouprava u Republici Srbiji. 2020. Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia. http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2020/09/Mapiranje_usluga_socijalne_zastite_i_materijalne_podrske_u_nadleznosti_JLS_u_RS.pdf.

22 Interview with an expert on social policy, 15 September 2020.

23 Interview with an expert on social services, 4 September 2020. Also reflected in Mapiranje usluga socijalne zaštite i materijalne podrške u nadležnosti jedinica lokalnih samouprava u Republici Srbiji. 2020. Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia. http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2020/09/Mapiranje_usluga_socijalne_zastite_i_materijalne_podrske_u_nadleznosti_JLS_u_RS.pdf.

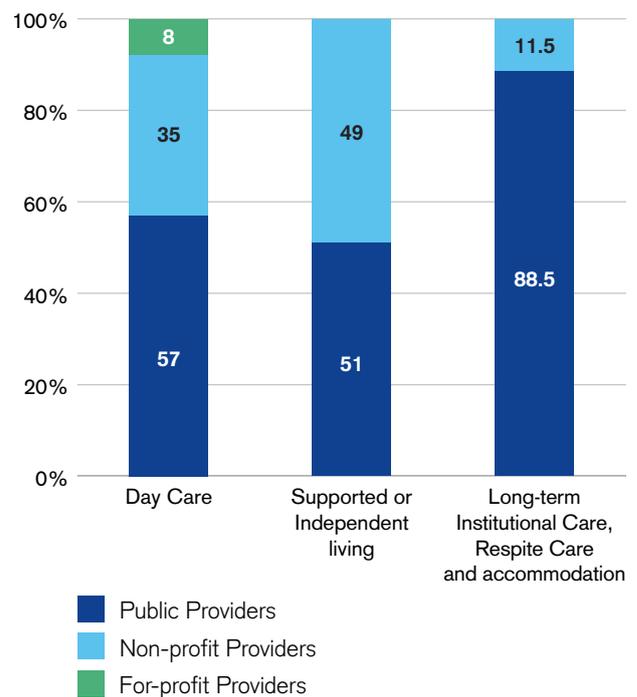
24 Mapiranje usluga socijalne zaštite i materijalne podrške u nadležnosti jedinica lokalnih samouprava u Republici Srbiji. 2020. Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia. http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2020/09/Mapiranje_usluga_socijalne_zastite_i_materijalne_podrske_u_nadleznosti_JLS_u_RS.pdf.

Provision of social care services

According to the report *Mapiranje usluga socijalne zaštite i materijalne podrške u nadležnosti jedinica lokalnih samouprava u Republici Srbiji* (Mapping Social Care Services and Material Support within the Mandate of Local Governments in the Republic of Serbia) published by the Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia in September 2020, local social care services were provided in **137 out of 145 municipalities in 2018**. No social care services were provided in eight municipalities in 2018²⁵. Notably, this is for social care services in general rather than for services for PWDs in particular. As identified in the interviews, it is difficult to find data for services for PWDs specifically as in Serbia the line between different social care services in general and social care services for PWDs specifically is often blurred, as is the line between services for different age groups^{26, 27}.

Social care services are provided by **licenced service providers** and having a licence is necessary in order to be able to participate in public tenders and apply for public funding. The licence ensures the minimum standards that must be met by the service providers as reflected in the Guideline on Detailed Conditions and Standards for the Provision of Social Care Services²⁸. The Act on Social Care establishes that all service providers with a licence are equal regardless of their political or economic nature. The public (state) sector is the primary service provider in several categories of social services. However, organisations of civil sectors such as NGOs and DPOs are particularly strong in Serbia and they traditionally substituted the role of the public sector, especially in services of supported or independent living²⁹. In the past few years, there has been a surge in for-profit private sector providers. While private sector providers were typically providing long-term institutional care for elderly users, their numbers are now also rising in day care services³⁰.

