Education and Rehabilitation of Adult Persons with Disabilities

Thematic Collection of International Importance

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INSTITUTIONAL CARE AND SOCIAL WELFARE FOR PEOPLE WITH DISABILITIES IN SERBIA

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SUMMARY

The aim of our study was to analyze institutional care and social welfare for people with disabilities in Serbia. Data collection was performed using a special questionnaire about present institutions, providers and users of social welfare services. Indicators of evaluation were: capacity and structure of accommodation units, accessibility of building, structure of users of services, accessibility of services, the number and types of services and programs for users, transparency, structure of employees and their permanent education.

The basic paradigm was that the effects of protection cannot be measured by the number of people treated at certain territory, but the scope and quality of services provided. The study included a total of 18 institutions of social protection (7 residential institutions and 11 day care institutions). Structure of users of social welfare services makes a total of 2 145 people with disabilities (out of which 1 757 (81,91%) in residential institutions and 388 (18,09%) in the daily treatment institutions).

Social welfare institutions in Serbia are providing accommodation, food and working-occupational treatment for people with disabilities. They are organized as day care and residential institutions. The level and scope of social protection measures are regulated by a special law, but not by the standards and norms of the profession. Basic features of institutional care and protection of people with disabilities in the Republic of Serbia are: the number and heterogeneity of the group, trying degree of disability service users, systematization inconsistent with the needs and professional standards in this area, a low level of qualification of service providers.

Key words: people with disabilities, residential care, social care

INTRODUCTION

People with disabilities represent a special category of the human population, which must be taken with significant social concern, in order to be protected through basic social systems and social welfare. Protection should satisfy the specific needs of people with disabilities which are caused by nature and degree of damage.

Different approaches for protection of people with disabilities are used in different states (medical, social, educational....). All approaches promote independence and optimal integration of people with disabilities in community activities (typical housing conditions, attending full-time education, competitive employment...). The

complexity of this problem, demands involvement of multidisciplinary organizations and multidimensional focus in treatment of people with disabilities. However, frequent disagreements of individual disciplines that are dealing in this area, represent an obstacle to a constructive approach to the care and protection of people with disabilities (the consequence of such a state is: a monopoly of certain professions, exclusion and/or ignoring of other professions, the eclecticism of the treatment of people with disabilities, favoring certain models of treatment or approaches...) (Nedovic et al., 2012; Rapaic et al., 2007).

Today, the quality of life is a leading question of social welfare for people with disabilities. Key factors of the concept of quality of life are: individualization, inclusion, participation and choice (Nedovic et al., 2013).

Institutional protection of people with disabilities in the Republic of Serbia

Institutional form of social welfare protection is abandoned in most of developed countries, but it is still a reality in a greater or lesser scope in many transitional and underdeveloped societies. In Serbia, accommodation of people with disabilities in institutions for social welfare is the leading paradigm for last several decades.

Social welfare institutions in the Republic of Serbia are:

- Centers for Social Work,
- Social welfare institutions for adults and seniors with mental, intellectual, physical or sensory disabilities,
- Centers for foster care and adoption of children and youth,
- Institutions for adults and the elderly,
- Institutions for children and young people (Republic Institute for Social Protection, 2013).

According to the synthesized report of the "Republic Institute for Social Protection", in 2012 the total number of beneficiaries of social protection that have been registered by "Centre for Social Work" is 631 703 people. Out of total number 85 879 (13,59%) of them are people with disabilities. Accommodation services for adults with mental, intellectual, physical or sensory disabilities are offered in 18 institutions, according to the data from 2012. The total capacity of institutional residency was 4 229 on the day 31.12,2012. Also, there were 2501 children and young people in foster care, while in institutions for adults and elderly there were 8 171 persons accommodated. In 2012, it was registered in the framework of institutions for children and youth, total of 19 institutions (11 institutions for children and youth; 5 homes for children and youth with disabilities; and 3 Special Institutes for Children and Young People) that provide accommodation services for children and young people. The total capacity of dormitory accommodation was 2 494, and on the day December 31, 2012, in these institutions were registered 2 205 users out of which 663 (30,07%) in homes for children and youth, 1 471 (66,71%) in homes for children and youth with disabilities and 71 (3,22%) users in Special institutes for children and youth) (Republic Institute for Social Protection, 2013).

