SITUATIONAL ANALYSIS
OF THE RIGHTS OF PERSONS
WITH DISABILITIES

SERBIA

COUNTRY REPORT
SITUATIONAL ANALYSIS
OF THE RIGHTS OF PERSONS
WITH DISABILITIES IN
SERBIA

COUNTRY REPORT

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Implemented by FemPlatz, under the contract 40005577 – Conducting a Situational Country Analysis (SITAN) of the Rights of Persons with Disabilities

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This analysis was developed under the inception phase of the UNPRPD project proposal to be implemented by UNCT Serbia. The views contained in this analysis are those of the authors and do not necessarily represent the views of UNCT Serbia and UNPRPD.

Disclaimer

The data and information presented in the report are based on the situational analyses conducted at the country level and were drafted by the UN country teams. Methodology for data collection included a desk review of relevant literature, key informant interviews and focus groups, stakeholder mapping exercises and consultative workshops with key stakeholders. The UNPRPD has not edited the report or verified the findings for accuracy. This report does not necessarily reflect the position of the UNPRPD.
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<tr>
<td>CAT</td>
<td>Convention against Torture and Other Cruel, Inhuman and Degrading Treatment</td>
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<td>CCA</td>
<td>Common Country Analysis</td>
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<td>CCPR</td>
<td>International Covenant on Civil and Political Rights</td>
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<td>CED</td>
<td>Convention on the Protection of All Persons from Enforced Disappearances</td>
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<td>CEDAW</td>
<td>Convention on Elimination of All Forms of Discrimination against Women</td>
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<td>CESCR</td>
<td>International Covenant on Economic, Social and Cultural Rights</td>
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<td>CPT</td>
<td>European Convention for the Prevention of Torture and Inhuman or Degrading Treatment of Punishment</td>
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<td>CRC</td>
<td>Convention on the Rights of the Child</td>
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<td>CRPD</td>
<td>Convention on the Rights of Persons with Disabilities</td>
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<td>CSOs</td>
<td>Civil Society Organizations</td>
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<td>IEP</td>
<td>Individual Education Plan</td>
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<td>ILO</td>
<td>International Labour Organization</td>
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<td>LNOB</td>
<td>Leave No One Behind</td>
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<td>NPM</td>
<td>National Preventive Mechanism on Torture</td>
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<td>OHCHR</td>
<td>Office of the High Commissioner for Human Rights</td>
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<td>OPDs</td>
<td>Organizations of Persons with Disabilities</td>
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<td>PUNOs</td>
<td>Participating UN Organisations</td>
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<td>SDG</td>
<td>Sustainable Development Goals</td>
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<td>SILC</td>
<td>Survey on Income and Living Conditions</td>
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<td>SITAN</td>
<td>Situational Analysis</td>
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<td>UNDP</td>
<td>United Nations Development Programme</td>
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<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<td>UNPRPD</td>
<td>UN Partnership on the Rights of Persons with Disabilities</td>
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<td>UNSDCF</td>
<td>UN Sustainable Development Cooperation Framework</td>
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<td>WGQ</td>
<td>Washington Group Short Set of Disability Questions</td>
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<td>WHO</td>
<td>World Health Organization</td>
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Executive summary

The situational analysis on the position of persons with disabilities in Serbia provides an in-depth examination of the rights and challenges faced by persons with disabilities in the country. The analysis includes stakeholder and coordination analysis and five preconditions for disability inclusion, namely equality and non-discrimination, accessibility, inclusive services, disability-inclusive budgeting, and governance and accountability. The situational analysis also includes the analysis of critical gaps and opportunities and the key recommendations for improving the situation of persons with disabilities in Serbia.

Data Collection Period lasted in the period 10th May to 12th June 2023. Methodology of the Situation Analysis included desk research, focus groups discussion, in-depth interviews and online survey. Desk research focused on reviewing the current national legislation, policies, and procedures pertaining to the rights of persons with disabilities; the analysis of the secondary data from national authorities, international organizations, and civil society in Serbia; the official data on the position of persons with disabilities in the Republic of Serbia and the National development plans associated with the implementation of Sustainable Development Goals (SDGs). Furthermore, the focus group discussions were organized in several cities in Serbia: Novi Sad, Zajecar, Nis, and Belgrade with 42 participants which represented by 10 OPDs, four parents’ associations, five CSOs, and one company focused on the professional rehabilitation of persons with disabilities. In addition, the in-depth individual interviews engaged with key duty-bearers including the Protector of Citizens, representatives of the Ministry for Human and Minority Rights and Social Dialogue, Ministry for Education, Institute for Mental Health, and OPD leaders. Finally, Online Survey collected data from 189 respondents, with a gender split of 66.7% women and 33.3% men. 83.1% of the respondents identified as persons with disabilities. Majority of respondents are in the age group of 31-50. 52.9% reported having higher education and the employment status included 40% employed, 26% unemployed, and 20% retired.

Key findings per section highlighted the key challenges, needs and recommendations.

In the area of the Stakeholder Analysis key institutions mandated for the protection of the rights of persons with disabilities has been analysed. The Serbian Government formed the Council for Persons with Disabilities in 2005 to advise on the status of persons with disabilities, with a key mandate for guiding the national frameworks and targeted actions for the persons with disabilities. The Ministry for Labor, Employment, Veteran, and Social Affairs offers administrative assistance, though the Council’s recommendations often face implementation challenges due to lacking decisive authority. The Council’s meeting reports and recommendations are not sufficiently transparent and cannot be found online, making it difficult to assess the fulfilment of the purpose and activities implemented.

The Ministry for Human and Minority Rights and Social Dialogue handles administrative tasks related to human and minority rights and ensures alignment with international
agreements. However, the Ministry lacks comprehensive inclusion of disability perspectives in national plans and budgets, and intersectionality is insufficiently addressed. Data on disability rights realization is not systematically compiled, thus issues arising during crises such as the COVID-19 pandemic are sometimes missed. Various ministries in Serbia have units dedicated to the rights of persons with disabilities, though their capacities remain limited, with funding relying on projects and donors.

In the area of **Equality and non-discrimination** the Situation Analysis reviewed key national frameworks and legislation. The Law on the Prevention of Discrimination against Persons with Disabilities was adopted in 2006 and forbids direct and indirect discrimination in public access, healthcare, education, and employment. Discrimination is defined as actions violating the equal rights of persons with disabilities, and legal action can be taken upon complaints submitted by individuals or human rights organizations. However, segregation of children with disabilities in special education or the denial of reasonable accommodation are not recognized as discrimination. The 2020-2024 Strategy for Improvement of the Status of Persons With Disabilities aimed to enhance social inclusion, guarantee equal legal capacity and family life, and incorporate a disability perspective in public policy. The strategy included a gender perspective but did not provide gender-focused data or activities tailored for women with disabilities. The 2022 annual report by the Commissioner for Equality Protection revealed widespread discrimination based on disability, with most complaints related to public service access. The Protector of Citizens reviewed 115 cases in 2022 and uncovered 150 rights violations related to employment, service accessibility, and discrimination.

**Accessibility section** reviewed the legislation, tools and practices aimed to ensure full accessibility to the persons with disabilities. Law on Planning and Construction defines standards of accessibility as mandatory technical measures for design, planning, and construction to ensure unhindered movement and access for persons with disabilities, children, and the elderly. The Regulation on Technical Accessibility Standards from 2012 provides technical accessibility standards, but some standards were not sufficiently developed due to lack of public consultation and consultations with relevant stakeholders. Insufficient number of professional staff, architects, and frequent corrections of constructions hinder accessibility in public buildings, according to the Protector of Citizens. The majority of public buildings in Serbia are inaccessible, including branches of the Republic Fund for Pension and Disability Insurance, health institutions, and social protection institutions. Accessibility in public transport is an ongoing issue, with discrimination and unequal treatment of people with disabilities at airports and in public spaces. Law on Prevention of Discrimination against Persons with Disabilities addresses discrimination in transportation, but there are still issues with specialized van transport and audio announcement devices in Belgrade’s public transport.

**Inclusive services** has been a focus of the Situation Analysis influencing the access to basic rights and services for persons with disabilities. Disability assessment in Serbia should focus on a person’s requirements, not just their impairment. Assessment should be individualized and tailored to address specific activities and barriers to inclusion in the community. Six disability assessment systems are currently used in Serbia: work capacity assessment, body impairment assessment, need for assistance and care by
another person, additional education, health and social support, and medical-technical aids assessment. Serbia has a systemic issue with a lack of universal definition of disability across various sectors. Work capacity assessment is a core part of the employment sector’s approach to persons with disabilities, but the categorization system perpetuates inequality. Multi-dimensional assessment systems exist for children, students, and adults in educational settings, but recommendations often lack enforceability and clarity. Rulebook on Medical-technical Aids Provided by Regular Health Insurance is governed by the Republic Fund for Health Insurance and does not align with standards set by the CRPD. The system of social protection still relies on institutional care for persons with disabilities. A Strategy for Deinstitutionalisation and Development of Social Protection Services was introduced in 2022-2026, but the transparency and direct participation from persons with disabilities is still a challenge.

Serbia has done a lot to reduce the over-representation of children with disabilities in residential institutions, but they still face segregation, neglect, and denial of access to education and social protection support services. Women and girls in institutions are exposed to specific forms of gender-based violence, including forced abortions, sterilization, and sexual abuse. There is a pressing need to strengthen the capacities of social work centers and standardize internal processes to promote social inclusion and prevent coercive treatments without explicit consent.

One of the key aspects which prevents full realisation of rights for persons with disabilities lies in insufficient funding available for the strategies and measures aimed to increase. Analysis of disability-inclusive budgeting covers earmarked transfers for social protection, financial allowances for the care of children and adults with disabilities, funds for medical-technical aids, and the Budgetary Fund for Employment of Persons with Disabilities. The Ministry of Labor, Employment, Veteran, and Social Affairs did not efficiently distribute social protection funds and does not have reliable data on eligibility criteria for local self-governments (LSGs). Efficient fund distribution and monitoring could enhance local support services, but there is no comprehensive data on LSGs or analysis on minimum standards for services. The majority of funds were dedicated to LSGs in the second development level, and there are no data on the effectiveness of the invested funds. The budgetary allocations for assistive technologies and mobility aids and devices are inadequate, and a high number of applications were rejected in the period between 2016 and 2020. The funds raised from fines issued for employers who fail to employ persons with disabilities according to the quota scheme should be allocated to the Budgetary Fund for Employment and Professional Rehabilitation of PWDs but the spending from the Fund lacks transparency.

Governance and accountability combines the analysis of the key stakeholders and their ability to govern decisions for the rights of persons with disabilities and their enforcement. The Government of Serbia established the Council for Monitoring the Implementation of UN Human Rights Mechanisms Recommendations in 2014. The Council is coordinated by the Ministry for Human and Minority Rights and Social Dialogue and has 18 high governmental officials appointed by the Government. Civil society organizations and NGOs have signed the Memorandum of Cooperation with the Council, giving them the opportunity to participate in meetings and discuss recommendations for
implementation. Despite challenges in consolidating disability data due to varied classification systems and no standard disability definition, the gathered data offers some insights into the situation of persons with disabilities in Serbia but the inclusive data-gathering systems need to be strengthened. Serbia participated in the sixth cycle of the Multiple Indicator Cluster Survey in 2019, aimed to identify children more likely to experience activity limitations, but the results were limited.

**Disability inclusion in national planning** aims to ensure inclusion of needs of persons with disabilities in development and strategic reforms. Serbia adopted a decree for the National Development Plan, its first sustainable development strategy since 2008. Leave No One Behind (LNOB) principle is upheld, but no OPDs participated in the decree’s consultation. UNCT collaborates with the government to ensure the plan aligns with national SDGs and EU accession processes. Vojvodina’s 2023-2030 Development Plan emphasizes disability in relation to several SDGs. The UN Serbia Common Country Analyses incorporated post-Covid challenges and opportunities, highlighting gaps in Serbia’s legal system and challenges faced by persons with disabilities. Disaster risk reduction legislation in Serbia relies on the principle of equality and protection of human rights and takes disability into consideration.

The Situation Analysis provides key insights and **recommendations** for the advancement of rights and the position of the persons with disabilities and include the following:

- The Government’s Council for Persons with Disabilities as a coordination mechanism under CRPD Article 33 should apply a systemic approach in planning, budgeting and monitoring of the CRPD recommendations, and enhance the visibility and transparency of its operations.

- The functional system of disability focal points has to be established at all levels of the Government to support the implementation of CRPD including disability mainstreaming in line with Article 33 of CRPD.

- The independent national monitoring framework should be established by the Protector of Citizens Office in line with the CRPD Article 33 and the Law on Ombudsman.

- The Government should improve inclusive data collection on persons with disabilities across different administrative systems.

- Disability assessment system need to be reviewed, and a roadmap developed to reform the disability assessment methodologies and procedures across different sectors in line with the human rights approach to disability.

- Anti-discrimination legislation should be amended in line with CRPD Article 5 to recognize a intersectional discrimination and denial of reasonable accommodation as a specific form of disability-based discrimination and operationalised by the justice system and independent human rights institutions (Ombudsman Office and Commissioner for Equality Protection).

- The system should improve the availability and coverage of community-based support services including independent living services by reviewing and revising national and local social protection policies according to identified needs.
Resource allocation systems need to take into the account disability perspective and include OPDs in budgetary planning and monitoring with a view to ensuring transparent CRPD-compliant budgeting.

UN Sustainable Development Cooperation Framework (UNSDCF) and Common Country Analysis (CCA) should take into account the disability perspective.
Background

To develop programs in line with the Convention on the Rights of Persons with Disabilities (CRPD), understanding key gaps and challenges and priorities is vital. The situational analysis (SITAN) assesses disability rights implementation in Serbia, emphasizing pre-conditions for inclusion based on human rights. This includes empowerment and capacity-building for persons with disabilities and their families, supported by representative organizations. Duty bearers also need sufficient resources to meet national and international obligations. SITAN aids in understanding stakeholders, their current capacities, and promoting disability-inclusive development. It guides the design of future UN programs on disability rights in Serbia and highlights obstacles to CRPD implementation.

The Republic of Serbia is ranked as an upper-middle-income country, with a GDP per capita of 9,230.2 USD.¹ According to the 2022 Census on population, household, and dwellings, the population of Serbia is 6,647,003 with 51,4% of women and 48,6% of men.² Serbia continually marks a decrease in the number of populations owing to the negative natural growth and emigration rates³ (-0,9% population growth in 2021).⁴ In 2021, the at-risk-of-poverty rate was 21,2%, and the at-risk-of-poverty or exclusion rate amounted to 28,5%. Young people aged 18 to 24 are at the highest risk of poverty (27,7%), followed by people over 65, while women are at higher risk in each age group.⁵ Administratively, the country is divided into five regions and 160 municipalities (local self-governments)⁶, which are classified according to the level of development into five groups. Out of 160, 47 municipalities are classified as underdeveloped while 43 are extremely underdeveloped.⁷

The census conducted in 2022, as well as the 2011 Census, included the Washington Group Short Set of Disability Questions (WGQ).⁸ The results of the 2022 census data on disability will be published on 1st December 2023.⁹ According to the 2011 results, 571,780 citizens were identified as persons with disabilities, which represents about 8% of the total population.¹⁰ Although women generally represent a higher percentage of the population, this divide is higher among persons with disabilities (58% women, 42%).¹¹

³ Third national report on social inclusion and poverty reduction in the Republic of Serbia, Government of the Republic of Serbia, 2018
⁴ The World Bank data: Serbia
⁶ Excluding local self-governments within the territory of the Autonomous Province of Kosovo and Metohija.
⁷ Regulation on the determining unified list of development of the regions and local self-governments for 2014 (Official gazette of the Republic of Serbia 104/2014)
¹¹ Ibid, p. 23
The average age of people with disabilities is 67 years in comparison to 42.2 average age of the overall population.\textsuperscript{12}

Serbia signed the CRPD on 17 December 2007 without any declarations, reservations, or objections, and the National Parliament ratified the CRPD and the Optional Protocol on 29 May 2009.\textsuperscript{13} The initial report on the implementation of the CRPD was deposited at the UN on 21 June 2014. Several shadow reports from the organizations of persons with disabilities (OPDs) and other civil society organizations were submitted to the Committee, including the submissions of a shadow report by the Mental Disability Rights Initiative of Serbia MDRI-S\textsuperscript{14} and a shadow report of the Coalition of Disabled Persons Organizations.\textsuperscript{15}

Concluding observations by the CRPD Committee on the initial report on the CRPD implementation were received on 21\textsuperscript{st} April 2016 and the Committee issued a total of 32 recommendations to the Republic of Serbia. The independent monitoring report finds that only one recommendation was fully implemented, namely the ratification of the Marrakesh Treaty for enabling access to published works by persons who are blind, visually impaired, or otherwise unable to use printed materials (paragraph 62). All others are either partially implemented, unsatisfactory or not implemented at all (e.g., recommendations from paragraphs 34 to 58).\textsuperscript{16}

Although the submission deadline for the next period report of the Republic of Serbia was initially set on 31 August 2023, there is a significant delay as far as the next reporting cycle is concerned. According to the Tentative Timeline for country reviews published by the CRPD Committee in June 2023, it is expected that the list of issues prior to reporting will only be adopted in 2026.\textsuperscript{17}

\textbf{Approach}

\textbf{Guiding principles}

The Situational country analysis (SITAN) is based on UNPRPD’s 2023 SITAN guidance, emphasizing a rights-based approach per the CRPD. Sustainable change necessitates the

\textsuperscript{12}Ibid, p. 22
\textsuperscript{13}The Law on Ratification of the UNCRPD was published in the Official Gazette of the Republic of Serbia – International Treaties, No 42/2009 on 2 June 2009 and entered into force on the eighth day of its publication.
\textsuperscript{17}Committee on the Rights of Persons with Disabilities, ‘When will the Committee consider my country?’ (2023). Available at: \url{https://bit.ly/CRPD-TentativeTimelineofReviews}
empowerment of persons with disabilities and their representative organisations, and duty-bearers’ accountability and capacity development. The framework examines five preconditions for respecting disability rights. Analysis hinges on the interplay between empowerment opportunities for OPDs as vital stakeholders, and the roles of government and development partners as accountable duty bearers.

Methodology used

Data collection

Data collection on the rights of persons with disabilities and the implementation of the CRPD in Serbia was implemented in several consecutive phases by using different data collection tools and analytical approaches, including desk review, focused group discussions, individual semi-structured in-depth interviews with relevant stakeholders, and online survey for persons with disabilities. Data collection and data analysis were implemented from 10th May to 12th June 2023.