FIGURE 1 | Types of social care service providers in 2018



Source: Adapted from: *Mapiranje usluga socijalne zaštite i materijalne podrške u nadležnosti jedinica lokalnih samouprava u Republici Srbiji. 2020. Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia. http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2020/09/Mapiranje_usluga_socijalne_zastite_i_materijalne_podrske_u_nadleznosti_JLS_u_RS.pdf.*

Overall, in 2018 **the public sector** provided for **58%** of users of social care services, **the non-profit sector** provided for **35%** of users and the **for-profit sector** provided for **7%**. However, this is a dramatic change compared to 2015 when the public sector provided for 74% of users while the remaining 26% were provided by the non-profit sector and the for-profit sector was practically non-existent. The change is by large caused by the rise of the for-profit sector in day care services, as

25 Ditto.

26 Interview with a representative of a governmental institution monitoring the state of social care services, 28 September 2020.

27 Interview with an expert on social care protection in local cities and municipalities, 4 September 2020.

28 Pravilnik o bližim uslovima i standardima za pružanje usluga socijalne zaštite (Guidelines on Detailed Conditions and Standards for the Provision of Social Care Services). 2013, 2018, 2019. <https://www.paragraf.rs/propisi/pravilnik-blizim-uslovima-standardima-pruzanje-usluga-socijalne-zastite.html>.

29 Interview with a representative of a governmental institution monitoring the state of social care services, 28 September 2020.

30 *Mapiranje usluga socijalne zaštite i materijalne podrške u nadležnosti jedinica lokalnih samouprava u Republici Srbiji. 2020. Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia. http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2020/09/Mapiranje_usluga_socijalne_zastite_i_materijalne_podrske_u_nadleznosti_JLS_u_RS.pdf.*

reflected in Figure 1, which were also provided only by the public and non-profit sectors in 2015³¹.

In terms of the quality and accessibility of the provision of local social care services, there are **great disparities across the country**, just like in the case of funding. Services are most developed and most accessible in big cities and the working conditions too tend to be the best in urban areas, especially in terms of the equipment and technology available for the service providers as well as training aimed for development of knowledge and skills. Yet there are intensive efforts to standardise the quality of service provided across the country with professional and skills training. There are also great disparities in the amount users need to pay for the services as each local city and municipality decides independently on the percentage by which the user needs to participate in the costs³² and the percentage typically depends on the income of the users³³. Based on the experience of service users, service providers and their employees, there is a great space for improvement of social care services for PWDs across the categories, especially in terms of the sustainability of the services, support from the national government and financing³⁴. It is expected that the **Act on Social Care will be reformed in the near future** and experts and providers of social care services alike stress the importance of the involvement of the civil society in the process of drafting the law through public debates³⁵.

Day Care

Day care services are referred to in Serbia as “day services in a community” (*dnevne usluge u zajednici*) and they are aimed at prolonging the stay of a person with a disability in their family and community³⁶. Day care

services are managed and provided by **local cities and municipalities** and they include services of day care, home care, child personal attendant, drop-in centres and other services which are aimed at supporting the users in their environment. Services of day care allow people with disabilities, both intellectual and physical, to advance their social, psychological or physical skills. **Day care** services are divided into day care services for children younger than 26 years and for adults older than 26 years. However, in this case too, the line between the services is often blurred as many local cities and municipalities do not have sufficient resources to offer and develop both types of services³⁷. Through day care centres, the families of PWDs are supported in the role of providing social care, significantly lowering the chance of the families burning out and consequently deciding to place the PWD in institutional care. In order to use day care services, the person submits a request to the local Centre for Social Work³⁸.

Second, services of **home care** are aimed for PWDs who require support in fulfilling their day-to-day needs. The home care services include assistance in obtaining food, maintaining the personal hygiene or the hygiene of their homes, fulfilling social and cultural needs, obtaining prescribed medicine and assisting with other health-related needs, or assisting with the maintenance of the quality of their homes. To use the services of home assistance it is necessary to submit a request to the local Centre for Social Work and the intensity of the service as the number of hours of assistance per week is determined based on the degree of disability, family situation, as well as the financial situation of the local administration which funds the service. Services of home care have some of the longest waiting lists with great disparities in service provision across the country³⁹.