Social welfare institutions in Serbia are providing accommodation, food and working-occupational treatment for people with disabilities. These institutions

are organized as day care and residential institutions. The level and scope of social protection measures is regulated by a special law, and not by the standards and norms of the profession. Broadly defined and applied right for placement in an institution of social protection has led to an institutional isolation of many users. It is evident that other types of services organized out of residential institutions would better meet their needs. Children with disabilities that are placed in five institutions of social welfare are particularly vulnerable. They usually spend their entire lives in an institutional environment. Therefore, the institutions that were originally intended for children, over time became institutions for adults.

When certain institution has hundreds of users, ranging from 4 to 50 years, organizing and controlling their activities becomes very difficult task. Better organization, professional norms and standards, guarantee a higher quality of service, while writing the protocol of activities would give the ability to control the quality and impact of services that are provided. Constant innovation practices and permanent education of employees should become a priority of work in social welfare institutions. It is believed that education of providers and the introduction of new facilities have a direct impact on the quality of life of social welfare users (Nedović et al., 2010).

The system of social welfare of people with disabilities in the Republic of Serbia

In Serbia, there is a centuries old tradition of helping people with disabilities. It's source is in Christian religion, and it promotes human relationship which encompass understanding, professionalism and willingness to accept this person as an equal member of society (Rapaic et al., 2006).

Social protection of persons with disabilities in Serbia in this moment is in process of reformation. Currently, phase of intense reorganization and transformation at all levels is performed. Also, it is actual process of harmonization of national social protection regulative with the EU agenda, which means transformation from present system of social welfare to social inclusion. An important part of the agenda is the interdependence of different sectors, particularly, the connection between the social and the health care system, system of employment, education, police and justice (Social Welfare Development Strategy, 2005). To achieve these objectives it is necessary to introduce certain normative, organizational and value changes in the social welfare system. Till today following changes has been made:

- Change of paradigm in terms of disability, from medical approach to social and holistic,
- Deinstitutionalization of people with disabilities and introduction of new services for people with disabilities,
- Decentralization of responsibilities and administrative procedures from the central government to local governments,
- New providers of social services,
- Enlargement of the range of services at the community level for people with disabilities,

 Modernization of system of classification of disability, change of criteria that define the right to social welfare (ICF).

The new national Law on Social Welfare provides a legal framework for the introduced reforms. The law predicts deinstitutionalization and decentralization of social services and promotes a greater role of civil society in social welfare. In addition establishes a system of providing social services based on licensing and plurality of providers, improve the quality of professional work setting up the chamber, licensing of providers and social services, as well as the accreditation of the program of service. The individual access of users to services and participation of users in service, in all phases of providing services make a significant change in the system of social welfare (Law on Social Welfare, 2011).

The drafting of bylaws is ongoing, which should enable the full implementation of this Law.

In the development of the social welfare system, in the organizational and technical terms, dominates the effort to take on more complete way to meet the needs of users, primarily through the development of new standards and social welfare services. However, the system of social welfare services for people with disabilities is still institutionalized with a relatively limited number of community-based services and support services at the local level. Access to services is still determined by the type and degree of disability. The law guarantees to all users the right to participate in making decision and the right to choose the services, but in practice the situation is different. An example are the "inter-section commissions" which provide recommendations that are not binding, but often insist that all children must be enrolled in the education system (compliance with the provisions of the new Law on the Basis of the Education System). As a consequence, for example, the parents may disagree with the recommendation of the Commission, or the Commission could make a recommendation that the child must be enrolled in a regular school, although in the local community, there are no support services (teaching assistant) for children with disabilities. The law imposes an obligation on the licensing services and services providers and accreditation of programs providing services. However, the standards for licensing and accreditation are prescribed by the Minister responsible for social welfare but not by the professionals from social welfare area.