Desk research

Desk research included reviewing, analysing, and drawing conclusions from the main legislation, policies, development programs, international standards, commitments, and recommendations against the analytical framework for SITAN. More precisely, we analysed the following:

- Recommendations of the international human rights bodies and mechanisms (United Nations, Council of Europe, the European Union);
- Status, benefits, challenges, and bottlenecks in the current national legislation, policies and procedures directly related to the rights of persons with disabilities and more specifically the implementation of the rights enshrined in the CRPD;
- Secondary data including relevant and up-to-date research findings, analysis, and impact analysis produced by the national authorities, international organizations, and national civil society in Serbia;
- Official state data about the position of persons with disabilities and the data provided by UN agencies in Serbia;
- Key national development plans and policies associated with the implementation of Sustainable Development Goals (SDGs).

Focus group discussions

In total, four focus groups with 42 participants were held in four cities in Serbia: Novi Sad, Zajecar, Nis and Belgrade. The geographic representation of focus group participants disaggregated by gender is given in Annex 5.

A total of 10 OPDs (six ‘traditional’ and four cross-disability), four parents’ associations, five CSOs working for persons with disabilities and one company for professional rehabilitation of persons with disabilities were represented at the focus group discussions and 27 participants are members or employees of OPDs (heads of the organizations, members of the board, secretaries, coordinators). A Guide for focus group discussions is presented in Annex 1 focusing on opportunities for participation and identification of key areas where human rights violations are happening. The self-identification of the type of impairment by focus group discussants is given in Annex 6.
In-depth individual interviews with relevant stakeholders

Semi-structured in-depth interviews were held with the duty-bearers as key informants on the set of critical issues. The expert team interviewed the Protector of Citizens, Deputy of the Commissioner for Protection of Equality, representative of the Ministry for Human and Minority Rights and Social Dialogue, representatives of the Ministry for Education, Institute for Mental Health and OPD leaders which are members of the Government’s Council for Persons with Disabilities.

The choice of the interlocutors is based on the agreement and consultations with the Participating UN Organisations (PUNOs). A Guide for in-depth semi-structured interviews (Annex 3) was developed and adapted in accordance with the specific mandates and authority of each institution.

Online survey for persons with disabilities

An online questionnaire (Annex 4) was developed for disability activists, representatives of OPDs and CSOs working for persons with disabilities, and persons with disabilities who are not formally in OPDs to highlight their assessment of institutional capacities and the identification of priorities for the following period. The main purpose of this online public survey was to target persons with disabilities in the general population including those from underrepresented groups and is meant as the supplementary data collection tool.

The online questionnaire was filled in by 189 people, with 66,7% of women and 33,3% of men. In total, 83,1% are persons with disabilities and 16,9% are family members of persons with disabilities. The majority of respondents live in urban areas (78,3%). As for the age distribution, the majority of respondents fall in the age categories of 31 to 40 (31,2%), 41 to 50 (30,7%), while every fifth response was from the age group of 18 to 30 (18,5%) and 51 to 65 (17,5%). When it comes to educational status, 52,9% of the respondents reported higher (university) education and 39,7% secondary education.

The majority of survey respondents are employed (40%), followed by 26% unemployed and 20% retired persons with disabilities. The majority of survey respondents assess their economic position as average (64%), bad (22,2%), and very bad (6,9%), while only 7% assess it as above average or very good. In addition, 59,3% of respondents are members or employees of OPDs.

The self-identification of the type of impairment of online survey responders is given in Annex 7.

Scope and limitations

Initially, the plan was to reach at least 100 persons with disabilities to be consulted for SITAN, but the total number reached was 231 (70% women, 30% men), through focus group discussions and an online survey. The majority of participants identified as persons with disabilities, with the majority listing physical impairment that significantly limits one or more basic physical activities such as walking, climbing stairs, or carrying things (43%) and 18% listing developmental disability. Combined data on impairment groups for focus group participants and online survey responders is presented in Annex 8.

The limitation of the online survey is that the results are not representative of the whole population of persons with disabilities in Serbia, because it can reach only those who use a computer/mobile phone, have access to the Internet, and are digitally literate.
To reach persons with disabilities who are usually under-represented, one focus group (in Zajecar) gathered mostly persons with developmental difficulties (seven out of nine participants), while the focused group discussion in Novi Sad gathered only women with disabilities. Another limitation of this study relates to the exclusion of children with disabilities from the survey and focus groups and interviews. This is the gap that calls for additional research that would design and implement age-appropriate methods to elicit children’s views.

Section 1 - Stakeholder and coordination analysis

Governmental bodies
In 2005, the Serbian Government formed the Council for Persons with Disabilities to advise on the status of persons with disabilities.\(^{18}\) Tasked with coordinating state bodies on adopting and implementing disability-related legislation, the Council also monitors international obligations and fosters cooperation with domestic and international organizations.\(^4\) The Ministry for Labor, Employment, Veteran, and Social Affairs offers administrative assistance. Though the Council’s administrative coordination is well-regarded, its recommendations often face implementation challenges. The members, often lower-ranked officials, lack decisive authority within their departments. In 2021, the Council held three sessions and adopted recommendations, which were sent to competent authorities, organizations, and institutions for implementation, but the meeting reports and recommendations of the Council are not transparent and they cannot be found online, which makes it difficult to assess the fulfilment of the purpose and activities implemented.\(^{19}\) The Council neither drafts annual/multi-annual plans nor produces yearly reports, inhibiting effective monitoring and evaluation. Additionally, its conclusions are not integrated into sectoral strategies, isolating disability rights actions from national agendas. Lacking a dedicated budget and influence over sectoral ministries’ budgets, funding for its recommendations remains problematic.

Representatives of the OPDs/members of the Council say that the administrative coordination of the Council meetings is very good, but the main problem is a lack of implementation of the recommendations from the sessions as the majority of members are low-ranked officials lacking the authority for decision-making in their respective ministries.

The Disability Sector of the Ministry of Labour, Employment, Veterans, and Social Affairs is the key executive body for enhancing the status of persons with disabilities in Serbia. Yet, many of its central responsibilities lean towards the medical and charity models of disability, emphasizing rehabilitation, sheltered employment, and residential placement.\(^{iii}\)

\(^{18}\) The decision on the establishment of the Council for persons with disabilities, the Government of Serbia, Official gazette of the Republic of Serbia 51/2021-16.

Representatives of OPDs think that the role of the Sector has significantly changed in the previous years and that it has lost “its facilitation role between the OPDs and relevant ministries and authorities.”

*The Sector does not recognize its significant authority and it practically serves as an administration for public calls for OPDs or they participate in different public events and conferences. They participate only in legislation and policy working groups, which are closely connected to the responsibility of the ministry, but not in other important working groups and issues relevant for persons with disabilities (e.g. in working groups of the Ministry of infrastructure or Ministry of finance). Its role has to be strengthened.* (OPD representative)

The Sector prepares and publishes annual reports on the implementation of the Action plan for the implementation of the Strategy for the Improvement of the Status of Persons with Disabilities by 2024.\(^{20}\) In addition, the Ministry announces annual granting schemes for funding and co-funding programs for the protection and improvement of the rights of persons with disabilities in Serbia.\(^{21}\)

The Ministry lacks comprehensive inclusion of disability perspectives in national plans and budgets. Intersectionality is largely ignored. Although annual reports on the National Disability Strategy are published, OPD participation is inconsistent. Data on disability rights realization is not systematically compiled, neglecting issues arising during crises such as the COVID-19 pandemic. Finally, the report on the use of funds for the employment and professional rehabilitation of persons with disabilities is not publicly available.

Various ministries in Serbia have units dedicated to the rights of persons with disabilities. For instance, the Ministry of Education’s Sector for improving human and minority rights in education\(^ {22}\) focuses on inclusive education and protection against violence and discrimination. However, its capacities remain limited, with funding relying on projects and donors, even as its responsibilities grow.\(^ {23}\) This ministry also oversees the Department for Human and Minority Rights in Education, responsible for inclusive education implementation, monitoring, and development.

The Ministry for Human and Minority Rights and Social Dialogue handles administrative tasks related to human and minority rights and ensures alignment with international agreements. A novel approach of this ministry is the "social dialogue," enabling diverse stakeholders, including civil society, to address pressing social matters. This mechanism has discussed various issues relevant to persons with disabilities, such as inclusive


\(^{21}\) Directive on the functioning, proceeding, and behaviour in the allocation of funds for financing or co-financing programs for the improvement of the rights of persons with disabilities, Ministry of Labor, Employment, Veteran, and Social Affairs, Sector for Protection of Persons with Disabilities, number 110-00-148/2021-15, 19th March 2021


policies for students with disabilities\textsuperscript{24}, mental health and human rights\textsuperscript{25} and a social dialogue on social protection.\textsuperscript{26}

Several other ministries are involved in executing the Action Plan for the Strategy to enhance the position of persons with disabilities from 2020-2024. This includes ministries overseeing health, family care, construction, education, tourism, justice, and finance, among others. The involvement of multiple sectors underscores the need for a comprehensive approach to disability rights. However, evaluating the effectiveness of such a multisectoral collaboration remains challenging due to weak coordination and monitoring mechanisms.

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<th>More than half of online survey respondents (54%) believe that the position of persons with disabilities has not improved in the past ten years.</th>
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<tr>
<td>In addition, 75.2% of online survey responders believe that relevant institutions and authorities do not respond to the needs and rights of persons with disabilities in an adequate way.</td>
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**Parliamentary bodies**

The National Parliament has two key committees: one on Human and Minority Rights and Gender Equality, and another on Labour, Social Affairs, Social Inclusion, and Poverty Reduction. These committees review draft legislation, listen to reports from independent institutions and ministries, and can host public hearings. These hearings aim to gather insights on proposed legislation, clarify provisions, and monitor law implementation.\textsuperscript{27} However, they have seldom held hearings specific to the rights of persons with disabilities. The Committee on Human and Minority Rights and Gender Equality piloted a post-legislative scrutiny process to evaluate the efficacy of existing laws. It has examined laws related to discrimination and employment of persons with disabilities.\textsuperscript{28} In contrast, other committees have not been proactive about disability rights legislation.

**Independent institutions and mechanisms**

The Ombudsman allows complaints for rights violations by governmental entities. They have a deputy and council for persons with disabilities and older people which includes disability experts and activists. In 2018, a report on accessibility was released, and yearly "most accessible cities" calls were announced. Post-2021 changes mandate the Ombudsman as an independent monitoring mechanism for the CRPD in Serbia\textsuperscript{29}, but there are capacity concerns and a need to secure participation from OPD representatives.

\textsuperscript{24} More information available at https://www.minljmpdd.gov.rs/arhiva-vesti-2022.php#a148
\textsuperscript{25} More information available at https://www.minljmpdd.gov.rs/arhiva-vesti-2021.php#a33
\textsuperscript{26} More information available at https://www.minljmpdd.gov.rs/arhiva-vesti-2021.php#a28
\textsuperscript{27} Rules of Procedure of the National Assembly, Art. 83. and 84.
\textsuperscript{29} Article 2, paragraph 2 of the Law, published in the Official Gazette of Gazette, No. 105/2021
once the mechanism is established. Furthermore, they perform the function of the National Preventive Mechanism on Torture, tasked to monitor the residential institutions including those for persons with disabilities.  

The Commissioner for Protection of Equality, established under anti-discrimination law, addresses discrimination complaints, including disability-based ones. Reports on discrimination against persons with disabilities and accessibility of state institutions have been published. Their annual reports also highlight disability issues. However, a review of these institutions' annual reports suggests underutilization of their complaint mechanisms by persons with disabilities and OPDs. While these bodies can suggest legislation changes and offer recommendations, state authorities are not obligated to adopt them, potentially undermining the influence of these institutions. While once collaborating with CSOs in monitoring rights, recent trends show reduced cooperation.

Academia
Serbian universities lack disability studies, impacting disability research and evidence-based policy-making. The prevalent academic focus is on the outdated medical model, particularly at the Faculty for Special Education and Rehabilitation, which influences policy and holds significant professional authority. While some faculties such as the Faculty of Political Sciences and its Social Protection Department partner with UN agencies and suggest innovative approaches, the absence of research addressing disability marginalization hinders the quality of evidence needed for policy-making and CRPD implementation. This academic deficit risks perpetuating outdated views of disability and may produce professionals misaligned with a human rights approach to disability.

Disability movement: Organizations of Persons with Disabilities
The role of the disability movement has a very significant place in the realization of the rights of persons with disabilities. The CRPD Committee Concluding Observations on Serbia includes numerous references and recommendations for the involvement and participation of OPDs.

The first so-called traditional organizations of persons with disabilities were founded in the 1950s and 1960s, and their membership is mostly gathered around the same or similar impairment. Small impairment-based OPDs work at the municipal level, and as a network of organizations, they are gathered in national associations. It is assessed that the fact that these organizations are mainly funded from public funds makes them dependent on political structures and affects their choice of advocacy strategies making them reluctant to engage in public advocacy and media campaigns, or public gatherings

31 In consultative processes such as trainings for professionals about CRPD (par. 8), consultations with representative organizations of women/girls with disabilities (par. 12c), awareness raising (par. 16), accessibility standards (par. 18), legal capacity and supported decision-making (par. 22), deinstitutionalization (par. 26), data collection and statistics (par. 64), SDG monitoring (par. 66), CRPD monitoring (par. 68)
or marches.\textsuperscript{32} Besides traditional organizations, there is a small number of cross-disability organizations of persons with disabilities and CSOs working for the rights of persons with disabilities.

National Organisation of Persons with Disabilities (NOOIS) is the national umbrella organization. It was founded in 2006 and it comprises 14 national OPDs (12 traditional impairment-based associations and two cross-disability). There are three levels of participating membership: 1) full organizational membership and the eligibility criteria are that the national association has at least 500 members\textsuperscript{iv} (except in cases of representing people with rare diseases), has a network of at least five local or regional organisations, work at the whole territory of Serbia, and exist for at least five years; 2) associate membership, with more lenient eligibility criteria, and 3) supporting membership.\textsuperscript{33} The criteria for full organizational membership can be perceived as overwhelming and inaccessible for many OPDs, especially those gathering marginalised groups, which effectively can limit their active involvement and power to influence policy changes. Women are represented by a network of cross-disability organizations of women with disabilities, but persons with intellectual and cognitive impairments are not self-represented but rather through parents’ associations, while persons with psychosocial impairments are not represented at all. Although, the National Disability Strategy 2020 – 2024 includes people with chronic illnesses under the definition of “persons with disabilities”, networks such as the Union of People Living with HIV and AIDS are not part of NOOIS and people living with HIV are not regarded as part of the disability movement.

NOOIS initiated a Youth club, which gathers young people with disabilities aged 18 to 35, who attended the Academy of Youth Leaders with Disabilities.\textsuperscript{34} NOOIS is represented in the various working groups for the legislation and policies about the rights of persons with disabilities. It is a member of the Council for Persons with Disabilities, and it has submitted over 100 advocacy initiatives for changes in the laws. Recently, its influence on policy changes has been limited, but this is an overall situation with the quality participation of the civil society in Serbia.

In October 2019, the CIVICUS Monitor rated civic space in Serbia as obstructed and in 2022, Serbia was put on a ‘watch list.’\textsuperscript{35} In an atmosphere where space for civil society is shrinking and being obstructed, the position of organizations of persons with disabilities might become even more disadvantaged, especially for advocacy programs. A study of the participation of women with disabilities in leadership positions in civil society\textsuperscript{36} showed that there are only 34,5% of women with disabilities in management and executive bodies of OPDs, while the representation of women with disabilities in management positions is below 3%. The overall patriarchal gender norms and stereotypes are visible in this sector as well. The study also showed that in strategic

\begin{itemize}
\item \textsuperscript{32} Keravica, R., Stefanovic, L., 2023, Disabled people’s movement in Serbia: Development, organisation and influence, unpublished manuscript
\item \textsuperscript{33} More about the NOOIS membership is available at https://noois.rs/organizacije-clanice/
\item \textsuperscript{34} More on Youth Club is available at https://ok.noois.rs/
\item \textsuperscript{35} CIVICUS Monitor: tracking civic space available at https://monitor.civicus.org/country/serbia/
\item \textsuperscript{36} Mapping women with disabilities at leadership positions in the organizations of persons with disabilities and women’s organizations in Serbia, Center for independent living of persons with disabilities of Serbia, 2019
\end{itemize}
documents of women’s rights organizations, women with disabilities are recognized as target groups or service users to a higher extent than in the organizations of persons with disabilities.

The research on the Disabled People’s Movement in Serbia\(^\text{37}\) found that people with intellectual impairments are the most excluded from participation in the movement as there are no self-advocacy organisations in Serbia and this group remains represented by their parents. In addition, persons with psychosocial impairment emphasized that they are not considered as ‘disabled people’ which excludes them from the disability movement, and this negatively affects their advocacy support in the disability community, membership in national umbrella organizations, and access to public funding.\(^\text{38}\)

Discussions in SITAN preparation show that organizations operating at the local community level believe that they can influence local policies, but influencing the national policy is very difficult. Some of the reasons listed include insufficient capacities of local organizations, knowledge, skills, and members’ motivation to be involved in advocacy processes.

> My impression is that the official position of the state is to somehow support organizations to get involved in the creation of policies and changes in laws. But the organizations may not be sufficiently empowered or have the capacity to go through the whole process. There is a space to act, and I think we should use it much more in the future, to change things for people with disabilities. (local disability activist and OPD member - focus group participant)

However, as the study on the disability movement in Serbia states “these expectations may result in the exclusion of a number of disabled people from disability advocacy, in particular young disabled people, people with intellectual impairments or other groups which may face structural barriers to accessing such knowledge and skills.”\(^\text{39}\) The quality of involvement of persons with disabilities in policymaking processes depends also on the information system within the local organizations and their national associations, which usually participate in advocacy and policymaking processes. Networking of organizations is most frequently emphasized as a key method for enabling greater and better participation of persons with disabilities.

> We [members] don’t know where the policies are advocated. Where do the association representatives go, who do they talk to, where do things change? (member of the local OPD, focus group participant)

The role of the organization leadership is here recognized as a key element contributing to the active participation of persons with disabilities, but also in adapting the activities and programs to suit the membership needs. Although 40% of online survey respondents believe that OPDs are not representative and that they do not represent the rights and interests of their membership adequately, there is still a divide and a substantial number

\(^{37}\) Keravica, R., Stefanovic, L., 2023, Disabled people’s movement in Serbia: Development, organisation and influence, unpublished manuscript

\(^{38}\) Ibid

\(^{39}\) Keravica, R., Stefanovic, L., 2023, Disabled people’s movement in Serbia: Development, organisation and influence, unpublished manuscript
of those who believe in OPDs representation. More importantly, almost a third of respondents do not know how to answer this question.

