

# Plenary 2: How to Create Community-Based Services

## International Tools, Guidelines, and Experiences



### Jorge Araya

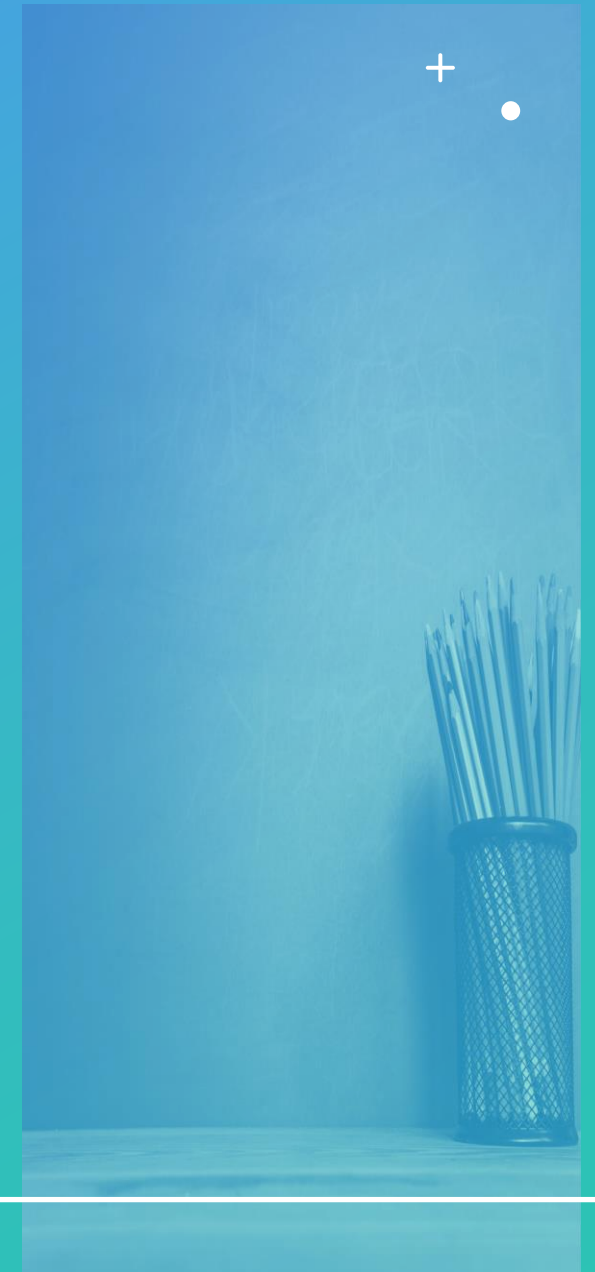
Human Rights Officer,  
Secretariat of the United Nations  
Committee on the Rights of  
Persons with Disabilities



# UNITED NATIONS COMMITTEE GUIDELINES ON DEINSTITUTIONALIZATION, INCLUDING IN EMERGENCIES

9-10 October 2023

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# CRPD Committee: Guidelines on deinstitutionalization, including in emergencies

1. Why did the UN set up the **guidelines on DI** ?
2. Which **population groups** do they cover – or can they be used for a broader set of groups receiving services from social authorities and providers?
3. What are the **key messages** / points relevant for social services?
4. What is required to have them **implemented** in Europe? What do you **expect** from the seminar participants (Representative from national, regional and local social services, European Commission) to make best use of the guidelines?

# Why did the UN set up the guidelines on DI ?

- Institutionalization, re-institutionalization and trans-institutionalization **still** widely **practiced** in State parties
- **Covid-19 pandemic** resulted in more trauma and human rights violations for persons with disabilities
- Overall **transformation** of service provision **required**

# Population groups covered

- Intersectionality as a cross-cutting issue
- Women with disabilities
- Children with disabilities
- Older persons with disabilities
- Persons with intellectual and/or psychosocial disabilities

# Elements most relevant for local social services

- Definition of DI
- Duty of States parties to end institutionalization
- Understanding and implementing key elements of deinstitutionalization processes
- Access to mainstream services on an equal basis with others
- Inclusive community support services, systems and networks
- Emergency deinstitutionalization in situations of risk and humanitarian emergencies, including conflicts

# What is an Institution? Some elements

1. Obligatory **sharing of assistants** with others and
2. No or **limited influence** as to who provides the assistance;
3. Isolation and **segregation** from independent life in the community;
4. Lack of **control** over day-to-day decisions;
5. Lack of **choice** for the individuals concerned over with whom they live;
6. Rigidity of **routine** irrespective of personal will and preferences;
7. Identical **activities** in the same place for a group of individuals under a certain authority;
8. A **paternalistic** approach in service provision;
9. Supervision of living arrangements;
10. A **disproportionate** number of persons with disabilities in the same environment

# Key Messages relevant for Social Services

- States parties should prioritize the development of a range of high-quality, **individualized support** and inclusive mainstream **services in the community**, without delay.
- Definitions of community-based support services, ... should prevent the emergence of **new segregated services**, such as
  1. **Group housing** – including small group homes –
  2. **Sheltered workshops**,
  3. Institutions for the provision of **respite care, transit homes**,
  4. **Day-care centres**, or
  5. Coercive measures such as **community treatment orders**, which are not community-based services.



# What can be done to implement the guidelines?

- Use of European Funds
- Human rights budgets
- Law reform, particularly in mental health
- DI strategies and plans aligned with the Convention, General Comment No5 and the Guidelines
- Service provision aligned with the human rights model of disabilities
- Upcoming EC Guidelines