31 Mapiranje usluga socijalne zaštite i materijalne podrške u nadležnosti jedinica lokalnih samouprava u Republici Srbiji. 2020. Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia. http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2020/09/Mapiranje_usluga_socijalne_zastite_i_materijalne_podrske_u_nadleznosti_JLS_u_RS.pdf.

32 Interview with a representative of a governmental institution monitoring the state of social care services, 28 September 2020.

33 Interview with an expert on social care protection in local cities and municipalities, 4 September 2020.

34 Interview with a representative of DPO which also acts as a service provider, 10 September 2020.

35 Interview with a representative of independent living service provider, 28 August 2020.

36 Zakon o socijalnoj zaštiti (Act of 31 March 2011 on Social Care). 2011. <https://www.ilo.org/dyn/natlex/docs/ELECTRONIC/89381/102666/F100182330/SRB-2011-L-89381.pdf>.

37 Interview with an expert on social care protection in local cities and municipalities, 4 September 2020.

38 Usluge socijalne zaštite namenjene osobama sa invaliditetom (Social Care Services for PWDs). 2017. <https://www.cerebralnaparaliza.rs/dokumentacija/prava-i-beneficije/32-usluge-socijalne-zastite-namenjene-osobama-sa-invaliditetom>.

39 Interview with a representative of DPO which also acts as a service provider, 10 September 2020.

Day care services in general, including services not specifically intended for PWDs, are **the most prevalent types of local services in Serbia**, and they were provided in 135 cities and municipalities in 2018. The users of day care services accounted for 89 % of all the users of social care services in 2018, amounting to **21,840 users**. Three most prevalent individual services were also part of day care services – **home care for adults, personal child attendant and day care for children with disabilities**⁴⁰. However, there are very long waiting lists, particularly for the service of personal child attendant⁴¹, and, as reflected in Figure 2, the

services are largely concentrated in the urban areas. Day care services also attract by far the biggest proportion of funding out of all the other types of social care services that are governed by cities and municipalities – **81 %** in 2018, while the other social care services receive 19 % of the funding⁴². While day care services, like other social care services, are dominantly provided by the public providers, there are now experiencing the largest increase of for-profit providers which were only three years ago practically non-existent. For instance, while the public sector provided for 70% of users of day care for adults with disabilities in 2015, in 2018 it was only 26%⁴³.

TABLE 1 | Funding and provision of day care services in Serbia

Day care service	Number of users in 2018	The percentage of users from urban areas (%) in 2018	Engagement of the public sector in the service provision as a percentage of users (%) in 2018	Funding in EUR in 2018
Day care for children with disabilities	1,999	81	76	7,617,715
Day care for adults with disabilities	449	56	26	771,800
Home care for children	227	67	32	327,330
Home care for adults	16,678	52	54	10,692,636
Personal child attendant	1,762	84	39	4,907,843

Source: Data from: *Mapiranje usluga socijalne zaštite i materijalne podrške u nadležnosti jedinica lokalnih samouprava u Republici Srbiji. 2020. Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia. http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2020/09/Mapiranje_usluga_socijalne_zastite_i_materijalne_podrske_u_nadleznosti_JLS_u_RS.pdf.*

Independent/Supported Living

Services of support for independent living (*usluge podrške za samostalan život*) are provided in order to improve the quality of life of a person with a disability and to support them in living an independent life as an equal

member of the society. They include services of living with support, personal assistance, protected housing, and other. The services of supported or independent living were provided in **29 cities and municipalities** in 2018. The most prevalent service was the service of **personal assistance for PWDs**⁴⁴. Services of personal assistance offer individual support to PWDs in their homes and work with an objective of achieving greater

40 Mapiranje usluga socijalne zaštite i materijalne podrške u nadležnosti jedinica lokalnih samouprava u Republici Srbiji. 2020. Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia. http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2020/09/Mapiranje_usluga_socijalne_zastite_i_materijalne_podrske_u_nadleznosti_JLS_u_RS.pdf.

41 Interview with a representative of DPO which also acts as a service provider, 10 September 2020.

42 Ditto.

43 Mapiranje usluga socijalne zaštite i materijalne podrške u nadležnosti jedinica lokalnih samouprava u Republici Srbiji. 2020. Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia. http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2020/09/Mapiranje_usluga_socijalne_zastite_i_materijalne_podrske_u_nadleznosti_JLS_u_RS.pdf.