Traditional associations tend to be closed, and the communication between leaders and members is challenging and additional obstacles include the slow pace of management and operational changes in the structure of the organization, but also transgenerational management and leadership change.

Senior managers, who have been leaders for a long time, do not have the confidence to leave certain tasks to younger people and think that changes will lead to collapsing of the organization. On the other hand, young people have no experience, knowledge, nor a place and chance to learn. So, democratic decision-making is questionable. (local disability activist, focus group participant)

Democratic governance in OPDs also depends on individual leaders of the organization and it is recognized that sometimes the organization is equivalent to its president. Opinions of online survey responders are divided about democracy, participation, and equality in decision-making in OPDs - 37% believe that OPDs are democratic, 31% disagree, and there is an equal number of those who are uncertain.

Other reasons for lower participation are structural and institutional barriers, including lack of personal assistance services for everyone who needs it, many problems with accessible or available transportation and general accessibility, and the prevalent stereotypes and prejudices, as persons with disabilities are not recognized by institutions as agents of change, but rather as beneficiaries.

Persons with disabilities, parents, and leaders of OPDs, who participated in the research, agreed that it is very difficult for them to exercise their rights, while the changes in laws and public policies have almost no effect. In all discussions, they expressed:

- disappointment because disability rights are not respected and fulfilled,
- a feeling of invisibility,
- lack of trust in state institutions to adequately fulfil the rights of persons with disabilities.

International cooperation (UN agencies and donors)

Inclusion is a core UN principle, integral to its mission of promoting peace, human rights, and sustainable development by extending progress to all individuals and marginalized communities. In Serbia, the UN Country Team (UNCT) is instrumental in promoting inclusion and equality for persons with disabilities. This involves 20 UN agencies, funds, and programs working towards the objectives of the UN Sustainable Development Cooperation Framework for 2021-2025. The Cooperation Framework serves as a roadmap for advancing sustainable development in Serbia and aligning efforts with the global Sustainable Development Goals (SDGs) by 2030, including addressing the challenges posed by the COVID-19 pandemic.

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The Cooperation Framework focuses on three core priorities:

1. **Green and Inclusive Economy**: maximizing sustainable growth, fostering green transformation and addressing climate change;
2. **Well-being, Social Equity and Human Potential**: centering well-being, human potential, and inclusivity in all policies and practices;
3. **Rule of Law and Rights**: building trust and accountability through the rule of law, with a focus on rights and duties.

The Cooperation Framework embodies an inclusive approach, aligning with the UN’s commitment to vulnerable groups, including persons with disabilities. Governance mechanisms include the UNCT Human Rights and Leave No One Behind Thematic Group (HR-LNOB), which coordinates UN agencies’ engagement and promotes the LNOB principle. This group offers recommendations on disability and inclusion, conducts capacity-building sessions, and guides the use of inclusive language. Moreover, disability inclusion is a recurring topic in UNCT Serbia’s Results Groups, tied to the Cooperation Framework’s priorities, and in the Gender Thematic Group, focusing on women and girls with disabilities. These platforms generate UNCT knowledge products and advocacy messages, including those addressing inclusive education and the status of women and girls with disabilities in Serbia.

In 2022, the UNCT adopted a UNDIS Action Plan, in line with the UNDIS Scorecard, to monitor progress in the inclusion of persons with disabilities. Persons with disabilities are actively involved in UN initiatives, including the UNCT Youth Advisory Group, which was established in 2022 and includes a member with a disability. The UN Human Rights Adviser serves as the UNCT Focal Point on Disability. Based on the global exercise conducted by the UN Development Coordination Office, the UNCT Serbia exceeds the accessibility standards of the UN Secretariat. However, the UN is still taking steps to improve accessibility, both in physical premises and digital platforms. While most UN offices are accessible, there is room for improvement in making the website accessible to people with visual impairments. Finally, the UN’s work on disability is reflected in the UNCT Serbia Annual Results Report and the biannual Gender Briefs.

The UN agencies largely support disability inclusion and equality programmes within their agency-specific interventions. Examples include:

- **UN Women** supported the Leadership Academy for Women with Disabilities, which empowered women with disabilities to take on leadership roles. Discrimination testing initiatives have also been carried out by UN Women to expose hidden discrimination against marginalised women.

- **UNFPA** focuses on the sexual and reproductive rights of women with disabilities, including capacity building for health professionals.

- **OHCHR** implements projects to mainstream human rights into health, social and protection services for the benefit of vulnerable groups, including persons with disabilities.

- **UNICEF** implements projects to mainstream human rights into health, social and protection services for the benefit of vulnerable groups, including persons with disabilities.
- UNDP focuses on improving the position of persons with disabilities and supporting their equal participation in the digitalisation process, including their access to education and the labour market.

When it comes to joint UN interventions, the following two are of significant importance:

- **The joint project “Autonomy, Voice, and Participation of Persons with Disabilities in Serbia”** addressed issues such as legal equality, the rights of women and girls with disabilities, and the right to work to support the Government of Serbia in implementing the recommendations of the CRPD committee.

- **The joint project “Integrated Response to Violence Against Women and Girls in Serbia”** supports women with disabilities facing violence, including research on barriers they encounter and support for multi-sectoral groups to be more responsive to the needs of women with disabilities.

Disability inclusion is also a focus of other development partners working in Serbia. The European Union has provided substantial support to Serbia, totalling over EUR 3 billion since 2001, primarily through IPA II and an agreed EUR 14.2 billion for 2021-2027 through IPA III. IPA III programming framework emphasizes safeguarding the rights of persons with disabilities in line with the UN CRPD and addresses discrimination challenges. It also focuses on improving healthcare and social protection systems to enhance social cohesion and inclusivity for vulnerable groups, including Roma communities, persons with disabilities, and LGBTI persons. Additionally, IPA III prioritizes improving employment opportunities for women, young people, and persons with disabilities.

In terms of project initiatives, several EU-funded projects over the past decade have contributed to deinstitutionalisation, community-based services and family support, while USAID has continued to support the economic empowerment and political participation of people with disabilities.

However, securing funding from international donors remains a challenge for disability organisations due to administrative complexities. The role of the UN system in such an environment is unique, from ensuring that the principles of inclusiveness and leaving no one behind are upheld in the development efforts of major donors, to building the capacity of OPDs to identify and respond to the needs of people with disabilities.

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41 More about the program available at [https://unprpd.org/programme/serbia](https://unprpd.org/programme/serbia)
42 Implemented by OHCHR, UNFPA, UNDP and ILO
43 Implemented by UNDP, UN Women, UNFPA and UNICEF
Summary of the key gaps and challenges

The analysis of the relevant stakeholders shows significant challenges and barriers in the fulfilment of the rights of persons with disabilities in terms of capacities, authority, and responsibility. The Council for Persons with Disabilities, as a coordination mechanism established under Article 33 of the CRPD, lacks the authority to implement the recommendations at the policy and state levels.

Most of the governmental ministries apart from the Ministry of Labour, Employment, Veteran and Social Affairs do not have budgets allocated for disability programming and monitoring mechanisms such as disability focal points to track compliance with CRPD norms and standards within their jurisdiction.

The Protector of Citizens – Ombudsman is authorized as a national monitoring mechanism for CRPD implementation, but the mechanisms have not been set up yet. The latest 2022 annual report of the Ombudsman does not contain specific findings about the implementation of the Convention, while there is a need to employ more staff members. The parliamentary committees are not strengthened for the full understanding of the rights of persons with disabilities and they rarely use their oversight and control role.

Complaint mechanisms of independent human rights and equality institutions are insufficiently used by persons with disabilities and their representative organizations, and when they are, equality institutions do not apply CRPD norms and standards directly and consistently which is an indicator of a lack of capacity in terms of knowledge of international human rights law. Their recommendations and legislation proposals are not always adopted. There are no disability studies at Serbian universities and faculties are either operating at a medical model of disability or are sporadically active on a project-based principle which leads to a paucity of scientific research on disability from the perspective of the social model of disability.

The disability movement is not fully representative, while the democratic structures in the organizations are assessed as weak. Project-based funding for OPDs including those at the national level compromises their sustainability and ability to attract and retain human resources. OPDs and persons with disabilities claim they lack the capacity to advocate for their rights successfully and adequately, to be represented in the working groups for the changes of the legislation and policies. On the other hand, key barriers such as prejudices, lack of services, and inaccessible transport effectively prevent them from participating. Marginalised groups of persons with disabilities are under-represented and persons with psychosocial impairments or chronic illnesses are not perceived as part of the disability movement. Organising and mobilizing around impairment rather than social model and human rights of persons with disabilities compromises cohesion and solidarity within the disability movement ultimately leading to the exclusion of marginalized groups of persons with disabilities from the movement.
Section 2 - Equality and non-discrimination

The Constitution of Serbia's Article 21 prohibits discrimination, ensuring everyone is equal before the law. It forbids discrimination on various grounds, including “mental” or “physical disability”.

In 2006 Serbia adopted the Law on the Prevention of Discrimination against Persons with Disabilities, influenced by the UN Standard Rules on the Equalization of Opportunities for Persons with Disabilities and the CRPD draft. This law forbids direct and indirect discrimination in areas like public access, healthcare, education, and employment. Amendments from 2016 added provisions for persons with disabilities using engraved signature seals. However, it does not recognize the segregation of children with disabilities in special education or the denial of reasonable accommodation as discrimination.

The Law on the Prohibition of Discrimination defines discrimination as actions violating the equal rights of persons with disabilities. Legal action can be taken by the Commissioner for Equality Protection upon the complaint submitted by individuals or human rights organizations. It introduced a mechanism to ascertain discrimination and shifts the burden of proof. Amendments from 2021 introduced special measures to promote equality but did not adopt proposals by OPDs to recognize the denial of reasonable accommodation as disability-based discrimination, as recommended by the CRPD Committee.

In the first Strategy for the Prevention and Protection against Discrimination 2013-2018, persons with disabilities were recognised as one out of nine vulnerable groups, while the second Strategy for the period 2022-2027 also recognises persons with disabilities as one of the groups at risk of discrimination and defines activities for including a disability perspective into legislation. While achieving successes, challenges persisted such as the need for an institutional framework for a multisectoral approach, appropriate budgeting, increased awareness, ensuring equality, and removing barriers hindering the rights of persons with disabilities.

The 2020-2024 Strategy for Improvement of the Status of Persons with Disabilities in the Republic of Serbia contained three goals: 1) Enhance the social inclusion of persons with disabilities; 2) Guarantee rights like legal capacity and family life equally, with

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47 Articles 32–38
48 Official Gazette of the Republic of Serbia, No. 22/2009 and 52/21
49 Article 26 - Discrimination of persons with disabilities
50 Article 14 of the Law on the Prohibition of Discrimination
52 Concluding observations on the initial report of Serbia, Committee on the Rights of Persons with Disabilities, CRPD/C/SRB/CO/1, 23rd May 2016, para. 10
53 Seven areas for policy interventions relevant to the equality of persons with disabilities were defined: labour, employment and vocational training; personal status and family life; abuse and neglect; education; social and health care services; the use of public spaces; promotion of participation in political and public life and access to justice.
54 Official Gazette of the Republic of Serbia, No. 44/2020
protection from discrimination, violence, and abuse; 3) Systematically incorporate a disability perspective in public policy formulation and monitoring.

This strategy, importantly, included a gender perspective, acknowledging the unique challenges faced by women with disabilities. It emphasized protecting women and girls with disabilities from violence and collecting gender-specific data.\(^{55}\) However, reports on the strategy’s first action plan failed to provide gender-focused data or activities tailored for women with disabilities.\(^{56}\)

The 2022 annual report by the Commissioner for Equality Protection underscores that persons with disabilities are among the most marginalized in Serbian society due to restricted access to rights, prevalent stereotypes, and their socio-economic status, exposing them to substantial discrimination.\(^{57}\) The Commissioner received 117 complaints of discrimination based on disability in 2022, with the majority (60%) relating to public service access.\(^{58}\) Half of these complaints originated from civil society organizations, indicating a need to empower persons with disabilities to use this mechanism more effectively.\(^{59}\) Key concerns include limited employment opportunities for persons with disabilities, especially in the public sector, challenges in achieving inclusive education, unequal access to higher education, and disparities in social protection services. These disparities often arise from regional variations in local governance and service providers.

The Protector of Citizens reviewed 115 cases about the rights of persons with disabilities in 2022, uncovering 150 rights violations.\(^{60}\) Most were related to employment, service accessibility, and discrimination based on disability.

A significant impediment to equality for persons with disabilities is the outdated legislation around the denial of legal capacity based on disability. Alarming, a guardian can institutionalize an individual without their consent. In 2022, 82.5% of persons with disabilities in institutions were under guardianship\(^ {61}\), though the number with intact legal capacity in such institutions has decreased by 13% in a decade.\(^ {62}\) More on access to justice and deinstitutionalization can be found in Section 4.

Regarding children with disabilities, according to the module on child functioning applied for the first time in Serbia in 2019 as part of the MICS6 study, rights such as education and healthcare are not universally accessible in Serbia. Children with functional difficulties, particularly those from Roma settlements, face increased risks, including exposure to violence, educational exclusion, and living in poverty. The data emphasizes

\(^{57}\) Regular annual report of the Commissioner for protection of equality for 2022
\(^{58}\) Ibid, p. 178
\(^{59}\) Ibid, p.179
\(^{60}\) 2022 Regular Annual Report of the Protector of Citizens, March 2023, p. 51-54
\(^{61}\) Republic Institute for Social Protection. Report on the work of the social protection institutions (residential institutions) for adults with mental, intellectual, physical, and sensory impairments, 2023. p. 15,
\(^{62}\) Ibid
the urgent need for early intervention services, with a focus on the diverse identities of marginalized children and families.

Summary of key gaps and challenges

Denial of reasonable accommodation as disability-related discrimination has not yet been adopted. The first action plan to the Strategy for the Improvement of the Status of Persons with Disabilities has expired and the report on its implementation does not provide any data on achieved progress in set indicators (target values), there are no gender-disaggregated data, information about the spending of the allocated funds are missing, while the descriptions of the activity progress are too general without elaborated reasons for the delay in the implementation.

Legislation allowing full and partial deprivation of legal capacity on the grounds of disability has not been changed. There are no legislative or institutional arrangements for supported decision-making in Serbia and the line ministry has not implemented training programs for professionals about supported decision-making as defined by the Action Plan to the Strategy.

Persons with intellectual and cognitive impairments are at the highest risk of institutionalization and legal capacity deprivation. They are at high risk of all forms of violence and discrimination, while women with disabilities with the experience of institutionalization are at risk of multiple and intersectional discrimination, including gender-based violence, such as physical, psychological and sexual violence, as well as specific types of disability-related violence such as forced abortion and forced administration of contraceptives, as most flagrant forms of discrimination.

OPDs and persons with disabilities and their representative organizations do not sufficiently use complaint mechanisms of the independent human rights and equality institutions and the overall number of complaints on the grounds of disability is small. The Commissioner for Protection of Equality in their decisions on discrimination complaints does not apply directly norms enshrined in the CRPD as they relate to denial of reasonable accommodation.

Section 3 – Accessibility

The Law on Planning and Construction defines standards of accessibility as “mandatory technical measures, standards and conditions of design, planning and construction which ensure unhindered movement and access for persons with disabilities, children and the elderly.” The law also prescribes penalties for the investor and the responsible person if buildings do not have access for persons with disability in compliance with accessibility standards. The Regulation on Technical Accessibility Standards from 2012 provides the technical accessibility standards to ensure the unhindered movement of children, the

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elderly, people with walking impairments and persons with disabilities, developed urban-technical requirements for the planning of public space, traffic and pedestrian areas, access to buildings (residential, public, etc.), as well as special devices in them. However, the regulation was created and adopted without public discussion, consultations with organisations of persons with disabilities or other relevant stakeholders, so some standards were under-developed, such as improving accessibility of existing (already built) facilities. Following the opinion of the Ombudsman, the new Regulation on Technical Accessibility Standards was adopted\textsuperscript{64} in which some of the previous omissions were corrected.

Although there is a solid legislative and policy framework in this area, the practice shows that defined standards are not implemented and the key problems are primarily related to the lack of professional staff who could supervise the adaptations and constructions of new buildings, insufficient number of architects who are familiar with the standards of universal design, frequent corrections of constructions that hinder accessibility.\textsuperscript{65} The Ombudsman found that the majority of observed public buildings (104) were inaccessible, including branches of the Republic Fund for Pension and Disability Insurance, health institutions, social protection institutions, educational institutions, police stations, administrative bodies or the judiciary.\textsuperscript{66} Data on the architectural accessibility of centres for social work show that in 2018 only 42\% of centers for social work had fixed or mobile ramps, 70\% had an accessible ground floor, and almost all had a lift (if it is a multi-storey building), 57\% had an accessible toilet.\textsuperscript{67}

Besides access to health services and employment, the responders to the online survey for persons with disabilities listed ‘mobility and movement’ as the third most important violated right (45\% of responses).

\begin{quote}
Most cultural institutions are inaccessible. Theatres, museums, cinema - only in the front row? Specialized public van transport does not have enough vehicles, drivers, "priorities" are determined (OPD representative).
\end{quote}

\textbf{Transport accessibility}

The Law on the Prevention of Discrimination against Persons with Disabilities addresses discrimination against persons with disabilities in transportation, including refusal to board or assist, and unfavourable conditions.\textsuperscript{68} However, accessibility in public transport is an ongoing issue, due to ambiguous regulations about facilities for persons using wheelchairs. In Belgrade, there's limited specialized van transport for persons with disabilities. Passengers with disabilities are not able to use regular transport as others do, often needing to book these specialized vans

\textsuperscript{64} Official Gazette of the Republic of Serbia, No. 22/2015
\textsuperscript{66} Special Report of the Protector of Citizens – ”Accessibility for All” 2018
\textsuperscript{68} Article 27 - Discrimination in relation to transport
days ahead. Many drivers show discriminatory behaviour, neglecting to assist or deploy bus ramps. Even with accessible vehicles, many stops remain inaccessible.  

*With audio announcement devices removed from public transport vehicles in Belgrade, I have no idea which bus I’m getting on, at which stop the bus is currently stopping. It is especially inconvenient when I go to an unknown location, and I have to manage on my own.* (Online survey responder)

The legislation contains provisions for the accessibility of railway and bus stations, bus stops and airports, as well as public spaces. The Law on Air Traffic contains provisions that regulate the general obligation of airports for accessibility of ground services, such as assistance to passengers with disabilities. In practice, there are examples of discrimination, and unequal or humiliating treatment of persons with disabilities at the airport or in the air traffic, which usually stem from the prejudices and lack of knowledge of the airport staff.