The adoption of the new Law on Social Welfare narrowed the space for practical effectiveness of special education and rehabilitation practice in this area (Rapaic et al., 2013). Two groups of factors are generating problems in the activities of special education and rehabilitation in institutions of social welfare. The first group of factors, external factors, is related to the rigid mapping system (primary and secondary) that ignore specificities of the organizational forms of work with people with disabilities. Thus, social welfare institutions are somehow converted into institutions for accommodation and for food for people with disabilities. The second group of factors, from the standpoint of the profession, belongs to the internal factors, and are caused by the absence of detailed description of the work methodology and the impossibility of introducing modern methods of treatment or techniques of work in institutions of social welfare (insufficient and slow implementation of scientific and research findings in practice) (Rapaic et al., 2010).

Thus, it is required to further develop social welfare system since actual quality and manner of exercising the service does not fully comply with the new circumstances and needs. It is necessary to harmonize the system with modern scientific and professional achievements in this field.

THE AIM

The aim of the paper is the analysis of institutional care and social welfare of people with disabilities in Serbia. We explored the structure of service providers, structure of service and the structure of beneficiaries in institutions for people with disabilities. Indicators of assess were: capacity and structure of accommodation units, accessibility of building, structure of users of services, accessibility of services, the number and types of services and programs for users, transparency, structure of employees and permanent education. The basic paradigm is that the effects of protection are not measured by the number of people treated, but the scope and quality of services provided.

METHODOLOGY

The place and time of the survey

The survey was conducted during June 2014 at the following institutions of social welfare:

- 1. Institutional placement for Children and Youth with Special Needs, Veternik
- 2. Institutional placement for Adults "Kulina", Kulina
- 3. Institutional placement for Disabled Adults, Doljevac
- 4. Institutional placement for Children and Youth "Duško Radović", Niš
- 5. Institution for adults and older "Gvozden Jovančević", Veliki Popovac
- 6. Institutional placement for Adults, Blace (Trbunje)
- 7. Institutional placement for Children and people with disabilities "Dr Nikola Šumenković", Stamnica

and at the following day care Centers:

- 1. Day care Center "Borska", Belgrade
- 2. Day care Center "Barajevo", Belgrade
- 3. Day care Center "Diljska", Belgrade
- 4. Day care Center "Kornelija Stankovića", Belgrade
- 5. Day care Center Šekspirova", Belgrade
- 6. Day care Center "Čukarica", Belgrade
- 7. Day care Center "Obrenovac", Obrenovac
- 8. Day care Center "Stari grad", Belgrade
- 9. Day care Center "Voždovac", Belgrade
- 10. Day care Center "Mladenovac", Mladenovac
- 11. Day care Center "Lazarevac", Lazarevac

Research methods and techniques

Data collection was performed using a special questionnaire about institutions, providers and users of social welfare services. The first part of the questionnaire is related to general information about the institution of social welfare, precisely the name and place of the institution and its purpose. Following are data on the capacity of institutions and structure units, accessibility, information services and programs implemented by the institution, as well as methods of informing users and the public about the collaboration with other institutions and organizations. The second part of the questionnaire refers to the number and structure of employees by occupation, education level and employment status, and data on continuous education and training providers. The third part of the questionnaire contains information about the structure of the users of social welfare services in relation to the reason for their stay, length of stay in the institution, how they maintain contact with relatives, additional and/or related disorders, degree of mobility, as well as to foster care.

THE RESULTS

Table 1 Structure of users in social welfare institutions in relation to gender

	,		-		9		
		Gen		_			
Age	Male		Fer	nale	Total		
	N	%	N	%	N	%	
Children 0-17	152	12,07	91	10,27	243	11,33	
Young 18-30	385	30,58	267	30,13	652	30,4	
Adults 31-59	664	52,74	484	54,63	1148	53,52	
Elderly 60+	58	4,61	44	4,97	102	4,75	
Total	1259	100	886	100	2145	100	

Table 1 shows the structure of users in social welfare institutions in relation to gender. Information about the current number of users was obtained from 18 institutions of social welfare – residences and day care centers. Based on these results, we can say that most of the registered are adult users 1148 (53,52%), while the lowest number of users is in category of elderly people 102 (4,75%). At the same time, the number of children aged 18 to 30 years is 652 (30,4%), while those in the age group up to 17 years are 243 (11,33%).