44 Mapiranje usluga socijalne zaštite i materijalne podrške u nadležnosti jedinica lokalnih samouprava u Republici Srbiji. 2020. Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia. http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2020/09/Mapiranje_usluga_socijalne_zastite_i_materijalne_podrske_u_nadleznosti_JLS_u_RS.pdf.

independence and social inclusion. To be eligible for the services of personal assistance, the PWD must fulfil all of the following conditions: be of adult age and have the capacity for independent decision-making, be socially engaged (e.g. employed, in education, active members of associations or organisations), possess a confirmation of their right to the services of personal assistance, and the local Centre for Social Work must decide that the person who submitted the request for the services of personal assistance meets the requirements. The services of personal assistance are based on the one-to-one principle, meaning that one assistant assists only one PWD⁴⁵ with a minimum of 20 and maximum of 40 hours per week. The personal assistant can never be a person living with the PWD in a household, a member of the first family line or a sibling of the PWD⁴⁶.

As the services of personal assistance are governed and financed on the local level, it is up to every municipality whether they are going to provide such a service. In Serbia, approximately 10 cities offer the services of personal assistance, reaching around 300 users. There are great disparities between rural and urban areas in Serbia, with Belgrade and Niš having by far the largest numbers of users. **Organising the services of personal assistance in rural areas proves to be very difficult** as the assistants are frequently unable to travel to rural parts of the country and there is a lack of assistants in rural areas⁴⁷. Service users are required to contribute to the total amount of price of service, but the percentage of user contribution is also decided by each municipality individually and varies greatly across the country⁴⁸. The Act on Social Care establishes that the service can be provided by NGOs, DPOs or private providers for profit; but according to an interviewee from one of the main personal assistance services provider, private service providers are being awarded tenders because they offer a cheaper price instead of awarding tenders to non-profit

organisations that have worked in the local area for years. Thus, according to an interviewed provider, the issue with local financing of services is also that the municipalities view the price as the primary criterion when awarding the tenders rather than taking into account the quality of the service or the experience of DPOs⁴⁹. This has been seconded by another interviewee who expressed regret over the fact that providers with little experience are being awarded tenders and that there is insufficient monitoring of the quality of services and of following the standards described by the Guidelines⁵⁰.

There are **very long waiting lists** for services of independent living and for services of personal assistance since as mentioned above, there are not enough personal assistants due to insufficient funding, especially in rural areas. For instance, there are approximately 70 users of services of personal assistance in Belgrade and 20 users on the waiting list. However, because the local government allocates the funding for only 70 assistants, the service providers cannot provide the service to more than 70 users and people can be on the waiting lists for years. Moreover, in certain parts of the country, the provision of the services of independent living is **unsustainable** and not provided for an entire year but for instance only for a couple of months – the municipalities allocate all the funding at the beginning of a year, hoping that they will receive some additional funding from during the year, e.g. from private donors, other grants, and similar⁵¹.

Services of **supported housing** are available for PWDs who are older than 15 years. As part of the services, as many as six PWDs live together in one living unit with full or partial support from the carers, gaining skills that are necessary for independent living such as shopping, cooking, cleaning and paying bills. Supported housing also includes the services of carers who provide assistance with the educational and professional advancement of

45 Interview with a representative of independent living service provider, 28 August 2020.

46 Usluge socijalne zaštite namenjene osobama sa invaliditetom (Social Care Services for PWDs). 2017. <https://www.cerebralnaparaliza.rs/dokumentacija/prava-i-beneficije/32-usluge-socijalne-zastite-namenjene-osobama-sa-invaliditetom>.

47 Interview with a representative of independent living service provider, 28 August 2020.

48 Interview with a representative of a provider of social care services for people with intellectual disabilities, 7 October 2020.

49 Interview with a representative of independent living service provider, 28 August 2020.

50 Interview with a representative of a provider of social care services for people with intellectual disabilities, 7 October 2020.