Air company and airport ground staff showed humiliating and insulting behaviour towards an 11-year-old boy with autism and his family because they denied boarding the flight for the boy because he was upset and crying as this was a new situation for him. They sent the boy and the family to the airport ambulance, the doctor inquired whether he had used the sedatives, and after the parents denied it, the doctor issued a confirmation that the boy should not board the plane. The company claimed that this was the internal procedure (*assessing guest fitness to travel*) and the family did not board the plane.

Guide dogs are recognized as companions/assistants according to the Law on Movement with the Help of a Guide Dog, which regulates the right of persons with disabilities to move with the help of a guide dog on all means of public transport, facilities, and buildings for public use, and at the workplace. However, there are no trained and licensed guide dogs in Serbia currently, and there are no instructors, or training range for guide dogs.

**Information and communication accessibility**

Serbia has various laws emphasizing accessibility to information and communication. These laws cover universal electronic services, website accessibility for public authorities, and obligations for state institutions to annually disclose information, ensuring inclusivity for persons with disabilities.

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71 Opinion of the Commissioner for Protection of Equality, available at [Mišljenje na Pritužbu Č.A. protiv AD A.N.T.B. ADVS A.S. d.o.o. ASGS zbog diskriminacije na osnovu zdravstvenog stanja prilikom pružanja javnih usluga • Poverenik za zaštitu ravnopravnosti](https://www.povecenik.rs/)

72 Official Gazette of the Republic of Serbia, No. 29/2015

Development Programme insists on the design-phase inclusivity of electronic services to be safe and non-discriminatory.

A report by the Ombudsman indicated a focus on architectural accessibility, sidelong informational barriers. Of 104 examined public institutions, only four had assistive hearing systems and two employed sign language interpreters. Features like tactile tables, alarms with sound and visual cues, Braille brochures, and tactile paths are mostly overlooked.

Currently, no regulations address cognitive accessibility. The Council for Persons with Disabilities has recommended introducing cognitive accessibility legislation, emphasizing easy-to-read digital content. Only some OPDs and CSOs have developed easy-to-read materials. Laws, including the Law on Electronic Media and the Law on Public Information and Media, mandate improved media accessibility for persons with disabilities. The national broadcaster, Serbian Radio and Television Broadcasting (RTS) has broadened its accessible content. The TV show "Place for Us" which has been running for 12 years now, discusses disability issues and offers sign language interpretation. Daily news includes a 10-minute sign language segment. Since 2011, RTS, partnering with the Association 'Homer' and the Official Gazette, broadcasts movies adapted for the visually impaired.

The Digital Skills Development Strategy (2020-2024) aims to enhance digital literacy for all, especially vulnerable groups. Its 2023-2024 Action Plan, includes one significant activity for persons with disabilities: a training model for digital skills set for 2024, which requires monitoring.

Official recognition of sign language

In April 2015, Serbia adopted the Law on the Use of Sign Language to promote equal opportunities and accessibility for the deaf. It's the first law of its kind, yet the impact analysis of its implementation showed that the alignment with the CRPD provisions is only partial. The law grants access to learning sign language and using interpreter services, enhancing the deaf community's position. However, it overlooks two crucial rights: communication in and education through sign language. The law doesn't formally acknowledge Serbian sign language or deaf culture. This absence negates the state's active role in promoting and teaching the language, especially to parents and deaf students. OPDs highlight the importance of standardizing Serbian sign language due to its inconsistent use. The law also fails to recognize deaf-blind individuals, denying them specialized support.

75 Look at easy-to-read publications produced by Mental Disability Rights Initiative of Serbia MDRI-S at https://mdri-s.org/e-biblioteka/kategorija/publikacije-lake-za-citanje-easy-to-read
80 Official Gazette of the Republic of Serbia, No. 29/2015
The sign language interpreter profession is now classified with translators and linguists, but there's been no progress in formal education or training for these interpreters. The right to a sign language interpreter, as per the law, depends on public funds allocated by the Ministry of Labour, Employment, Veterans, and Social Affairs to the National Deaf Association. Some local administrations proactively hire interpreters, a commendable institutional practice.

### Summary of key gaps and challenges

This area shows a substantial divide between the legal provisions and practical arrangements to ensure all forms of accessibility. Serbia has still not prepared a comprehensive operational plan for accessibility and removing barriers for persons with disabilities although it was a planned activity in the 2021-2022 Action Plan for the Strategy for the Improvement of the Status of Persons with Disabilities. Key challenges include a lack of efficient sanctions for non-compliance with accessibility standards, a lack of expertise and professional staff to monitor and supervise the fulfillment of the accessibility standards and the overall lack of professional knowledge about universal design.

The funds allocated to OPDs and other stakeholders to ensure accessibility are insufficient to respond to the needs and requirements and they show more of an ad-hoc approach than a systematic approach to ensuring accessibility. Providing informational and communication accessibility is less developed or understood by the state authorities and the focus is placed more on architectural accessibility. There are no legislative or official practical arrangements for cognitive accessibility. The Law on the Use of Sign Language does not explicitly recognize Serbian sign language and the culture of deaf people, while it leaves out deaf-blind people, because it does not recognize different interpretation services needed for this group of people.

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Section 4 – Inclusive services

Disability referral & assessment systems

Clarification on the disability assessment purpose is given in the CRPD General Comment 5. In summary, the assessment has to:

- focus on the requirements of a person and not on his/her impairment;
- be individualized and tailored to address specific activities and barriers a person is facing to be included in the community;
- be multidisciplinary and acknowledge the ongoing changes in living circumstances as the support varies over time;
- ensure the full involvement of persons with disabilities in the decision-making process;
- follow a person’s will and preferences.

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82 Paragraphs 61 and 63
There are at least six disability assessment systems and procedures currently used in Serbia: 1) Work capacity assessment, 2) Body impairment assessment, 3) Need for assistance and care by another person, 4) Additional education, health and social support, 5) Assessment of the needed level of support in social protection services, 6) Assessment of the need for medical-technical aids.

Serbia currently grapples with a systemic issue when it comes to persons with disabilities: there isn’t a universal definition of a child with a disability. This lack of clarity and consistency stretches across various sectors, from health to education to social protection. The result is a complicated, intertwined web of processes and pathways for both adults and children with disabilities to access needed support services.

At the core of the employment sector's approach to persons with disabilities is the work capacity assessment. Defined by a by-law, this assessment gauges the individual's ability to work and identifies necessary workplace accommodations. Entrusted to the National Employment Agency, the process might seem well-intentioned at first. However, a concerning aspect emerges in the categorization. The "3rd degree" within the classification system denotes individuals who face significant barriers in employment in the open market. Instead, they're directed towards sheltered environments known as "working centres." Herein lies the issue: such a system inherently perpetuates inequality. By isolating certain individuals based on their productivity, the system casts them as subjects in need of therapy, rather than as potential contributors to the workforce.

The Republic Pension and Disability Fund takes charge of the critical task of determining an individual’s disability status, which subsequently dictates their access to pension and insurance benefits. For the Body impairment assessment needed for cash benefits and various forms of discounts (e.g. utility bills, public transport tickets, tax relief for car imports, etc.), the assessors are using a Barema method referring to the percentage of impairment or scale. The decision maker in the process is the local branch of the Republic Pension and Disability Fund and the appeal is possible to the Direction of the Republic Pension and Disability Fund. Parallelly, there’s another assessment system – "Need for Assistance and Care by another person." Designed to grant a disability benefit, it uses predominantly medical criteria. However, the system’s primary challenge is its operational methodology: decisions often hinge on brief interactions and an over-reliance on medical documentation, which might not always paint a holistic picture of the individual’s condition.

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83 Rulebook on methods, costs, and criteria for work capacity assessment and possibility of employment of maintaining employment for persons with disabilities, Official gazette of the Republic of Serbia, no. 36/2010 and 97/2013.
85 Rulebook on methods, costs, and criteria for work capacity assessment and possibility of employment of maintaining employment for persons with disabilities, Official gazette of the Republic of Serbia, no. 36/2010 and 97/2013
86 In accordance with the Rulebook on determining bodily impairment, Official gazette of the Republic of Serbia number 105/03 and 120/08
87 Ibid, Article 22
A more multi-dimensional assessment exists, aimed at evaluating the support needs of children, students, and adults in educational settings.\textsuperscript{88} Although it touts a multi-sectoral approach, it comes with its own set of challenges. The recommendations, while comprehensive, often lack enforceability. There is also a lingering ambiguity about the standing of intersectoral committees in local governance structures, adding to a lack of clarity on the position and role of these committees.

Medical-technical aids or assistive technologies, crucial for enhancing the quality of life of persons with disabilities, are governed by the Rulebook on Medical-technical Aids Provided by Regular Health Insurance.\textsuperscript{89} Administered by the Republic Fund for Health Insurance, this Rulebook unfortunately does not align seamlessly with the standards set by the CRPD. There’s a glaring lack of transparency regarding aid quality and standards. Namely, the assessment is based on the International Classification of Disease (ICD) and not the International Classification of Functioning, Disability and Health (ICF). The Rulebook is accompanied by the list of medical-technical aids prescribed for specific types of impairments/diagnosis, which takes away the possibility of individualized assessments aimed to ensure the greatest possible independence for persons with disabilities in line with CRPD Article 20. Furthermore, the decision-making power often rests with the committees of assessors comprised of medical professionals, whose decisions can sometimes negate the recommendations of personal medical consultants.

At the heart of Serbia’s challenges in addressing the rights and needs of persons with disabilities is a systemic shortcoming: there’s no unified, CRPD-compliant assessment system. Such a unified approach would prioritize individual rights, focusing on specific support needs over broad medical classifications. Currently, the predominant perspective views persons with disabilities more as beneficiaries than as rights-holders. This is evident in the language and terms used in laws and regulations, which emphasize degrees of impairment rather than nuanced, individual support needs.

In summary, while Serbia has various systems in place to support persons with disabilities, many of these are misaligned with international standards. A shift towards a more integrated, rights-based approach is essential for truly championing the cause of persons with disabilities in the country.

**Disability support services (targeted efforts)**

The Law on Social Protection\textsuperscript{90} regulates the provision of social services. In Serbia, social services targeted to persons with disabilities are divided into daily community services (day-care centre, home assistance, child’s personal companion), placement/residential (respite care, residential institutions), and independent living services (personal assistance to adults with disabilities and supported housing).

The licencing process of service providers started in 2013, and in 2021 there were 297 licensed social protection service providers in Serbia (all services, not only for persons

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\textsuperscript{88} The responsible authorities include the Ministry of Education, Ministry of Health, Ministry for Social Protection and Ministry of Public Administration and Local Self-government.

\textsuperscript{89} Official Gazette of the Republic of Serbia, no. 5/2020, 42/2020, 133/2020, 18/2022, 36/2022, 127/2022 and 3/2023

\textsuperscript{90} Official Gazette of the Republic of Serbia, No. 24/2011
with disabilities).

Licensing is a procedure for verifying the fulfilment of criteria and standards for the provision of services and the precondition for a uniform minimum quality of service in the social protection system. Although there has been a constant increase in the number of licensed local service providers from 2016 to 2021, the number of active service providers is decreasing (95.5% active in 2016, but 81.1% in 2021) which demonstrates the precarious position of service providers in terms of insecure funding from public authorities.

**Daily community services**

**Home assistance service** is the most accessible and available in Serbia in comparison to other community social protection services. Its purpose is to support people in meeting daily life needs in order to improve or maintain quality of life (maintenance of personal hygiene, care, maintenance of apartment hygiene, and assistance for satisfying existential and other needs) and although it is not specifically designed for persons with disabilities, data shows that 90% of service users were older people over 65 and two-thirds of service users have some type of impairment. This service is available in 129 municipalities (88% coverage of municipalities).

**Child's personal companion** service is the fastest growing social protection service in Serbia in the previous years and it is available to a child with disabilities, who needs support in meeting everyday basic needs in the area of movement and mobility, personal hygiene, feeding, dressing, and communicating with others, provided that a child attends a school. The service is available until a child graduates from school. It is available in 95 municipalities (65% coverage) but the overall number of service users is still very small (2,760 children, 68% boys). The number of users of the personal companion service increased to 1,841 (625 users more at the end of 2020 compared to 2019), and the number of licensed providers of the personal companion service increased to 1,741 (530 more personal companions at the end of 2020 compared to 2019).

Similarly, the number of municipalities providing **daycare services** to children and adults with disabilities has been significantly growing since 2016, while the number of service users has increased by 174.2%. It is available in 51 municipalities (35% coverage), while 1,593 persons with disabilities are using it and adults are over-represented (60.9%). The key problem with day-care centres is that they tend to be segregated even if they are in the community, with a high number of service users and heterogeneity (children, young people, and adults with disabilities lumped together), and the quality of the support is not balanced. Day-care centres should serve as an additional or complementary service to education, employment, or other engagement, and not as the only community service provided to children/adults and their families or replacement for education.

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91 2021 Report on licensed social protection service providers at the local level, Republic Institute for Social Protection, 2022
92 Rulebook on conditions and standards for the provision of social protection services, "Official Gazette of the Republic of Serbia, no. 42/2013, 89/2018 and 73/2019
Details about the services are presented in the table in Annex 9. All data are summarized from the 2021 Report on licensed social protection service providers at the local level produced by the Republic Institute for Social Protection.

Independent living services

Personal Assistance

Personal assistance services are available to adults with disabilities, who:

- have assessed need for 1st or 2nd degree of support,
- were granted an increased allowance for assistance and care by another person (which is usually based on a bodily impairment assessment of 100%),
- are capable of independent decision-making,
- are employed or engaged in the work of various civic and sports associations, political parties, and other forms of social engagement, or are attending education.

The purpose of the personal assistance service is to provide adequate individual and practical support that is necessary for a person to meet his/her needs and inclusion in educational, work, and social activities in the community in order to live independently. The eligibility criteria presented above are discriminatory in so far as they exclude people with intellectual impairments who are viewed as incapable of ‘independent decision-making’. Further on, the criteria are exclusionary and effectively serve to replace individualized disability assessment leaving potential users with no complaint mechanism to challenge their ineligibility to PA service. OPDs have conflicting views on the matter of who is personal assistance for. While OPDs representing people with physical impairment hold the view that PA service should only be provided to those capable of ‘independent decision-making’ and reasoning, parental associations representing people with intellectual impairments campaign for amendments of these criteria to ensure access to PA services to this group as well.

In 2021, there were 20 licensed service providers of personal assistance, but 16 were active. The service was provided in 28 municipalities in Serbia (which is only 17.4% of municipalities in Serbia), and the coverage rate was 5.3. Only 296 persons used the service (51.4% men, 48.6% women). Persons with physical impairment are dominantly using the service (73%) and those with the 1st-degree need of support.

Supported Living Service

Supported housing services aim to offer accommodation and professional aid to foster independence and community inclusion, targeting individuals over 15 with physical and intellectual impairments. These services prevent institutionalization and encourage deinstitutionalization. Yet, in Serbia, this service remains in its infancy. As of 2021, only three municipalities (Pancevo, Kula, Sabac) offered supported housing, with just 20 beneficiaries, a 0.3% coverage rate.

The COVID-19 pandemic exacerbated existing challenges. Daily services and independent living support faced disruptions, continuing primarily due to the proactive engagement of OPD representatives.

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95 2021 Report on licensed social protection service providers at the local level, Republic Institute for Social Protection, 2022, p.
96 Rulebook on conditions and standards for the provision of social protection services (“Official Gazette of the RS”, no. 42/2013, 89/2018 and 73/2019) Art. 88
97 2021 Report on licensed social protection service providers at the local level, Republic Institute for Social Protection, 2022
of OPDs. In Belgrade, individuals relying on supported housing were transferred to residential institutions, discontinuing their established support. Additionally, for a period, women, including those with disabilities, had limited support services during instances of violence, except for those provided by CSOs.

Despite the Law on Social Protection’s intent to decentralize essential social services and diversify providers, flawed execution has hindered availability and accessibility for persons with disabilities. Crucially, municipalities are not legally bound to finance social services, resulting in inconsistent service provision. Service availability correlates with a municipality’s developmental stage and funding capacity. Notably, 56% of municipalities are under-resourced. Central government financial support for social protection is pivotal, yet an analysis of the use of social transfers shows that the majority of grants were dedicated to the developed municipalities (second development level, 35%), while only 19% to the under-developed or devastated municipalities.

The prevailing approach still leans towards a medical and charitable perspective on disability. Consequently, the state often favours closed or sheltered services like day-care centers over promoting independent living. The limited number of licensed service providers and beneficiaries reinforces this trend. OPDs and CSOs, although licensed, grapple with financial challenges, relying heavily on donor contributions, leading to a decline in licensed services over time.

### Progress in deinstitutionalization

There were 29 children under 3 years old in residential care in 2021, and 21 of them were children with disabilities.

67% of institutionalized children are children with disabilities.

2,556 people in residential institutions for children (69% children, 31% adults). As high as 77% of persons in institutions for children have some type of disability.98

4232 people in residential institutions for adults with mental, intellectual, physical, and sensory impairment. One-third of people have lived in a residential institution for over 20 years.99

The Law on Social Protection defines 'institutional placement' available to users for whom staying in the family, community services or family placement is not possible or is not in their best interest. Children younger than three years of age cannot be placed in institutional care except in cases of particularly justified reasons, and children cannot spend more than two months there, except with the approval of the relevant Ministry. Still, the definitions of 'best interest' and 'particularly justified reasons' leave enough space for interpretations which could undermine the efforts in the direction of deinstitutionalisation. Although Serbia has done a lot in deinstitutionalisation of children and providing alternative placements, children with disabilities are still over-represented in residential institutions.

99 2021 Report on residential institutions for adults and elderly with mental, intellectual, physical, and sensory impairment, Republic Institute for Social Protection, 2022
It has been documented in numerous reports that children and adults with disabilities in residential institutions are exposed to segregation, neglect, misapplication of drugs, denial of medical treatment, and restriction on their freedom of movement. In addition, children with disabilities residing in institutions are denied adequate access to education and social protection support services. Women and girls in institutions are exposed to specific forms and manifestations of gender-based violence, including forced abortions, sterilization, administration of contraceptives without informed consent, sexual abuse and harassment. If a person with a disability is deprived of legal capacity, their guardian can consent (or decide) that a person is to be placed in an institution. Paradoxically, this is considered a voluntary placement.