Table 2 Structure of users in day care Centers in relation to gender

		Gen	Total				
Age	Male		Fer	nale	Iotai		
	N	%	N	%	N	%	
Children 0-17	52	21,67	20	13,51	72	18,56	
Young 18 - 30	88	36,67	59	39,86	147	37,89	
Adults 31-59	100	41,67	69	46,62	169	43,56	
Elderly 60+	0	0	0	0	0	0	
Total	240	100	148	100	388	100	

Table 2 gives an overview of the structure of users in day care Centers that are in the system of social welfare in relation to gender. The presented data on the current number of users were obtained from 11 day care centers. The total number of users, of both sexes, is 388. Of total number of users, 169 (43,56%) are adults, followed by 147 young people (37,89%) and the lowest is 72 children (18,56%). In a group of users up to 17 years, it is evident that there are more male (52 or 21,67%) compared to the number of female children (20 or 13,51%), while in the group of young people and adults the relationship between men and women is approximate.

Table 3 The accommodation's structure of the institutions in relation to gender

		Gen	Тол	al		
Age	Ma	Male Femal		nale	Tot	äl
	N	%	N	%	N	%
Children 0-17	100	9,81	71	9,62	171	9,73
Young 18 - 30	297	29,15	208	28,18	505	28,74
Adults 31-59	564	55,35	415	56,23	979	55,72
Elderly 60+	58	5,69	44	5,96	102	5,81
Total	1019	100	738	100	1757	100

The accommodation's structure of the institutions in relation to gender is shown in Table 3. At institutional care (7 institutions) currently 1 757 users are registered. More than half (979 or 55,72%) are adults, while the least are the elderly (102 or 5,81%). Young people make the 28,74%, and the children 9,73% of the total number of users that are at institutional care.

Table 4 Capacity of day care Centers

Day care Centers	The current number of users	The total capacity of dc		
DC Borska	17	25		
DC Barajevo	16	27		
DC Diljska	28	36		
DC Kornelije Stanković	24	30		
DC Šekspirova	129	106		
DC Čukarica	33	31		
DC Obrenovac	30	30		
DC Stari grad	20	21		
DC Voždovac	22	21		
DC Mladenovac	38	40		
DC Lazarevac	31	33		
Total	388	400		

Table 4 shows the capacity of day care Centers centers and the current number of users. The total capacity of day care is 400, ranging from 21 to 106 users, while the current number of users ranging from 16 to 129 users. Two of the eleven day care has more users than the potential capacity, while the other eight day care centers have fewer users compared to the total capacity of the day care.

Table 5 Institutional placements' capacity

Name of institutions	The current number of users	The total capacity of institutions
Institutional Placement for Children and Youth with Special Needs, Veternik	552	500
Institutional Placement for Adults "Kulina", Kulina	365	500
Institutional Placement for Disabled Adults, Doljevac	86	100
Institutional Placement for Children and Youth "Duško Radović", Niš	19	36
The Institution for adults and elderly presons "Gvozden Jovančević", Veliki Popovac	283	280
Institutional Placement for Adults, Blace (Trbunje)	80	No information
Institutional Placement for Children and people with disabilities "Dr Nikola Šumenković", Stamnica	372	450
Total	1757	1866

Table 5 shows the total capacity of residential institutions and the current number of users. Based on these results, we can say that the total capacity of seven residential institutions for users in social welfare is 1 866, while the current number of users is 1 757. Two out of seven residential institutions have more users in relation to the total capacity of the institution, while in other residential institutions capacity is filled from 52,78% to 86%.

Table 6 Capacity of institutions and structure of units

Institutions	The total capacity of institutions	The current number of users	Single room (the number in the category)	Double room (the number in the category)	Triple room (the number in the category)	Four bedroom (the number in the category)	Multiple room (the number in the category)
Institutional Placement for Children and Youth with Special Needs, Veternik	500	552	*	*	*	*	*
Institutional Placement for Adults "Kulina", Kulina	500	365	1	2	6	60	270
Institutional Placement for Disabled Adults, Doljevac	100	86	/	12	9	50	15
Institutional Placement for Children and Youth "Duško Radović", Niš	36	19	8	8	12	/	/
The Institution for adults and elderly presons "Gvozden Jovančević", Veliki Popovac	280	283	1	14	28	6	26