51 Interview with an expert on social care protection in local cities and municipalities, 4 September 2020.. The fact that services are often not provided continuously throughout the entire year has also been reflected in the report *Mapiranje usluga socijalne zaštite u nadležnosti jedinica lokalnih samouprava u Republici Srbiji*. 2016. Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia. <http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2016/12/Mapiranje-usluga-socijalne-zastite.pdf>.

PWDs, as well as other areas that would allow for their greater independence. The service of protected housing

is predominantly provided in Serbia's major cities with very little support available in the rural areas⁵².

TABLE 2 | Funding and provision of services of supported or independent living in Serbia

Supported or Independent Living	Number of users in 2018	The percentage of users from urban areas (%) in 2018	Engagement of the public sector in the service provision as a percentage of users in 2018	Funding in EUR in 2018
Personal assistance	223	91	49	832,064
Supported housing for youth	50	87.8	100	108,691
Supported housing for PWDs	107	96	77	490,385

Source: Data from: *Mapiranje usluga socijalne zaštite i materijalne podrške u nadležnosti jedinica lokalnih samouprava u Republici Srbiji. 2020. Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia.* http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2020/09/Mapiranje_usluga_socijalne_zastite_i_materijalne_podrske_u_nadleznosti_JLS_u_RS.pdf.

Long Term Institutional Care

Long-term institutional care is part of what is referred to in Serbia as accommodation services (*usluge smeštaja*) which are managed and provided on the **national level by the Republic of Serbia**. Thus, they differ from all of the social care services discussed above in that the services of long-term institutional care are not typically managed and funded by the local governments of cities and municipalities. Services of long-term institutional care are provided by licenced service providers, both public and private⁵³. **Private service providers** are particularly well-established in the sector of long-term institutional care for the elderly in general⁵⁴. Accommodation services in Serbia encompass not only institutional care homes but also services of accommodation in a family (foster, kinship and other families) who are typically related to the person with a disability or are a licenced service provider,

services of shelter accommodation for people in a crisis situation, and other.

Services of care homes are available to children and adults with disabilities who require 24 hours of care and support and who are unable to live independently or with their families or the support of other social care services. The aim of the services is to advance the quality of life of the users and they frequently include healthcare services, services of social work, psychological services, and other. Different types of care homes include standard accommodation, accommodation with additional or intensive support, urgent accommodation, occasional accommodation, and other. Care homes for adults must not have more than 100 users while care homes of children must not have more than 50 users⁵⁵. There are specific homes for children with a disability and for adults with a disability but based on the experience of service

⁵² Mapiranje usluga socijalne zaštite i materijalne podrške u nadležnosti jedinica lokalnih samouprava u Republici Srbiji. 2020. Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia. http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2020/09/Mapiranje_usluga_socijalne_zastite_i_materijalne_podrske_u_nadleznosti_JLS_u_RS.pdf.

⁵³ Interview with a representative of DPO which also acts as a service provider, 10 September 2020.

⁵⁴ Interview with a representative of a governmental institution monitoring the state of social care services, 28 September 2020.

⁵⁵ Zakon o socijalnoj zaštiti (Act of 31 March 2011 on Social Care). 2011. <https://www.ilo.org/dyn/natlex/docs/ELECTRONIC/89381/102666/F100182330/SRB-2011-L-89381.pdf>.

providers, the need of users typically greatly exceeds the number of such homes, resulting in the fact that the line between care homes for different age groups is blurred⁵⁶.

To use the services of care homes, a person must submit a request with their local Centre for Social Work. If their request is successful, they are either admitted in a care home or placed on a waiting list. Typically the capacity of care homes in Serbia is almost always full and the **waiting lists are long**. Centre for Social Work decides on the way of financing the service – users, their families or third parties can pay fully or partially for the service based on their income⁵⁷. The financing of care homes is twofold. First, the user is expected to pay around **35 000 RSD** (approx. 280 EUR) per month and this price commonly includes an allowance for personal needs of the users⁵⁸. If the user is unable to pay the Ministry of Labour, Employment, Veteran and Social Policy can fully or partially cover the costs. The second part of the costs is financed from the national government and it covers wages of the service providers, maintenance of buildings and similar and it amounts to around **65 000 RSD** (approx. 520 EUR) per user. Thus, the total cost per user is around **100 000 RSD** (approx. 800 EUR)⁵⁹.