In early 2022, the Strategy for Deinstitutionalisation and Development of Social Protection Services 2022-2026 was introduced, aiming to uphold the right of persons with disabilities to live in the community and promote social inclusion. However, its formulation process lacked transparency and direct participation from persons with disabilities and representative OPDs and CSOs for persons with disabilities. Despite legal mandates, an implementation action plan has not been adopted, but a working group for a 2023-2024 plan is in the works.

The Commissioner for Protection of Equality’s 2022 report revealed shortcomings in the strategy: it does not encompass the entire evolution of the social welfare system, lacks adequate funding for deinstitutionalisation, and omits initiatives to enhance support for informal caregivers. The National Preventive Mechanism for Torture, after visiting six residential establishments for persons with disabilities in 2022, observed persistent staffing challenges. Many residents remain in large institutions (with 300+ people) for prolonged periods due to inadequate community facilities. There is a pressing need to strengthen the capacities of social work centers, standardize internal processes, and prohibit coercive treatments without the explicit consent of persons with disabilities.

According to data from the Republic Institute for Social Protection, in 2019, there were 647 children under the age of 18 in institutional care, of which 478 children (73.9%) were ones with disabilities. The number of children in institutional care was slightly lower in 2020 (619 children under the age of 18), with the proportion of children with disabilities amounting to 70.1%. In the gender structure of children with disabilities, there were more boys in 2020 (60.5%), continuing a trend present over the past five years.

The percentage of preschool-age children in institutional care attending preschool programs is extremely low (only 22% of children of this age attended some form of

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101 Janjic, B., Beker, K., Exclusion and Segregation of Children with Disabilities in Residential Institutions from the Education System, 2016, MDRI-S
102 Janjic, B., Beker, K., Here the Wall Have Ears Too: testimonies of women with mental disabilities about gender-based violence in residential institutions, 2017, MDRI-S
103 Official gazette of the Republic of Serbia, no. 12/2022
105 2022 Regular Annual Report of the Commissioner for Protection of Equality, 2023, Belgrade, p. 185
106 Annual Report of the Protector of Citizens – Ombudsman, 2023
preschool program in 2019, and 38% in 2020). When it comes to children of elementary school age, it is observed that about half of them attend special schools, approximately 30% attend regular elementary schools, and concerning data shows that in 2019, as many as 18% of children did not attend elementary school. 67% of school-age children attend regular high school, while 25% of children attended high school for students with disabilities in 2019, and 20% in 2020. About 10% of children are not included in the secondary education system.

Children with disabilities placed in residential care are facing exclusion from education considering that 22% of children placed in institutions attended preschool programs in 2019, and 38% in 2020; around half of the children attend primary education in a special school, and 30% of them attend mainstream. 18% of children in institutions did not attend primary school.107

Mainstream services (inclusive efforts)

Health

In an online survey conducted for the purposes of this situational analysis, health access was the third most violated right for persons with disabilities (45% of responses) and a priority for future efforts. This concern intensified during the COVID-19 pandemic. Even pre-pandemic, it was a crucial yet under-addressed domain. During the pandemic, many persons with disabilities faced therapy cancellations, worsened health due to home isolation, lack of proper protocols, and poor access to health services in rural areas.108 The Law on Population Protection from Infectious Diseases lacks provisions for ensuring accessibility and special protection of persons with disabilities.

The Republic of Serbia offers a universal health system with free primary care access, without prioritization. The Law on Health Insurance entitles every person with a disability in Serbia to free health insurance.109 However, there are systemic gaps in health access for persons with disabilities. Independent reports pinpoint insufficient training for health workers, especially concerning communication with children with disabilities and adults with cognitive impairments.110 This training need is highlighted in the Action Plan of the Strategy for Improving the Status of Persons with Disabilities. Early diagnosis, treatment, and support for children with disabilities remain areas of concern. In 2016, a registry for children with disabilities was created based on the International Classification of Functioning, Disability, and Health (ICF) to promote early identification and functional assessment. This registry aids policy and budget planning, but stronger inter-sectorial ties are essential to maximize its benefits.

108 Impact of the covid-19 on vulnerable groups and groups at risk: causes, outcomes, and recommendations, UN Human Rights Team Serbia, Social Inclusion and Poverty Reduction Unit of the Government, Swiss Agency for Development and Cooperation SDC.
109 Official Gazette of the Republic of Serbia, No. 25/2019
110 Lazarevic, S., Cric Milovanovic, D., at all, Position of Persons with Disabilities in Serbia: zero report, 2022, MDRI-S
Parents and caregivers of those with autism spectrum disorders often note insufficient information and difficulties navigating the system. Support for those with autism and intellectual impairments is partly hindered by stereotypes among healthcare workers. Transitioning from children’s health services to adult services is challenging due to a system heavily reliant on the medical model, emphasizing psychiatric services over holistic and individualised support.

Research reveals significant gaps in the sexual and reproductive rights of women with disabilities. One in five has never undergone a gynaecological examination. While 52% believe the health care system is accessible, the reality varies based on facilities’ accessibility, equipment, sign language services availability, and health professionals’ training. Major issues include lack of reliable information on reproductive health, inadequate access to quality health services due to physical and communication barriers and untrained health professionals.

The high societal stigma around the sexuality of women with disabilities is still pervasive. Women, especially those with intellectual impairments in institutions, face violations like forced abortions and sterilizations and non-consensual contraceptive use. The Concluding Observations issued by the CEDAW Committee on the Fourth Periodic Report of Serbia highlighted the challenges women with disabilities face accessing reproductive services. Recommendations included unhindered health care access, particularly in the area of sexual and reproductive health. Despite the 2017 National Program for Preservation and Improvement of Sexual and Reproductive Health of the Citizens emphasizing the importance of reproductive health for vulnerable groups, no specific actions have been taken. The 2020-2024 Strategy also acknowledged this need, but its first Action Plan (2020-2022) lacked concrete measures. However, the second Action Plan, adopted in July 2023, plans to enhance accessibility and availability of reproductive health services for these women by Q4 2024, signalling potential improvements.

Education

According to the Constitution of the Republic of Serbia (Article 71), "primary education is mandatory and free to everyone, while secondary education is free." The legislative framework for education is provided by the Law on Foundation of the Education System. The preparatory preschool programme is obligatory for every child, and

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111 Pejovic Milovančević M, Mandic Maravic V, Vlaisavljevic M, Lestarevic S, Vasic J. Status of support available to young people with autism spectrum disorders (ASD) and their families, Institute for Mental Health and UNFPA

112 From the interview with the representative of the Mental Health Institute; also available in publication Status of support available to young people with autism spectrum disorders (ASD) and their families produced by the Institute for Mental Health and UNFPA

113 Zajic, G., Jevtic, M., Sexual and Reproductive Health of Women and Adolescent Girls with Disabilities, 2018, UNFPA

114 Janjić B., Ćirić Milovanović, D., 2017, Here the walls have ears too, Mental Disability Rights Initiative MDRI-S, Belgrade, and Janjic, B., Beker, K., Lepojevic, V., Protection of Sexual and Reproductive Rights of Women with Mental Disabilities and Protection from Violence, MDRI-S & FemPlatz


enrolment in primary school is mandatory. Measures to support inclusive education are prescribed in the law and a set of accompanied by-laws.\textsuperscript{117} Children from vulnerable groups can be educated in the mainstream educational system or schools for children with disabilities and provided with additional support. The pedagogical profile of a child is the first document in the assessment process. The adjustment of the educational process for children who need additional support is divided into two levels:

1) individualization, characterised by the removal of physical and communication barriers and it can be changed at any moment according to the child’s needs,

2) development of an Individual Education Plan (IEP), either with adjusted educational standards (IEP1) or with changed educational standards (IEP2). Both have specific procedures and regulations, including written approval of the parent(s) or a legal guardian.

In recent years, Serbia has experienced a negative trend of a decrease in coverage of children at all levels of pre-university education. The number of primary school-age children attending classes for the education of children with disabilities in mainstream schools, and schools for the education of children with disabilities (so-called special schools), has been decreasing in recent years, while the number and share of children in primary schools educated using the individual education plans IEP1 and IEP2 has been increasing.\textsuperscript{118} There are continual activities on transforming the roles and improving the work of schools for the education of students with disabilities, through establishing resource centres for inclusive education. Nine out of ten of these established resource centres are special schools designated as resource centres in addition to their role as education institutions.\textsuperscript{119} Additional challenges include a significant disbalance between the legislative provisions and availability and accessibility of local support services crucial for the education of children with disabilities (low coverage of child’s personal companion, lack of pedagogical assistants. The recommendations given by the multisectoral commission for assessing additional education needs are not enforceable, and there is a lack of an adequate complaint system. Accessibility and the availability of assistive technologies remain a significant problem, as well as adjusted and accessible textbooks and other educational material. Moreover, the Law on Dual Education\textsuperscript{120} provides no safeguarding of the rights of children with disabilities in this form of education. It also demands the fulfilment of health requirements for the profession to enrol the child into this kind of education, meaning that most children with disabilities would face the risk of exclusion.

During covid-19 pandemic and switching to online schooling, the education of children with disabilities was also threatened because the online system of education was not accessible and adapted to the needs of children with disabilities, and there was a lack of additional support services for children. This led not only to poorer quality of education but to a complete lack of education for some children.

\textsuperscript{117} the Rulebook on Additional Educational, Health and Social Support of Children and Pupils and the Rulebook on Detailed Guidelines for Determining the Right to the Individual Education Plan (IEP)\textsuperscript{118} National Report on Inclusive Education in Serbia, from 2019 to 2021, Ministry of Education, UNICEF\textsuperscript{119} From the interview with the representative of the Ministry for Education, held on 9th May 2023\textsuperscript{120} Official Gazette, no. 101/2017 and 6/2020.
Employment and livelihood

The Constitution of the Republic of Serbia (Article 60 - Right to work) guarantees the right to work and free choice of occupation. Persons with disabilities, together with women and youth, have been identified as groups that should receive special protection at work and special work conditions.

In an online survey conducted as part of the SITAN, respondents assessed the violation of the right to work as the most important and serious violation of disabled people’s rights in Serbia (67.2% of responses). Most comments referred to lack of accessibility and adaptation of the working place, lack of reasonable accommodation, stereotypes and prejudices about persons with disabilities, low incomes and financial instability, and lack of adequate training and professional orientation for new employees.

Right to work and access to employment were also among the top three priority areas to improve in the following period.

According to the 2011 Census, only 12.4% of persons with disabilities were economically active. Out of that already very low number, only 9% of the total population of persons with disabilities are employed, while the rest are unemployed. Their disadvantageous position is confirmed by comparing the activity rates to the general population, namely the age category that is supposed to be the most active (people between 30 and 49 years old), 80% of the general population is economically active (work or actively looking for jobs) compared to 40% of people with disabilities. Persons with disabilities in the most active age group are only half as active as the general population. Wages or earnings are the main source of income for only 6.8% of persons with disabilities, which stands in sharp contrast to the general population, for whom wages are the main source of income.

According to the report on the assessment of the Law on professional rehabilitation and employment of persons with disabilities, the number of persons with disabilities registered at the National Employment Service as unemployed active job seekers has been relatively constant since 2010 and they account for 13,000 to 15,000 people. Persons with disabilities experience long periods of unemployment and 71% of those who are unemployed are long-term unemployed (at the unemployment registry for more than a year). The data on persons with disabilities who have found jobs shows a significant increase from 2010 – total employed 1.589 (34% women, 66% men), while in 2019, there were 6.555 persons employed with an increase in the share of women with disabilities employed (44% women, 56% men). However, this is only half of those registered at the National Employment Service.

The Law on Professional Rehabilitation and Employment of Persons with Disabilities introduced the obligation to employ persons with disabilities as the principle of affirmative action aiming to increase the participation of persons with disabilities in the

122 Ibid
123 Ibid
124 Assessment of the Law on professional rehabilitation and employment of persons with disabilities, produced in 2020 by ILO
125 Ibid, p. 8
126 Official Gazette of the Republic of Serbia, No. 36/2009, 32/2013 and 14/2022 – other law
labour market. It introduced a quota for the employment of persons with disabilities for both private and public companies, with at least 20 employees, while new companies are exempted from this obligation for the first two years. The fee for non-compliance with the quota is determined on a monthly basis (amounting to 50% of the average income in Serbia), and that amount goes directly to the Budgetary Fund for Professional Rehabilitation and Encouragement of Employment Persons with Disabilities. There is no data on the amount of money raised specifically through the fee/levy since the Budgetary Fund receives money from the State budget. The money from this fund should be used for a subsidy of salaries of persons with disabilities employed in the company for professional rehabilitation and employment, improvement of working conditions, improvement of production programs, quality of products and services provided, and job adjustments. More details on the Budgetary Fund are provided in Section 5.

There is no officially available data on the percentage (number) of employers who comply with the employment quota. According to the report of the Parliamentary Committee for Human and Minorities Rights and Gender Equality:

<table>
<thead>
<tr>
<th>Year</th>
<th>No. of employers</th>
<th>No. of employed persons with disabilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017</td>
<td>8,216</td>
<td>19,016</td>
</tr>
<tr>
<td>2018</td>
<td>8,801</td>
<td>21,218</td>
</tr>
</tbody>
</table>

*Table 4: Number of employers with the duty to comply with quote and number of employed persons with disabilities*

This law also regulates the work of companies for professional rehabilitation and employment of persons with disabilities. In 2021, there were 56 companies for the professional rehabilitation and employment of persons with valid licenses. Those companies enjoy significant regular benefits and support from the line ministry (i.e., monthly salary subsidy, funds for the improvement of working conditions, etc.). The 2020 plan for the inspection of these companies mentions that there were 1,131 employees with disabilities and that the companies operate in 23 local municipalities.

According to the provisions of the Law on Personal Income Tax, a private sector employer can be exempted from income tax and compulsory social insurance for a period of three years if employs a person with a disability based on a full-time contract. Financial incentives for the employment of persons with disabilities are provided through various forms of wage subsidies for the employment of persons with disabilities without work experience, subsidies for the creation of new jobs, and public works. However, there is no evidence of the effectiveness of these instruments.

**Access to justice**

One of the most serious manifestations of discrimination against persons with disabilities in Serbia is found in the legislation and practice of deprivation of legal capacity/guardianship regime and thus denial of equality in accessing and exercising

127 Employer with 20 to 49 employees is obliged to hire one person with disability, and one person with disability per each subsequently started number of 50 employees.

128 Article 28 of the LPREPWD


130 2020 Plan of the inspection monitoring, Ministry of labor, employment, veteran, and social affairs, 2019
rights and obligations and entering legal relations on a person’s own will. Family Law\textsuperscript{131} defines three types of limitations to the exercise of legal capacity: full deprivation of legal capacity\textsuperscript{v}, partial deprivation of legal capacity\textsuperscript{vi}, and extension of parental rights.\textsuperscript{vii}

Persons fully deprived of their legal capacity may undertake only legal actions of minor significance and cannot undertake any legal actions by which they are assigned rights or obligations – deprivation automatically affects decision-making in many different areas of life and forbids exercising significant number of rights, including entering into marriage and exercising parental rights, deciding on medical procedures, receiving an organ transplant, choose where and with whom to live, the right to physical and mental integrity, the right to dispose of property, to control financial affairs, entering into contracts, which by default prevents employment and buying or selling property, voting, volunteering, etc. There are neither legal nor practical arrangements for supported decision-making in Serbia.

The reinstatement of legal capacity is possible if the reasons for deprivation cease to exist. Data show that the number of persons deprived of legal capacity has not been substantially decreasing over the years, while there were only a very small number of reinstatements.\textsuperscript{132} The dominant reason for the end of the guardianship regime in 96% of cases is the death of a person under guardianship.\textsuperscript{133}

\begin{table}[h]
\centering
\begin{tabular}{|l|c|c|c|c|}
\hline
 & 31\textsuperscript{st} Dec 2018 & 31\textsuperscript{st} Dec 2019 & 31\textsuperscript{st} Dec 2020 & 31\textsuperscript{st} Dec 2021 \\
\hline
Number of persons under guardianship & 12,940 & 13,164 & 13,436 & 13,123 \\
\hline
Number of persons put under guardianship during the year & 1,229 & 1,135 & 890 & 943 \\
\hline
Number of court decisions on legal capacity reinstatement & & 27 & 36 & 40 \\
\hline
\end{tabular}
\caption{Trend on legal capacity deprivation and legal capacity reinstatement}
\end{table}

According to reports,\textsuperscript{134} in 2020, as high as 45% of persons deprived of legal capacity were also placed in residential institutions. The analysis of the judicial data on legal capacity deprivation\textsuperscript{135} shows that this practice affects persons with intellectual impairment the most (40%) and persons with psychosocial impairments (33%), which is followed by persons suffering from dementia (24%).

In addition, when women are deprived of their legal capacity, they also face barriers to accessing justice, including in cases of sexual harassment and sexual violence. Internal protection mechanisms in institutions are not established or are not functional, women are often not trusted if they report violence, and they cannot conduct court proceedings for protection against violence on their own because they are deprived of legal capacity.\textsuperscript{136}

\textsuperscript{131} Official Gazette of the Republic of Serbia, No. 18/2005 and 72/2011
\textsuperscript{132} Lazarevic, S., Cric Milovanovic, D. et all, 2022, Position of Persons with Disabilities in Serbia – zero report, Mental Disability Rights Initiative of Serbia MDRI-S
\textsuperscript{134} Lazarevic, S., Cric Milovanovic, D. et all, 2022, Position of Persons with Disabilities in Serbia – zero report, Mental Disability Rights Initiative of Serbia MDRI-S
\textsuperscript{135} Beker, K. Milošević, T., 2016, Legal Capacity: Judicial Practice and Laws in Serbia in 2016, MDRI-S
\textsuperscript{136} Beker, K., Milosevic, T., 2017, Violence against women with disabilities in residential institutions: baseline study, Mental Disability Rights Initiative of Serbia MDRI-S
Summary of key gaps and challenges

Disability assessments are not compliant with the CRPD. They are scattered across different systems for different types of support, making the process overly bureaucratic, complicated, and unnecessary. Most importantly, some assessments effectively deny access to rights to persons with disabilities.

There is a lack of local support services and the overall number of service users is very small. This affects community living and the deinstitutionalization process. The level of development of the municipality is directly connected to access to services and the earmarked transfers for social protection services do not reach underdeveloped and devastated municipalities, which hampers community living and inclusive education. Early childhood intervention for children with disabilities remains underdeveloped and insufficiently available. As far as inclusive education is concerned, the Republic of Serbia still maintains a segregated system of schooling. The number of students in secondary special schools has increased, special classes in mainstream schools continue to operate as well as the development groups in preschool institutions which all represent a form of segregation. The lack of efficient support for inclusive education of children with disabilities is notable. The lack of monitoring mechanisms for the provision of support to the employment of persons with disabilities makes the reforms in this sector ineffective. Serious lack of transparency of the funds allocated for employment support for persons with disabilities.