Institutions	The total capacity of institutions	The current number of users	Single room (the number in the category)	Double room (the number in the category)	Triple room (the number in the category)	Four bedroom (the number in the category)	Multiple room (the number in the category)
Institutional Placement for Adults, Blace (Trbunje)	No info	80	/	/	3	9	6
Institutional Placement for Children and people with disabilities "Dr Nikola Šumenković", Stamnica	450	372	*	*	*	*	*
Total	1866	1757	10	36	58	125	317

Table 6 shows the capacity of the institutions, the current number of users and the structure of the units. Total capacity ranges from 36 to 500 users, but the data of total capacity are not obtained from one institution which accounted the research sample. The current number of users in the seven institutions for accommodation of users in the Republic of Serbia is 1 757. Data on the structure units are not obtained in two of the seven institutions of social welfare. In the remaining five institutions dominate multiple rooms (total number of seats in this category is 317), and four-bed rooms (125 seats), while the least of single room (10 seats). Compared to the current number of users, in Institutional Placement for Adults "Kulina", dominates accommodation in shared rooms (73,97%), in Institutional Placement for Disabled Adults, Doljevac dominates accommodation in four-bed rooms (58,13%), and at Institutional Placement for Children and Youth "Duško Radović", Niš 63,15% of users are accommodated in triple rooms.

Table 7 Daily services provided by the institution – Distribution of respondents according to age, gender and the dynamics of the use of services

			ildr 0-17			oun 18-3	_		dult 31-59			lder (60+	-	•	Tota	l
		Male	Female	total	Male	Female	total	Male	Female	total	Male	Female	total	Male	Female	total
Dayraana	С	/	/	/	3	2	5	7	14	21	/	/	/	10	16	26
Day care	P	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Living with	C	1	2	3	5	2	7	1	6	7	/	2	2	7	12	19
support	P	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Assistance at	C	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
home	P	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Accommodation in shelter	C	*1	*	*	*	*	*	*	*	*	*	*	*	*	*	10
	P	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Other	C	/	/	/	6	8	14	27	19	46	15	11	26	48	38	86
Other	P	/	/			/	/	/	/	/	/	/	/	/	/	

Legend: C - constantly, P - periodically

The data about daily services (Table 7), which provides social welfare institutions, are obtained from five institutions. One of the institutions provides two services (day care for 26 out of 552 users), four institutions offer one day service and accommodation for beneficiaries (1 institution) accommodation in a shelter (1 institution gave information that provides this service for 10 users, without specifying age distribution, and gender structure of the user), and the two institutions provide service of living with support (one institution provide this service for 8 of 283 user what is the current number, and the other one for 12 of the 372 user).

From a total of 1 757 users, day care service constantly use 26 users (1,48%), the service "Living with support" constantly use 19 users (1,08%), Assistance at home is not used by the users, Accommodation in shelter constantly use 10 users $(0,57\%)^2$, and other forms of daily services, such as accommodation constantly use 86 users of one institution (4,89%).

Table 8 Number of institutions of social welfare / day care center that provide certain programs to its customers

Type of program	Number of institutions	%
Psychosocial support	16	88,88
cultural and entertainment facilities	16	88,88
Creative workshops	4	22,22
Art workshops	4	22,22
Visits to public events	16	88,88
Excursions	18	100
Summer vacations	2	11,11
Winter vacations	1	5,56
Self-care workshops	17	94,44
Music workshops	1	5,56
Sports competitions	11	61,11
Other	7	38,89
Development of social skills	11	61,11
Rehabilitation and therapeutic activities	11	61,11

All institutions of social welfare (residential and day care) implemented a program of excursions for their users. Self-care workshops are represented in the 17 institutions in our sample, while the 16 institutions implemented programs of psychosocial support, cultural and entertainment facilities, visit public events. Of all the programs, at least are represented music workshops and winter vacations (Table 8).