Long-term institutional care is viewed as the last resort option for PWDs in cases where no other social care service is sufficient for the enhancement of the quality of life of a person with a disability. A representative of a provider of social care services for people with intellectual disabilities considers the quality of life in institutional care to be **deeply below human dignity**, with frequent **violation of human rights** such as the right to adequate and timely health care, the right to vote, the right to information and similar. Yet the insufficient funding of local social care services has resulted in the end of at least two supported living service providers, leading to a return

of 23 people in Belgrade and 4 people in a small town of Vlasotince in southern Serbia into institutional care⁶⁰. Particularly in the context of the current global pandemic of COVID-19, institutional care has been recognised as problematic and disproportionately affecting vulnerable users⁶¹. The key future trend will possibly be continued deinstitutionalisation and a stronger emphasis on local social care services.

Respite care

Respite care is considered an emergency and temporary accommodation service along with social care services such as shelter accommodation rather than long-term accommodation. Thus, unlike long-term accommodation services that are governed on the national level, respite care is within the mandate of **local governments of cities and municipalities**.

Services of respite accommodation are available for children and young adults with a disability aged between 5 and 26 years as well as for adults and older adults with a disability. The service allows for an occasional accommodation of young PWDs for a day, a few days or a weekend with an aim of increasing the quality of life of young PWDs and their families, as well as lowering the chance of institutionalisation of PWDs. The services of respite accommodation can be used for a maximum of 45 days in a year and a maximum of 20 days in a row. The right to use the service can be reached through the local Centre for Social Work⁶².

However, the services of respite care were **offered in a very few cities and municipalities** with a decreasing trend between 2012 and 2018 and they were **generally undeveloped**⁶³.

56 Interview with an expert on social care protection in local cities and municipalities, 4 September 2020.

57 Domski smeštaj (Care Homes). 2020. <https://domcurug.rs/>.

58 Domski smeštaj (Care Homes). 2020. <https://domcurug.rs/>.

59 Interview with a representative of a provider of social care services for people with intellectual disabilities, 7 October 2020.

60 Ditto.

61 Mapiranje usluga socijalne zaštite i materijalne podrške u nadležnosti jedinica lokalnih samouprava u Republici Srbiji. 2020. Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia. http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2020/09/Mapiranje_usluga_socijalne_zastite_i_materijalne_podrske_u_nadleznosti_JLS_u_RS.pdf.

62 Usluge socijalne zaštite namenjene osobama sa invaliditetom (Social Care Services for PWDs). 2017. <https://www.cerebralnaparaliza.rs/dokumentacija/prava-i-beneficije/32-usluge-socijalne-zastite-namenjene-osobama-sa-invaliditetom>.

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TABLE 3 | Funding and provision of respite care in Serbia

Respite care	Number of users in 2018	The percentage of users from urban areas (%) in 2018	Engagement of the public sector in the service provision as a percentage of users in 2018	Funding in EUR in 2018
Respite care	85	69	33	113,090

Source: Data from: *Mapiranje usluga socijalne zaštite i materijalne podrške u nadležnosti jedinica lokalnih samouprava u Republici Srbiji. 2020. Social Inclusion and Poverty Reduction Unit of the Government of the Republic of Serbia.* http://socijalnoukljucivanje.gov.rs/wp-content/uploads/2020/09/Mapiranje_usluga_socijalne_zastite_i_materijalne_podrske_u_nadleznosti_JLS_u_RS.pdf.

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- ★ Milica Stranjaković, Center for Social Policy, Program Coordinator, Interview on 4th of September, 2020
- ★ Selma Čatović, Union for Cerebral Palsy Serbia, Interview on 10th of September, 2020
- ★ Slavica Milojević, Republic Institute for Social Protection, Head of Information, Promotion and Support Department, Interview on 28th of September, 2020
- ★ Aleksandra Janić, Na Pola Puta, Interview on 7th of October, 2020
- ★ Anonymous service provider, Interview on 15th of September, 2020

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