Specific training for capacity building of health professionals to communicate and work with persons with disabilities is lacking, as well as awareness-raising programmes to decrease the level of prejudices and stereotypes among them, particularly related to sexual and reproductive health of persons with disabilities and support services for persons with intellectual impairments.

Deprivation of legal capacity of persons with disabilities and plenary guardianship is still regulated by the law and there is no effective system of supported decision-making, which strips persons of basic human rights.

Section 5 – Disability inclusive budgeting

Support for additional costs of disability
Several financial planning and allocations for disability rights are presented in this section, namely, the allocation of funds, coverage, effectiveness, and efficiency of the earmarked transfers for social protection, financial allowances for the need and care of another person to children and adults with disabilities, funds for the medical-technical aids, and the overview of the funds in the Budgetary fund for employment of persons with disabilities.

Earmarked transfers for social protection
The Law on Social Protection introduced so-called financial transfers for social protection
as a mechanism for the state to financially support local self-governments in the provision of social protection services. The table below provides information about the funds in social transfers, but this refers to all local support services (including a helpline for victims of violence, shelters, drop-in centre), and it is not possible to extract data about the funds directed only to services for persons with disabilities. In addition, the data are not disaggregated by sex, place of living, age, type of impairment, or other characteristics.

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount in RSD</th>
<th>Amount in EUR</th>
<th>No. of LSGs</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>752 million</td>
<td>6,367,000</td>
<td>144</td>
</tr>
<tr>
<td>2020</td>
<td>605 million</td>
<td>5,145,000</td>
<td>146</td>
</tr>
<tr>
<td>2021</td>
<td>556 million</td>
<td>4,728,000</td>
<td>146</td>
</tr>
<tr>
<td>2022</td>
<td>500 million</td>
<td>4,259,000</td>
<td>146</td>
</tr>
<tr>
<td>2023</td>
<td>600 million</td>
<td>5,115,000</td>
<td>146</td>
</tr>
</tbody>
</table>

Table 6: Funds allocated for social transfers in RSD and EUR for social protection and number of local self-governments that received the funds 2019-2023

The State Audit Institution found that the Ministry of Labor, Employment, Veteran, and Social Affairs did not efficiently distribute social protection funds. They lacked reliable data to confirm if local self-governments (LSGs) met eligibility criteria, ensuring fair fund distribution. Efficient fund distribution and monitoring could enhance local support services. However, there is no comprehensive data on LSGs or analysis on minimum standards for services, making fund effect evaluation challenging. A missing effective monitoring system could lead to misallocation and poor quality assessment. LSGs are overly dependent on these transfers, often reducing local budget allocations. Many LSGs failed to use funds due to short procurement deadlines and administrative issues. In 2019, 55% of LSGs didn’t submit expenditure reports, indicating the Ministry’s incomplete oversight of fund usage.

The report also found that the majority of funds were dedicated to the LSGs in the second development level (35%), then the third development level LSGs (33%), and 19% to the fourth development level LSGs. The analysis found that the majority of funds were used for daily support services – home assistance, child companion, day-care center (112 LSGs in 2020 and 122 LSGs in 2021), then independent living services (personal assistance, supported living services (15 LSGs in 2020, 12 LSGs in 2021), but again there are no data on the effectiveness of the invested funds.

Budgetary allocations for assistive technologies and mobility aids and devices

A key document for accessing medical-technical aids for persons with disabilities is a Rulebook on Medical-technical Aids. They are provided by regular health insurance and the relevant authority is the Republic Fund for Health Insurance. The report on

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137 The amounts of allocated funds for 2019, 2020, and 2021 are from the Report Distribution Efficiency and the Use of Earmarked Transfers in Social Protection, State Audit Institution, 2022; the amounts of allocated funds for 2022 and 2023 are from the website of the Ministry for labor, employment, veteran, and social affairs and the media;


139 Report Distribution Efficiency and the Use of Earmarked Transfers in Social Protection, State Audit Institution, 2022
accessibility of medical-technical aids for persons with disabilities\(^{140}\) found that the budgetary allocations are inadequate and persons with disabilities have to provide for the medical-technical aids by themselves, and the amount is frequently several times higher than the personal income. For example, as high as 64\% of surveyed persons with disabilities in this study said that they acquired medical-technical aids from health insurance and/or by using their personal funds, while only 9\% of them acquired them via representative OPD, and 14\% via donations.

By looking at the data for the period between 2016 and 2020, on average there were 17,800 applications for medical-technical aids annually, but as high as 63\% of applications were rejected. There is no definite explanation for such a high number of rejected applications, but there are indications that the annually allocated funds are limited, which then leads to a limited number of persons with disabilities acquiring medical-technical aids.

The report also highlighted that although the nominal amount of the budgetary allocations for medical-technical aids has been increasing (e.g., from 3,5 billion dinars in 2016 to 5 billion dinars in 2020), the number of approved applications has been decreasing. Approximately 22,5 billion dinars (about 190,7 million EUR) have been allocated for medical-technical aids in the period between 2016 and 2020. Therefore, as we see the increase in allocated funds, we also see the smaller coverage of persons with disabilities using this provision, namely we see a regression in accessing and realizing the social and economic rights of persons with disabilities in this area.

Financial allocations for allowance for assistance and care by another person

One of the cash benefits provided by the social protection system in Serbia includes an allowance for assistance and care by another person. There is a basic allowance, which is currently below the minimal wage in Serbia (24.696,74 dinars) and an increased allowance, which is just as high as the minimal wage (35.254,00 dinars). The data shows that approximately two-thirds of children and adults with disabilities, who are at the registry of the centers for social work, receive this cash benefit:

<table>
<thead>
<tr>
<th></th>
<th>Total no. at the evidence of centers for social work</th>
<th>Basic allowance</th>
<th>Increased allowance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No.</td>
<td>% of total</td>
<td>No.</td>
</tr>
<tr>
<td>Children with disabilities(^{141})</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2019</td>
<td>11,071</td>
<td>3,867</td>
<td>35%</td>
</tr>
<tr>
<td>2020</td>
<td>11,205</td>
<td>4,369</td>
<td>39%</td>
</tr>
<tr>
<td>2021</td>
<td>11,914</td>
<td>4,485</td>
<td>38%</td>
</tr>
<tr>
<td>2022</td>
<td>13,163</td>
<td>4,485</td>
<td>34%</td>
</tr>
<tr>
<td>Adults with disabilities(^{142})</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2019</td>
<td>61,731</td>
<td>11,882</td>
<td>19%</td>
</tr>
<tr>
<td>2020</td>
<td>62,982</td>
<td>12,007</td>
<td>19%</td>
</tr>
<tr>
<td>2021</td>
<td>61,980</td>
<td>11,405</td>
<td>18%</td>
</tr>
</tbody>
</table>

\(^{140}\) Mijatovic, M., Veljkovic, M., Keravica, R., Report on Accessibility of Medical-technical Aids for Persons with Disabilities: Youth with disabilities in combat for freedom and right to independent living, IM-PACT 21, 2022

\(^{141}\) All data about the child protection system are from the regular annual social protection system reports for 2019, 2020, 2021, 2022, Republic Institute for Social Protection

\(^{142}\) All data are from the 2019, 2020, 2021, 2022 reports on the adults in social protection system, Republic Institute for Social Protection
In this respect, we constantly see the same coverage, and while the total number of children with disabilities at the registry of centers for social work increased in 2022, the number of cash benefits stayed the same, which also shows that the budgetary allocations are inadequate and insufficient.

Families can also receive a child allowance, which is not universal in Serbia, and it is a cash benefit that depends on the economic status of the family. Children with disabilities living in families and receiving a basic allowance for assistance and care by another person are eligible for increased child allowance (5.744,80 dinars/about 50 euros a month), following the opinion from the multi-sectoral commission for the assessment of additional education, health, and social support. Even when the child allowance and basic allowance for assistance and care by another person are combined, they do not amount to the minimum wage in Serbia.

Throughout the years, the highest percentage of funds for child protection (two-thirds on average) is dedicated to income reimbursement during parental leave and parental allowance, while one-third of funds are distributed across different social protection services, including social financial aid, child allowance, allowance for assistance and care by another person, residential placement, family placement.

When we look at the total annual spending for allowance for assistance and care by another person in the child protection system, we see that although the amount is increasing, the percentage of the total budget has been steady in the past two years, while the coverage of service users is also steady.

### Table 7: Number of children and adults with disabilities at the registry of centers for social work as the beneficiaries of allowance for assistance and care of another person (2019-2022)

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount in RSD</th>
<th>Amount in EUR</th>
<th>% of the total budget for child protection</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>65,805</td>
<td>11,346</td>
<td>17%</td>
</tr>
<tr>
<td>2020</td>
<td>34,112</td>
<td>5,2%</td>
<td></td>
</tr>
</tbody>
</table>

Families can also receive a child allowance, which is not universal in Serbia, and it is a cash benefit that depends on the economic status of the family. Children with disabilities living in families and receiving a basic allowance for assistance and care by another person are eligible for increased child allowance (5.744,80 dinars/about 50 euros a month), following the opinion from the multi-sectoral commission for the assessment of additional education, health, and social support. Even when the child allowance and basic allowance for assistance and care by another person are combined, they do not amount to the minimum wage in Serbia.

Throughout the years, the highest percentage of funds for child protection (two-thirds on average) is dedicated to income reimbursement during parental leave and parental allowance, while one-third of funds are distributed across different social protection services, including social financial aid, child allowance, allowance for assistance and care by another person, residential placement, family placement.

When we look at the total annual spending for allowance for assistance and care by another person in the child protection system, we see that although the amount is increasing, the percentage of the total budget has been steady in the past two years, while the coverage of service users is also steady.

### Table 8: Allocated funds for the allowance for assistance and care by another person in the child protection system (2019-2022)

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount in RSD</th>
<th>Amount in EUR</th>
<th>% of the total budget for child protection</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>1,297,576,915,44</td>
<td>11 million</td>
<td>2,21%</td>
</tr>
<tr>
<td>2020</td>
<td>1,689,383,838,60</td>
<td>14,3 million</td>
<td>2,36%</td>
</tr>
<tr>
<td>2021</td>
<td>1,719,709,960,40</td>
<td>14,7 million</td>
<td>2,36%</td>
</tr>
<tr>
<td>2022</td>
<td>1,719,709,960,40</td>
<td>14,7 million</td>
<td>2,20%</td>
</tr>
</tbody>
</table>

Funds for residential placement

According to the reports on children in the child protection system, there is steady funding for residential placement, which is expected as the number of clients has not been decreasing for years. If we consider that two-thirds of children in residential institutions are children with disabilities, then these allocations are also presented. Although the overall percentage of funds for the child protection system allocated to the residential institutions is very small, the fact is that these available funds could have been gradually directed towards the local support services and family-like placements of children with disabilities, which leads to deinstitutionalization.

### Table 8: Allocated funds for the allowance for assistance and care by another person in the child protection system (2019-2022)

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount in RSD</th>
<th>% of the total budget for children protection</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>1,313,637,000,00</td>
<td>2%</td>
</tr>
</tbody>
</table>
As the majority of people in residential institutions are adults with disabilities, we can conclude that significant amounts of funds are annually spent on investments and management of residential institutions. Independent monitoring reports confirm this finding and for example, 800 million RSD (over 6,800,000 euros) were invested in the reconstruction and extension of the Kolevka home in Subotica, 78 million RSD (over 660 thousand euros) for the renovation of the Institution for Children and Youth in Sremcica. On the website of the Public Investment Management Office, it is stated that for a project of works on the Veternik Institution, the contracted value is more than 403 million dinars (more than 3,400,000 euros).\textsuperscript{143} Funds from other sources, such as so-called Opportunity Funds are allocated for the infrastructure and maintenance of residential institutions (e.g., a total of 42,063,792.00 dinars from 2019 to 2023).\textsuperscript{144}

### Budgetary Fund for Professional Rehabilitation and Encouragement of Employment Persons with Disabilities

As described in the section on employment, the Law on employment and professional rehabilitation of persons with disabilities introduced a Budgetary Fund. According to the report on the assessment of the law implementation, at the beginning of the implementation of the law, 52.2% of companies employed persons with disabilities in comparison to 58.1% of the total number of companies that met that obligation in 2019.\textsuperscript{145} On the other hand, those who decided to make payments to the Fund constituted 46.7% in 2011 and 40.6% in 2019. There is no division between the public institutions and companies in their compliance with the law, so we cannot estimate to which degree the state institutions are adhering to the legal obligations. On average during the period between 2011-2019, there were 3,049 employers that annually contributed 3,159.5 million dinars to the fund. In 2011, the amount was 2,728 million dinars, while it was 4,047 in 2019. There is no clear assessment for this increase and additional research is needed to understand the factors that have led companies to pay penalties rather than hire persons with disabilities but causes such as discriminatory attitudes and practices and lack of understanding of reasonable accommodation at the workplace might be some reasons.

According to the Law, funds should be used for professional rehabilitation and employment of persons with disabilities. However, in practice, the resources of the Fund are annually allocated to two pillars:

- Activities and active labour market programmes, which are implemented by the National Employment Service;

\textsuperscript{143} All information provided in the Report on the Position of Persons with Disabilities in Serbia: zero report, MDRI-S, 2022

\textsuperscript{144} Information about the Opportunity Fund and allocated funds for the project can be found on the Ministry of Justice website, \url{https://www.mpravde.gov.rs/sr/sekcija/15755/oportunitet.php}

\textsuperscript{145} Assessment of the Law on professional rehabilitation and employment of persons with disabilities, produced in 2020 by ILO, p. 26
Measures of support to enterprises for the professional rehabilitation and employment of persons with disabilities.\textsuperscript{viii}

The data shows that in 2019, 550 million dinars were allocated to pillar one and 700 to pillar two, resulting in a total available resource of 1,250 million dinars. Bearing in mind that companies contributed over four million dinars, as seen above, excluding all the fines that were also collected, it remains unclear how the remaining resources were spent. The report notes the difference between the incomes and expenses of the Fund is more than 3 billion dinars.\textsuperscript{146}

### Summary of key gaps and challenges

There is a trend of an increase in the nominal amount of the allocated funds for disability-specific services, but it is a consistent percentage of the overall budgets throughout the years. Smaller coverage indicates a regression in the access to rights and services for persons with disabilities in Serbia.

There is also an ongoing lack of publicly available data on the difference between applications for certain services or cash benefits and approved applications. A significant number of people do not receive services or social benefits, and even when they do, the amounts are below the minimum wage and dignified living. The relevant authorities have not put in place monitoring mechanisms, nor have they conducted an assessment of the adequacy of budgetary allocations and realization of the human rights of persons with disabilities.

There are no studies which investigate the extra cost of living with disability. Substantial funds are still being invested in residential institutions instead of in community living, as the residential institutions are costly by their definition, but additional funds are invested in infrastructure and maintenance so that the residential institutions can be license.

There is a serious lack of transparency of the funds in the Budgetary Fund for the Employment of Persons with Disabilities, as well as their spending and effectiveness.

### Section 6 - Governance and accountability

#### National accountability mechanisms

At the end of 2014, the Government of the Republic of Serbia established the\textbf{ Council for Monitoring the Implementation of the UN Human Rights Mechanisms Recommendations}.\textsuperscript{147} The Council\textsuperscript{ix} is coordinated by the Ministry for Human and Minority Rights and Social Dialogue and it has 18 members, who are high governmental officials appointed by the Government, which gives it the authority to influence the implementation of recommendations.

\textsuperscript{146} Ibid, 29
\textsuperscript{147} Decision on establishment of the Council for monitoring the implementation of the UN human rights mechanisms recommendations, Official gazette of the Republic of Serbia, No. 140/2014
For better coordination, each ministry appointed a focal contact point. It invites civil society, independent institutions, and MPs to the meetings. Civil society organisations and the Platform of NGOs for cooperation with UN human rights treaty bodies have signed the Memorandum of Cooperation with the Council, which gives them the opportunity to participate in the meetings and discuss recommendations for implementation. NOOIS, the Center for Independent Living of Persons with Disabilities, and the Mental Disability Rights Initiative of Serbia MDRI-S are members of the Platform, which also has a thematic group on persons with disabilities.\(^{148}\) The Council meets regularly and it is very open to hearing proposals from civil society organizations and key findings of shadow reports. The Council produced a detailed plan for monitoring UN recommendations, which at this point has 400 recommendations.\(^ {149}\) The plan includes details about each recommendation, the cluster of rights, relevant authority, deadline, indicators, connection to the Agenda 2030, and the status of the recommendation. All documents, meeting recommendations and the monitoring system is available online, which makes the work of this council very transparent. It presents a positive model of functioning, coordination, transparency, and active participation of various stakeholders. The key challenge presents the volume of recommendations that Serbia received from UN human rights treaty bodies and the capacity of the relevant authorities to implement the recommendations.

**Inclusive evidence & data gathering systems**

The Statistical Office of the Republic of Serbia oversees the conduction of statistical surveys, data collection, processing, and publishing of statistical data. In the 2011 Census, data on disability was collected for the first time, guided by the Washington Group on Disability Statistics’ recommendations.\(^ {150}\) This involved a basic set of questions about daily functioning challenges, allowing individuals to independently identify their difficulties.\(^ {151}\) This methodology was also used in the 2022 Census but excluded questions about the use of aids. The gathered data offers insights into the situation of persons with disabilities in Serbia, considering variables like age, sex, region, and education. This information aids in evidence-based policy creation.

However, challenges persist in consolidating disability data due to varied classification systems and no standard disability definition. While the education system has a monitoring platform, it struggles to track inclusive education and lacks specific data on vulnerable children groups. The Republic Institute for Social Protection also gathers disability data, but this only covers registered beneficiaries, leaving out many with disabilities. Combining both data sources provides only a partial understanding of the situation.

In 2019, Serbia participated in the sixth cycle of the Multiple Indicator Cluster Survey (MICS) by UNICEF and the United Nations. This research aimed to identify children more likely to experience activity limitations. The model, based on the International

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\(^{148}\) More on Platform of NGOs for cooperation with UN human rights treaty bodies can be found here [https://platforma.org.rs/](https://platforma.org.rs/)

\(^{149}\) The plan is available at [PLAN-PREPORUKA400.decembar2022.xls](https://live.com)

\(^{150}\) Also available at [https://www.washingtongroup-disability.com/](https://www.washingtongroup-disability.com/)

Classification of Functioning, Disability, and Health for Children and Youth, had constraints. Namely, caregivers assess children’s difficulties, and the results only offer a temporal snapshot, preventing causal conclusions.