 $^{2 \}qquad \qquad \text{Institution gave information that provides this service for 10 users, without specifying age distribution, and gender structure of the user.}$

Table 9 Professional workers (special educators) in the day care centers

Name of day care center	Number of special educators
DC Borska	2
DC Barajevo	2
DC Diljska	6
DC Kornelije Stanković	5
DC Šekspirova	2
DC Čukarica	4
DC Obrenovac	4
DC Stari grad	2
DC Voždovac	2
DC Mladenovac	4
DC Lazarevac	4
Total	37

Table 9 shows the number of professional workers – special educator in the day care centers. It is evident that in each of five day care centers two special educators are employed; in each of four day care centers four special educators are employed, and one day care center engaged five and one day care center engaged six special educators.

Table 10 Number, structure and interest of service providers

Work done	structure of the norm	The real number of employees	Profession	Number of institutions in which are registered providers
			Economist	3
			Sociologist	1
ers			Lawyer	1
Managers	9	14	Social worker	1
Ма			Pedagogue	1
			Special educator	1
			Doctor	1
			Social worker	7
			Psychologist	7
irs			Special educator	7
Professional workers			Lawyer	6
<u> w</u>			Speech therapist	2
ona	122	96	Occupational therapist	5
ssic			Work instructor	5
ofe			Coordinator of Education	1
Pr			Educators	1
			Special pedagogue	1
			Sociologist	1

Work done	structure of the norm	The real number of employees	Profession	Number of institutions in which are registered providers	
of e			Caregiver	6	
rs (A cook	2	
Providers of care service	188	300	Support worker in the kitchen	1	
			Doctor physician	2	
10			Physiotherapist	3	
ker			Dentist	1	
NOL	Health workers 871	120	Nurse	6	
th v		128 139	139	Doctor	5
Ieal			X-ray technician	1	
—		•		Laborant	1
			The sanitary technician	1	
			Accountants	2	
			Planner analyst	2	
rs			Administrative and financial technician	3	
rke			Economist	3	
0 M			Contists	2	
tive	28	46	Administrative worker	5	
trat	20	40	Economic Technician	2	
Administrative workers			Lawyer	1	
dmi			Secretary	1	
A			Bookkeeper	1	
			Procurement Officer	2	
			Financial-accounting worker	3	

Work done	structure of the norm	The real number of employees	Profession	Number of institutions in which are registered providers
			Housekeeper	7
			Hairstylist	4
			Driver	6
			Stoker	6
			Worker in the laundry room	7
rs			Storekeeper	4
Technical workers			Tailor	1
W	102	210	Agricultural technician	2
ica	192	218	Food server	4
chn			Doorman	2
Te			Guardian	3
			Master of the maintenance facility	6
			Manual worker	1
			Carpenter	1
			Plumber	1
			Electrician	1

The largest number of actually employed in the seven institutions of social welfare are the providers of care and nutrition (300). Technical workers are numbered at 218, 139 health care workers, and 96 professional workers. The similar structure of employees is demanded by the norm, with the exception of professional workers which are outnumbered. (Table 10).

Executives of institutions are mostly economists by education, while psychologists, special educators and social workers are present in all seven institutions of social welfare as associates. As expected, the most common technical workers are maids, laundry workers, and workers on the facility, while the most common health workers are nurses – technicians. In the field of care and nutrition, the most common are caregivers, as expected.

Table 11 Training and education of service providers

	Managers	Professional workers	Administrative workers	Other
Training programs that are accredited in the social welfare	3	93	/	/
Training programs that are not accredited in the social welfare	/	11	/	/
Seminars, symposia, conferences, etc.	14	30	15	184
Another training program (academic training – specialization, master, etc.)	3	8	8	/

Observed by the actual number of employees, it can be concluded that each manager passed at least one training, and that the associates, on average, passed also one training course.