Key gaps and challenges

One of the primary challenges is the lack of a unified definition of what constitutes a disability across different sectors which would allow consistency and comparability in data collection efforts. The absence of standardized disability data collection tools and track barriers they face and levels of enjoyment of rights make it challenging to administer disability surveys and gather accurate and comparable data across the country. Collecting comprehensive disability data through disability surveys requires significant resources, both financial and human and demands careful planning and budget allocations. Census data which captures the number of people with disabilities on the basis of Washington’s Group set of questions is not enough to provide an insight into the roots of inequalities persons with disabilities face. Traditional survey methods might not be suitable for capturing the full spectrum of disabilities. Household surveys, for example, may underrepresent people with intellectual and psychosocial impairments who are in institutional care. Data disaggregation across a range of data-gathering systems is essential to understand the distinct challenges faced by different disability groups. Data collectors including the Statistical Office of the Republic of Serbia lack appropriate training to sensitively and effectively gather information on disability-related topics. OPDs are lacking the capacity and knowledge for data collection methods and tools which would enable them to collect data from their members and use this data as complementary evidence to the government’s data for the purposes of disability rights advocacy.

Section 7 – Cross-cutting issues

Participation

OPDs under the national umbrella association (NOOIS) engage in policy-making processes with varied outcomes. The Council for Persons with Disabilities, a government advisory body, oversees disability-related policy coordination, but often its recommendations are not implemented due to members’ limited authority in their ministries, rendering OPD involvement less effective. Structural barriers like prejudices, lack of services, and inaccessibility impede OPDs’ active participation. Less than 10 municipalities have established local councils involving OPDs in local policymaking. OPDs lobby to influence policies benefiting persons with disabilities and raise awareness for inclusive practices. Yet, a suppressive political environment, reliance on state funding, and exclusion of non-NOOIS-affiliated OPDs often hinder these efforts. Despite their involvement, challenges like inadequate capacity, limited resources, and decision-makers viewing persons with disabilities as beneficiaries rather than change agents restrict OPD effectiveness.

To optimize OPD engagement, several improvements are necessary:

- **Improved Communication**: Enhance engagement through regular consultations and dialogues to ensure the concerns of persons with disabilities are considered.
**Capacity Building**: Bolster OPD capacities in advocacy, policy analysis, and strategic planning while deepening understanding of disability rights and related policies.

**Data Collection**: Improve advocacy by enhancing inclusive data collection, and complementing government data to push for disability rights.

**Alliance Formation**: Form alliances between different impairment groups and OPDs and with other human rights organizations and stakeholders to pool resources and amplify advocacy.

**Monitoring and Evaluation**: Implement mechanisms to track advocacy progress, assess engagement effectiveness, and refine strategies for better results.

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**Inclusion of marginalised groups**

Persons with intellectual and psychosocial impairments are notably excluded from Serbia’s disability movement. Those with intellectual impairments often lack self-advocacy groups, and their representation often falls to their parents. While persons with psychosocial impairments have local organizations under the umbrella association "Naum," they are not viewed as part of the broader disability movement. This exclusion extends to individuals living with HIV/AIDS. They, too, are not commonly regarded as OPDs and face barriers in obtaining public funding.

Women with disabilities encounter challenges in numerous life areas, particularly those at the intersection of multiple forms of discrimination. They are underrepresented in leadership roles, face higher violence rates, and have limited healthcare and financial access. There’s a marked division within the disability movement, leading to fragmented advocacy efforts. This division is evident in disagreements between the deaf and those with cochlear implants regarding medical interventions and cultural identity. The perceived inadequate representation eventually led to the formation of a new OPD for those with cochlear implants.

To combat this fragmentation and promote inclusion, capacity-building is essential for disability organizations. Policies and legislation should promote inclusivity and challenge existing prejudices. Equal opportunities for all, especially marginalized disability groups, should be prioritized. Inclusivity in OPDs involves democratic decision-making and actively involving underrepresented groups. Emphasizing intersectionality, and addressing unique challenges faced by women, ethnic minorities, and young persons with disabilities will ensure comprehensive policy-making.

**Gender equality**

In Serbia, women, especially those with disabilities, face significant disparities compared to men. The COVID-19 pandemic in 2020 further exacerbated their condition. A survey found that 71.5% of women with disabilities felt the government’s measures did not cater to their needs, adversely impacting their health care, mobility, and financial stability. They are also underrepresented in leadership roles in OPDs and NGOs.

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153 Beker, K., Janjic, B., Covid-19 measures and social and economic rights of women with disabilities in Serbia, Out of Circle Belgrade & FemPlatz, 2021
Violence against women is a grave concern; over 10% face violence in some form. Alarmingly, women with disabilities experience it at a higher rate (23.4%). They are also more vulnerable to violence from caregivers and institutional staff. Mainstream and specialized services remain inaccessible, including shelters and crisis centers. Although the 2021-2025 Strategy for countering gender-based violence acknowledges women with disabilities as particularly vulnerable and suggests protective measures, the lack of a subsequent action plan renders it ineffective.

Organizations "Out of Circle" – a network of organizations of women with disabilities across Serbia, provides direct support to women victims of violence (helpline, psychological counselling, legal counselling) and all services are accessible. Out of Circle Vojvodina produced *Guidelines for working with women with different types of disabilities who have survived violence*, and a set of protocols for relevant authorities (police, centers for social work, health care workers, and service providers) in cases of violence against women. It also works on the research and advocacy for disability perspective in gender policies and gender perspective in disability policies, works on empowering women with disabilities for advocacy and without their work, women with disabilities would not be represented. “Out of Circle – Vojvodina” signed and promoted a Feminist Accessibility Protocol. The Network is also a member of NOOIS and a member of the Network Women against Violence.

The efforts of organizations like FemPlatz and MDRI-S led to specific recommendations from the Council of Europe’s GREVIO Group, emphasizing the importance of guaranteeing the right to informed medical consent for women with disabilities. As another good practice example, in the period between 2017 and 2022, MDRI-S worked on creating a self-advocacy group of women with intellectual disabilities with experience of institutionalization, who produced and submitted their own shadow report to the Committee on Torture, participated in the proposals for the 2021-2025 Strategy for combating gender-based violence against women and domestic violence, organized training and online support service during Covid-19, and produced easy to read material about the protection from violence.

Concerning family rights, prejudices exist about the capability of women with disabilities to become mothers, leading to cases of unjust parental custody removal. Although

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154 The Report on progress in achieving the 2030 Sustainable Development Goals the Republic of Serbia
155 Beker, K., Milosevic, T., Violence against Women with Disabilities in Residential Institutions, MDRI-S, 2017
160 Practice of the Commissioner for Protection of Equality shows several examples
Serbia’s National Disability Strategy recognizes this violation and proposes supportive measures, the 2021-2022 Action plan shows no notable implementations.

Shelters for women facing violence fall short in accessibility standards, both architecturally and informationally. Many lack the knowledge to adequately support women with disabilities, particularly those with intellectual impairments. Crisis centers for victims of sexual violence in Vojvodina show similar shortcomings in accessibility. Despite available guidelines and training on supporting women with disabilities, the infrastructure, including medical equipment, and informational support, like sign language interpreters or Braille, is often lacking.

To conclude, women with disabilities in Serbia are in a precarious situation, with systems failing to provide adequate support, protection, and accessibility. While organizations like “Out of Circle” strive to bridge these gaps, more comprehensive and structured government interventions are imperative.

Section 8 - Disability inclusion in national planning

In June 2023, Serbia adopted a decree for the National Development Plan, marking its first overarching sustainable development strategy since 2008. To uphold the Leave No One Behind (LNOB) principle, extensive consultations are planned, although no OPDs participated in the decree’s consultation. UN agencies collaborate with the government to ensure the plan aligns with national SDGs and EU accession processes. Vojvodina’s 2023-2030 Development Plan emphasizes disability in relation to several SDGs (4, 5, 7, 8, 10 and 11).

In 2022, led by the UN Human Rights Team and partnered with the Ministry of Human and Minority Rights and Social Dialogue, an LNOB tool was introduced. This tool facilitates the inclusive development and implementation of legislative and strategic acts, promoting equality in Serbia.

Serbia’s 2019 Voluntary National Review barely discussed disability inclusion. The subsequent review has been delayed, largely due to political instability post-pandemic. With the 2024 elections approaching, the next review might be postponed. However, Local National Reviews could aid SDG monitoring, with several Serbian municipalities initiating this process. UN agencies consider supporting these efforts financially.

The UN Serbia Common Country Analyses (CCA), completed in 2021, incorporated post-Covid challenges and opportunities. Recognized as exemplary, the CCA offers a comprehensive view of Serbia’s human rights and anti-discrimination frameworks. It underscores gaps in Serbia’s legal system, particularly affecting vulnerable groups’ rights to housing, food, and water. The analysis also examines independent institutions’ autonomy, like the Ombudsperson and the Commissioner for Equality Protection. The CCA’s LNOB section deeply investigates the challenges faced by persons with disabilities, especially those facing multiple discriminations.

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161 Beker, K., Milosevic, T., Covic, A., Shelters for women victims of violence: capacities for accessible and available services for women with disabilities, FemPlatz & MDRI-S, 2020
The outcome and output indicators of the UN Cooperation Framework are disaggregated by disability, gender and age where possible. Two of our three strategic priorities (Strategic Priority 2 - Placing well-being, social equity and human potential at the centre of systems, policies and practices, Strategic Priority 3 - Building trust and mutual accountability through the rule of law, the rights and duties agenda) and their outcomes (Outcome 1.3, Outcome 2.1, Outcome 2.2, Outcome 2.3, Outcome 3.1) specifically focus on persons with disabilities, with targets and measurable indicators related to persons with disabilities. Examples include i/ tracking the percentage of districts (or similar administrative units) with health facilities providing standard early intervention services for children under 5 with developmental risks, delays or disabilities, and a number of districts that have piloted, evaluated and costed for scale-up a youth-friendly mental health service package sensitive to gender, disability and minority groups; ii/ monitoring a number of municipalities participating in the activities of the Women with Disabilities Network for Sexual and Reproductive Health to enable equal access to economic and political opportunities; iii/ strengthening the capacity and monitoring the performance of the National Reporting and Follow-up Mechanism, mandated to coordinate and prepare reports to and engage with international and regional human rights mechanisms.

Disaster risk reduction
The key legislation in this area is the Law on disaster risk reduction and emergency situations management which, among other provisions, relies on the principle of equality and protection of human rights and takes disability into consideration in so far as it envisages accessibility of measures and activities related to disaster risk reduction. There is a comprehensive disaster risk assessment in the Republic of Serbia, produced by the Ministry of Internal Affairs in 2018, which recognizes persons with disabilities as one of the at-risk groups in situations of disasters and emergencies. The National Disaster Risk Management Program and accompanied 2016-2020 Action Plan for the period 2016 to 2020, in the component for early warning and preparedness recognizes that there is a need to empower women and persons with disabilities to publicly lead and promote gender equitable and universally accessible response, recovery rehabilitation and reconstruction approaches. In addition, the plan defines the need to establish and regularly update ‘the vulnerable population database (children, youth, women, persons with disabilities and older persons) by designing a system/register of persons specifically affected by disaster or any other hazard. No follow-up report on the implementation of this measure is publicly available.

The Department for Emergency Situations within the Ministry of Internal Affairs, in cooperation with the OSCE Mission to Serbia, prepared the Family Manual for Behavior in Emergency Situations, and the accessible and adapted formats were developed in cooperation with NOOIS (in audio format, Braille, and it is available online).

162 Details of the UN Cooperation Framework are explained under section , International Cooperation
164 it addresses the Priority for Action 4 of the Sendai Framework for Disaster Risk Reduction 2015-2030: Enhancing preparedness for effective response and building back better in recovery and reconstruction.
165 Specific objective 2 (consolidated system for disaster risk identification, assessment and monitoring)
166 The material can be accessed here https://www.youtube.com/watch?v=pOJ7clqLbg [&list=PLL13BHAlJydtySLowKQGEpFZnEHMANBq].

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cooperation with NOOIS, there were six workshops and round tables on DDR and persons with disabilities, and the main conclusions included: recognition of persons with disabilities in assessments and risk reduction plans and protection and rescue plans, regulations and strategic documents; improving cooperation with the headquarters for emergency situations in local self-governments through the appointment of civil protection commissioners. One of the main recommendations from OPDs is the introduction of a national call centre and a mobile application in order to provide early warning in real-time in different formats (audio, video, and sign language).

In 2022, a Service for supporting mobility and communication prepared and presented a Manual for supporting persons with disabilities in residential buildings in the cases of disasters: earthquakes and fires. The aim of the manual is to provide information to the managers of the residential buildings and further communications and training are planned for the following period.

In 2019, Serbia adopted a National Strategy for Sustainable Urban Development until 2030 and a 2021-2022 Action Plan for its implementation. In the section on providing measures for social inclusion and poverty reduction in urban areas, there are measures to improve access and expansion of the network of local support services with a special emphasis on the inclusion of the young, older people, women, and persons with disabilities, as well as to ensure accessibility. The strategy recognizes that one of the threats is a lack of national funding for the programs of social inclusion and poverty reduction. However, the action plan does not mention persons with disabilities or accessibility.

Climate change

The European Commission Annual 2022 progress report on Serbia states that Serbia has some level of preparation for climate change, but implementation is at a very early stage. Following the adoption of the Law on climate change in March 2021, Serbia adopted only a few pieces of implementing legislation necessary to enable the implementation of the law. The Climate Strategy and Action Plan have still not been adopted. Although there is information about the strategy development process being inclusive and participatory, there is no mention of the inclusion of persons with disabilities and their respective organisations in this process. The Integrated National Climate and Energy Plan in Serbia is under development, however, it does not have any disability considerations.

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168 Report on the implementation of the 2021-2022 Action plan for the implementation of the Strategy for the Improvement of Status of Persons with Disabilities


170 a joint program of inter-municipal cooperation between the cities of Belgrade, Novi Sad, city municipality Vracar and city municipality Savski venac; Information on the Service for supporting mobility and communication is available here [http://www.servispodrske.rs/](http://www.servispodrske.rs/)


172 Official Gazette of the Republic of Serbia, no. 47/2019

173 Official Gazette of the Republic of Serbia, no. 28/2021

The unfavourable consequences of climate change especially affect the poorest, rural areas in Serbia, which accelerates the depopulation processes, and this is especially the case with the least developed region of Southern and Eastern Serbia, covering a third of the country’s territory and facing pronounced depopulation trends. Persons with disabilities are recognized as particularly vulnerable to climate-related threats to public health.175

COVID-19 recovery plans

Serbia’s response to the COVID-19 pandemic was fragmented, comprising various regulations and decrees across sectors, making a holistic analysis challenging. Most decisions bypassed civil society consultations, often overlooking the specific needs of vulnerable populations. Reports indicate that the state’s strategic response lacked inclusivity, particularly neglecting persons with disabilities in initial measures.176 Only after significant advocacy from OPDs, CSOs, and human rights institutions did the government revise its approach to cater to their needs.177 In 2020, the UN in Serbia developed a COVID-19 Socio-Economic Response Plan, offering comprehensive recommendations for supporting persons with disabilities.178

Healthcare procedures for persons with disabilities and accompanying measures for children with disabilities were belated and convoluted. Most individuals in residential institutions received treatment within those establishments rather than hospitals, and data regarding infection rates and outcomes for this group remain unclear.179 However, the vaccine rollout prioritized persons with disabilities and those in residential institutions. While the government implemented cash transfers to mitigate the pandemic’s economic impacts, these were uniform, lacking targeted support for the most vulnerable.180

Despite the immediate challenges, Serbia has not introduced a thorough post-pandemic recovery strategy or provisions for potential future crises. There is a “Programme of Economic Measures to Mitigate the Negative Effects Caused by the COVID-19 Pandemic and Support the Serbian Economy in 2020 and 2021” but the plans and enhancing the

175 National Human Development Report – Serbia 2022, Human Development in Response to Demographic Change, chapter on environment, climate change and depopulation in Serbia, UNDP
177 Beker, K., Janjic, B., Report on the covid-19 measures and social and economic rights of women with disabilities in Serbia, 2021
178 COVID-19 Socio-Economic Recovery Plan, United Nations Serbia, October 2020
179 Lazarevic, S., Residential social welfare institutions for children and adults with disabilities during covid-19 pandemics in Serbia 2020-2021, MDRI-S, 2022
180 Serbia 2022 Report, European Commission, Brussels 12.10.2022, SWD(2022) 338
181 Macroeconomic Developments in Serbia, National Bank of Serbia, July 2023
country’s resilience would be almost impossible without international programs. The EU support is provided here in three pillars 1) competitiveness and economy, 2) the environment, and 3) good governance under IPA multi-country and regional programs.

### Summary of key gaps and challenges

Strategic documents recognize persons with disabilities as an at-risk group in disaster and emergency management, sustainable urban development, climate change, covid-19 recovery plans, but crucial action plans and implementation programs are lacking. There is a lack of capacities of professionals in the area of DRR and climate change regarding the rights of persons with disabilities, which leads to a lack of appropriate measures in the action plans, and implementation of concrete activities, but also a lack of monitoring mechanisms. There is no systemic measure to engage OPDs to implement the activities and programs in these areas, which is important for a participatory and inclusive approach. the capacities, sustainability, and funding need to be provided to OPDs. The National Sustainable Development Strategy currently does not exist which prevents proper monitoring of SDGs advancement in the country. Country-specific SDGs targets and indicators have not been developed yet. There is a limited interest in the Government to proceed with Voluntary National Review at regular intervals due to competing priorities related to the EU accession agenda. Serbia’s efforts in these areas are relatively new and fragile as they depend greatly on international support and the EU pre-accession process.

### Analysis of critical gaps and opportunities

Almost 15 years after the ratification of the CRPD, Serbia struggles with its implementation, while seven years after receiving the concluding observations from the CRPD Committee, only a few recommendations have been fully implemented. One of the key systemic challenges relates to the inadequate understanding and application of the social inclusion, participation, and human-rights approach to the implementation of the CRPD by the state structures and professionals. This is manifested in two ways: 1) in the outdated and discriminatory legislation, which is based on the medical and charity model of disability, where persons with disabilities are treated as beneficiaries and not as duty holders and agents of change, 2) in planning, monitoring and funding for disability policies.