Table 12 Reasons for accommodation in institutions of social welfare

	Children (0-17)		Young (18-30)		Adults (31-59)		Elderly (60+)			Total					
	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total
User has no close relatives	26	20	46	10	10	20	200	98	298	17	17	34	253	145	398
Families users are not willing to void his or her care	85	52	137	189	121	310	365	315	680	13	9	22	652	497	1149
Inadequate family care	10	5	15	13	11	24	19	14	33	2	2	4	44	32	76
Socio-economic vulnerability of families and beneficiaries	7	6	13	2	2	4	70	53	123	4	4	8	83	65	148
Personal user choice	/	/	/	/	/	/	/	1	1	1	/	1	1	1	2

Information on the structure of the user by reason of accommodation, were obtained for 1 773 users, out of 2 145 users currently in institutional care. Reason for accommodation for 1 149 users (64,81%) was the unwillingness of families to take care of the user. For 398 users (22,45%) the reason is the lack of close relatives, while inadequate family care reasons were registered for 76 (4,29%) users. Socio-economic vulnerability of families and users is the reason for the accommodation for 148 (8,35%) users (Table 12).

DISCUSSION

We analyzed the institutional care and social welfare of people with disabilities in Serbia. The study included a total of 18 institutions of social welfare (seven residential institutions and eleven day care).

The research results show that the capacity of residential facilities ranges from 36 to 500 users. In two of the seven institutions, there were more users in relation to capacity, while in other institutions capacity users filled in the range of 52,78% to 86%. Structure of accommodation units is generally multiple rooms. At the same time, the capacity of day care centers ranges from 21 to 106, while the current number of users is ranging from 16 to 129. We registered a larger number of day care centers (eight) with a small number of users in relation to their total capacity.

In the 18 institutions of social welfare 2 145 people with disabilities are accommodated (for residential housing number is 1 757 (81,91%), the daily treatment 388 (18,09%)). The majority of users are out of their hometown. In a group of users up

to 17 years old, we registered more male children, while in the group of young people and adults the relationship between men and women is approximate. Age distribution of users in social welfare is following: children 11,33%, 30,4% of young people, adults 53,52% and 4,75% of the elderly. We detected different structures of users in residential care and users in day care services. The residential housing structure includes the following users: 9,73% of the children, 28,74% of young people, 55,72% of adults and 5,81% of elderly. At the same time, the day care centers structure includes: 18,56% of the children, 37,89% of young people and 43,56% of adults. The survey showed a large number of users that entered institution early in their life and stayed long in the social welfare system. Although the placement of the child in a social welfare is measure of last resort, applied only after the exhaustion of all other available options, in the structure of social welfare users recorded were 11,33% children, out of which 9,73% were recorded in residential institutions, and 18,56 % in the day care centers. The survey recorded various causes for accommodation of people with disabilities in social welfare institutions. Reason for accommodation in residential social welfare institution for 1149 users (64,81%) was the unwillingness of families to take care of the user. For 398 users (22,45%) the reason is the lack of close relatives, while inadequate family care reasons were found for 76 (4,29%) users. Socio-economic vulnerability of families and users is the reason for the accommodation of 148 (8,35%) users.

The largest number of actually employed in the seven institutions of social welfare are the providers of care and nutrition (300). Technical workers are numbered at 218, 139 health care workers, and 96 professional workers. The similar structure of employed is demanded by the norm, with the exception of professional workers which are significantly outnumbered. The research showed that the staff structure is inadequate; they are insufficiently trained in the use of modern approaches for treatment of people with disabilities because most of them do not gain any knowledge and skills to work with people with disabilities during their education. To achieve adequate quality of services in social welfare institutions, it is necessary to continuously enhance the professional capacity of employees.

CONCLUSION

- 1. Social welfare institutions in Serbia are providing accommodation, food and working-occupational treatment for people with disabilities. They are organized as day care centers and residential institutions. Large number of users as children and adults in the range of 4 to 60 years or more are accommodated in these institutions.
- 2. In social welfare institutions standards and working norms are prescribed by a special law and bylaws and are not compliant with professional standards and the needs of the users. The number of employees and their qualification structure are different from institution to institution, and operating mode of institutions is not uniformed, i.e. based on standardized protocols.
- 3. Services for people with disabilities are still institutionalized with a relatively limited number of community-based services and support services at the local

- level. Part of the capacity of institutions should be directed to the development of new services that would serve to improve the quality of life of people with disabilities.
- 4. The content and quality of services in social welfare institutions does not meet the needs of certain number of users, due to the lack of adequate programs, insufficient training and inadequate qualification structure of service providers. With the existing range and quality of services, people with disabilities in the Republic of Serbia cannot achieve full integration and social participation.

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