An example of discriminatory legislation is the Family law and deprivation of legal capacity based on disability, which is still defined by the law and prevalent in practice, especially for persons with intellectual and psychosocial impairments. The changes of this law were defined as an activity in the 2021-2022 Action plan for the implementation of the Strategy for the Improvement of Status of Persons with Disabilities (not implemented), but the approach to reforming this area is flawed. Firstly, the law itself should be changed and then the selection of strategic activities to reform the practice and provide knowledge about the supported decision-making should be planned. Policy documents cannot change systemic laws, it should be vice versa. In addition, when the laws are not harmonized with CRPD, the whole set of by-laws, operating procedures, and programs are inadequate. The lack of recognition of denial of reasonable accommodation as a specific form of disability-based discrimination in Serbian anti-discrimination law is
another stark example of inadequate legislation that has widespread consequences for rights enjoyment across multiple domains of life.

Even when social inclusion, equal participation, and a human-rights approach to disability are clearly stated in laws and policies, their practical application is missing. For example, the provision of local support services regulated by the social protection legislation was intended to bring decentralization of services, improved service delivery standard through licensing, diversification of service providers, deinstitutionalization and community living. However, restrictive and discriminatory eligibility criteria for access to community-based and independent living services and the lack of investments in those services coupled with the political orientation of the state authorities to invest in institutionalization and different forms of sheltered services practically lead to the exclusion of persons with disabilities and makes the reform process ineffective. In the field of employment, the work capacity assessment, although designed with the purpose to support persons with disabilities to access the labour market, often results in discriminatory exclusion from the sphere of work. Active labour market measures intended to enhance employment prospects for persons with disabilities are often ineffective and need to be redesigned to achieve their purpose.

Disability assessment and disability referral systems are also highly rooted in the medical approach and not compliant with the CRPD provisions, and since the assessment is the first step in accessing rights and supports, the whole support system is then not responsive to the needs and human rights of persons with disabilities. The procedures rely on medicalized criteria and the assessment of the ‘degree of impairment’ and not on the level of needed support. Different assessment systems and procedures are not interconnected and coordinated. Such practices lead to effectively denying access to rights to persons with disabilities on an equal basis with others in different areas. It is therefore difficult to work on improving specific areas of life when the initial assessment procedures are flawed.

Even when the legislation and policies are harmonized with CRPD, access to rights directly depends on the economic and social development of the regions and the local self-governments. In practice, the system of provision of needed services from the local self-government where 90 local self-governments (out of 160) are classified as underdeveloped and devastated with only a few or no community living services leads to dependence of persons with disabilities on the social welfare and pension systems. The lack of sustainable local support services seriously hampers community living, deinstitutionalization, and inclusive education. Analysis of the disability-specific funding shows that even when the nominal amount of funds for different services is increased, the number of service users has decreased or stayed the same for years. The system is based on allocating a certain amount of money from the budget for service delivery and not on the actual needs of persons with disabilities. In addition, there is a serious lack of transparency of the allocated funds in terms of the evaluation of the quality of services and the effectiveness of measures.

These structural barriers thus put persons with disabilities in beneficiary status and in the constant circle of poverty and social exclusion. Overall, while the key root causes of exclusion and inequality of persons with disabilities might have been tackled in some legislation and policies, the practical arrangements for access to rights have not been developed and implemented due to insufficient capacities of the system. Lack of
capacities and authority is also visible among professionals the institutional structures mandated for the protection and fulfilment of human rights of persons with disabilities and a lack of mechanisms for multi-sectoral cooperation.

As far as the disability movement is concerned, the majority of ‘traditional’ organizations are organized around the ‘sameness’ of impairment rather than the common struggle for human rights and solidarity across different impairment groups. While at the national level OPDs have formed national umbrella associations, at the local level there is a lack of joint forums for dialogue between OPDs representing different impairment groups. There is a need to create meaningful opportunities for the active participation of OPD members in disability advocacy and strengthen democratic procedures and practices within the OPDs so to ensure the mobilization of passive members for disability activism and advocacy. Investments into capacity-building programs for OPDs in the fields of organisational planning, communication with members and their mobilization, evidence-based advocacy and campaigning, data collection and intersectionality are crucial to ensure their sustainability, mobilization of members including those from underrepresented groups and better influence on policy-making processes.

The opportunities for interventions can be sought in the already harmonized legislation by strengthening the structures and interventions, through establishing monitoring and impact assessment mechanisms and investing in the capacity of OPDs, persons with disabilities, and key institutions. As climate change, DRR, and development plans are relatively new and recognize persons with disabilities as an at-risk group, there is an opportunity to influence the process of planning concrete activities and interventions for the realization of their rights.

Introduced mechanisms in other areas can be tested and implemented on disability rights also. For example, gender-responsive budgeting is a tool introduced at all levels of government and it can be used to assess the effectiveness of funding for women with disabilities or develop a tool for disability-responsive budgeting.

There is a need for further research in the realization of the specific rights of persons with disabilities, most notably economic and social rights including employment, health, and access to assistive technologies and support services, but also comprehensive research that examines all disability assessments and referral systems and how they affect the realization of human rights of persons with disabilities. Reliable and up-to-date data about this area could produce discussions about the systemic changes in this area. In addition, comprehensive research into the budgetary allocations for disability-specific programs, their spending, effectiveness, and efficiency should be implemented. The proposed research should take into account gender equality and the position of marginalised groups of persons with disabilities.

Key recommendations

The recommendations are proposed in response to key gaps and challenges identified across all sections of the findings presented in this situational analysis. Further on, they are aligned with the recommendations enshrined in the Concluding Observations that the CRPD Committee directed to the Republic of Serbia in 2016. These recommendations aim
to provide direction in which all stakeholders need to act concertedly in order to improve the levels of enjoyment of human rights for persons with disabilities.

Each of the recommendations contains a proposal for UNCT actions to be undertaken with a view to accelerating their implementation.

1. The Government’s Council for Persons with Disabilities as a coordination mechanism under CRPD Article 33 applies a systemic approach in planning, budgeting and monitoring of the CRPD recommendations, and enhance the visibility and transparency of its operations.

To accelerate the implementation of this recommendation UNCT could:
- Support the Disability Council to develop an operational plan for accessibility in Serbia and actively involve OPDs in the process of designing, monitoring, and evaluating the measures.
- Support the Disability Council to establish a catalogue of legislation and policies that need to be harmonized with the CRPD to ensure non-discrimination and equality of persons with disabilities.
- Provide technical support to the Disability Council to develop its working methods, especially planning, budgeting and transparent reporting.
- Provide capacity development for the members of the Governments Council for persons with disabilities to enable disability mainstreaming in national development plans.

2. The functional system of disability focal points is established at all levels of the Government to support the implementation of CRPD including disability mainstreaming in line with Article 33 of CRPD.

To accelerate the implementation of this recommendation UNCT could:
- Support the establishment of disability focal points in the Ministries, including formulation of their terms of reference and mandates.
- Capacity development of the decision-makers and designated disability focal points to be able to implement their duties.
- Provide targeted analysis in selected ministries on CRPD obligations.

3. The independent national monitoring framework is established by the Ombudsman Office in line with the CRPD Article 33 and the Law on Ombudsman.

To accelerate the implementation of this recommendation UNCT could:
- Provide technical assistance to establish transparent procedures and recruitment criteria for its members in consultation with representative OPDs;
- Provide capacity building to members of the independent monitoring mechanism on human rights monitoring methodology.

4. Improve inclusive data collection on persons with disabilities across different administrative systems.

To accelerate the implementation of this recommendation UNCT could:
Use its role in the SDG platform to request disability disaggregated data from supported programmes.

UNCT could provide technical and financial support to strengthen data collection and foster data exchange between different systems of data collection to gather inclusive disability data including disaggregated data associated with SDGs indicators.

5. Disability assessment system is reviewed, and a roadmap is developed to reform the disability assessment methodologies and procedures across different sectors in line with the human rights approach to disability.

To accelerate the implementation of this recommendation UNCT could:

- Conduct an in-depth analysis of all disability assessments and referral mechanisms across different sectors to assess their influence on access to rights in various areas across the life cycle, such as social services and benefits, pensions, assistive technologies, education, and employment.
- Based on the analysis, open public and professional discussions about the importance of reforming the system and propose the roadmap for reform, including developing a common disability assessment framework to enable its interconnectedness.
- Develop a roadmap for reforming the procedures of disability assessments, with a focus on work capacity assessment in order to move away from the medicalization of assessments towards the assessments of access and support needs of persons with disabilities in partnership with the National Employment Service, the Ministry of Labour, Employment, Veteran and Social Affairs and the Republic Fund for Pension and Disability Insurance.
- Build the capacity of disability assessors to apply a human rights approach to disability assessments in partnership with the Republic Fund for Pension and Disability Insurance.

6. Anti-discrimination legislation is amended in the line with CRPD Article 5 to recognize a denial of reasonable accommodation as a specific form of disability-based discrimination and operationalised by the justice system and independent human rights institutions (Ombudsman Office and Commissioner for Equality Protection).

To accelerate the implementation of this recommendation UNCT could:

- Provide technical support to the Ministry of Human Rights and Social Dialogue to review existing anti-discrimination legislation and draft amendments.
- Provide capacity-building programs for judges and staff of the Commissioner for Protection of Equality on reasonable accommodations and disability-based discrimination.
- Support the Commissioner for the Protection of Equality to develop special report on disability based discrimination, including intersectionality and denial of reasonable accommodation.
- Build capacities of OPDs to use available complaint mechanisms for human rights violations and discrimination based on disability and gender, through providing training, manuals, and practical application of the skills.
- Provide capacity-building programs for OPDs in the field of rights of women and girls with disabilities, intersectionality, public campaigning, mobilization of members for disability activism including ones from underrepresented groups and evidence-based advocacy.

- Strengthen monitoring and complaint mechanisms to ensure compliance with accessibility standards and address any violations or barriers faced by persons with disabilities.

7. Improve availability and coverage of community-based support services including independent living services by reviewing and revising national and local social protection policies according to identified needs.

To accelerate the implementation of this recommendation UNCT could:

- Provide technical assistance to the Ministry of Labour, Employment, Veteran and Social Affairs to review the bylaw “Rulebook on minimal standards for social service provision” and draft amendments proposal with a view to eliminate discriminatory provisions such as “capacity for independent reasoning” as an eligibility criteria for personal assistance service.

- Build the capacity of professionals and service providers for inclusive service delivery to ensure equal treatment and non-discrimination in all (mainstream and local) services provided to persons with disabilities with a focus on independent living services such as personal assistance.

- Build capacities of local OPDs for advocacy for independent living services.

- Provide technical assistance to selected sample of municipalities to adopt local disability policies and establish eligibility criteria for social services with a focus on independent living services.

- Pilot new services or existing services for new target groups (e.g. services for women and girls with disabilities, PA services for people with intellectual impairments or young people in transitioning period from adolescence to adulthood).

- Open discussions with professionals, the Government and the OPDs about the introduction of support services, especially for persons with disabilities from the most marginalised groups (persons with intellectual impairment, persons with psychosocial impairment, women and girls, children and young people, people placed in residential institutions) through the mechanism of social dialogue in partnership with the Ministry for Human and Minority Rights and Social Dialogue and the Ministry of Labour, Employment, Veteran and Social Affairs.

- Strengthen the system of intersectoral family-oriented early childhood intervention to support timely identification of needs for support and inclusion from early years.

8. Resource allocation systems take into the account disability perspective and include OPDs in budgetary planning and monitoring with a view to ensure transparent CRPD-compliant budgeting.

To accelerate the implementation of this recommendation UNCT could:
- Provide technical assistance to the Government to conduct an in-depth analysis of the budgetary allocations for disability-specific programs and services.

- Support the Ministry of Labour, Employment, Veteran and Social Affairs to review and revise the relevant policies related to functioning of the Budgetary Fund for Professional Rehabilitation and Employment of persons with disabilities to enhance transparency, and improve efficiency and increase funds allocated to support services for persons with disabilities in the open labour market.

- Produce guidelines for CRPD-compliant budgeting that could be used at different levels of the government to identify, plan and monitor budgets for disability in mainstream systems.

9. UN Sustainable Development Cooperation Framework (UNSDCF) and Common Country Analysis (CCA) take into account the disability perspective.

To accelerate the implementation of this recommendation UNCT could:

- Establish national development coordination mechanisms and accountability frameworks, around UNSCDF and CCA that systematically and meaningfully engage with OPDs.

- Build capacities of OPDs to engage with these frameworks, understand the SDG/UNSCDF/CCA and CRPD intersection, and represent the diversity of the disability movement.

- Support OPDs’ active participation and advocacy for disability-specific measures and interventions in national development plans.
Annex 1: Guide for focused group discussions

- Introduce yourself.
- Briefly describe the research project and explain the objective of the focus group discussion.
- Emphasize that the obtained data will be used only for research purposes and that participation is voluntary and confidential (that only the researcher knows the data about the participants of the focus group, that the names of the participants will not be mentioned in the study, nor that any other information which could reveal their identity).
- Request permission to record.
- Provide an opportunity for participants to ask questions.
- Submit the recording and transcript of the focus group discussion and the completed questionnaire for each participant.
- At the end of the discussion, thank the participants for their time and willingness to participate and ask them to fill out a demographic data sheet.

Good afternoon, my name is __________ (name and surname). I am participating in the preparation of a situational analysis on the position of persons with disabilities in Serbia. This process is led by the organization FemPlatz, supported by UN Women in Serbia. We gathered here to discuss the position of persons with disabilities in Serbia, the realization of their rights, and the role of organizations of persons with disabilities. Your observations, views, and comments will be valuable for the analysis of the current situation but will also be a good basis for creating guidelines to overcome the observed problems. We organized this focus group with that goal in mind. My role is to lead this discussion by openly discussing your knowledge and experiences regarding the position of persons with disabilities in Serbia.

I would like to ask for your permission to record this conversation. Anything you say will be used for research purposes only. Before we start, I would like to state a few rules about the way we work (mobile phones, we listen to each other...) Each of you should participate in the conversation. All your views are equally valid or correct.

Thank you for your participation!

INFORMATION ABOUT THE FOCUS GROUP

Where and when was it held?

Number of focus group participants __________

Where do the participants come from ______________

FOCUS GROUP QUESTIONS/TOPICS

Disabled Persons Organizations: Capacities, Participation, Representation
To what extent do the relevant institutions include OPDs in the processes of creating policies, laws, and programs that affect their lives? Here we can talk about policies/programs at the local, provincial, and national levels (for example, local action plans, strategies and action plans, new decisions, changes to laws)

How do you assess the quality of involvement in all policy-making phases (policy making, public discussions, possibility of commenting and changes, implementation of public policies)?

How do you assess the capacities of OPDs to represent the rights of persons with disabilities? Are they representative and do you think they adequately advocate for your rights and interests?

What are the advantages and what are the challenges for OPDs in advocating for the rights of persons with disabilities?

To what extent do OPDs practice the principles of democracy, participation of all members, equality in decision-making? What are the processes within the organization that enable the equal participation of all members, how does the organization mobilize the wider membership for important issues, how does the organization inform the membership about important processes and policies in the field of rights of persons with disabilities?

Accessibility: what are the key gaps in ensuring accessibility in Serbia?

Services: what are the key gaps in the provision of general and specialized support services for persons with disabilities?

What do you think needs to be changed in order to overcome the shortcomings you mentioned earlier?

*Get the participants to look at least two priority areas: deinstitutionalization, legal capacity recognition, disability assessment, social protection, health, education, employment, justice.*

*Pay attention to the fact that there are particularly sensitive and marginalized groups of persons with disabilities (women, ethnic minorities, children, young people) and make sure that the participants reflect on their position as much as possible.*

## Annex 2: Consent and demographic data

I understand that the collected data will be used for the preparation of a situational analysis on the position of persons with disabilities in Serbia, which is being carried out by the organization FemPlatz, with the support of UN Women.

I understand that my participation is completely voluntary, and that if I do not want to answer a certain question or questions, I am free to refuse.

I agree that the information I presented can be used for the preparation of a situational analysis of the position of persons with disabilities in Serbia.

I agree that the focus group can be recorded, and the audio recording can be used exclusively for the purpose of analysis. The data will be available only to researchers who will take all measures to protect the information from unauthorized use.
I understand that data collected from me may be stored and used in this or future research in anonymous form.

I give my consent to participate in the focus group.

Name and surname (printed letters):

Birth Year:

Sex: M F

Are you a member of or working in an organization of persons with disabilities:
YES NO

If you are employed in an organization of persons with disabilities, in which position do you work:

Are you a person with a disability or are you participating as a family member of a person with a disability (e.g. a parent):
YES NO

If the answer to the previous question is yes, choose everything that applies to you (or your disabled family member):

- Blindness or other visual impairment that cannot be corrected with glasses;
- Deaf or hard of hearing;
- Developmental disability that I have had since childhood, which affects motor, cognitive, social, emotional skills or speech;
- Learning difficulties such as dyslexia, dyspraxia or ADHD (attention deficit disorder);
- Long-term illness or medical condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy;
- Mental health problems such as depression, schizophrenia, anxiety, etc.
- Physical impairment that significantly limits one or more basic physical activities such as walking, climbing stairs, or carrying things;
- Social-communication difficulties such as speech impairment or a condition on the autism spectrum;
- Health condition or impairment not specified:
- I don't want to answer

Signature: __________________________ Date: ___________________
Annex 3: Guide for in-depth interview

Situational analysis of the position of persons with disabilities in Serbia (SitAn)

Guide to the in-depth interview

- Introduce yourself.
- Briefly describe the research project and explain the objective of data collection.
- Emphasize that the obtained data will be used only for research purposes and that participation is voluntary and confidential.
- Request permission to record.
- Give the interlocutor the opportunity to ask questions.
- Adjust the approach and questions in relation to the institution/organization from which the respondent is.

Good afternoon, my name is (name and surname). I am participating in the preparation of a situational analysis on the position of persons with disabilities in Serbia, and the preparation process is led by the organization FemPlatz, with the support of UN Women in Serbia. We will discuss the position of persons with disabilities in Serbia, the exercise of their rights and the role of various institutions in protecting the rights of persons with disabilities. Your observations, views, and comments will be valuable for the analysis of the current situation, but will also be a good basis for creating guidelines to overcome the observed problems. I would like to ask for your permission to record this conversation. Anything you say will be used for research purposes only.

Framework questions for the interview, which the expert adapts and supplements in relation to the interlocutor, i.e. the competences and role of the institution she/he represents:

1. How do you assess the capacities of the institutions of the system in ensuring the realization of the rights of persons with disabilities? In terms of knowledge, expertise, material and human resources, financial resources for exercising rights in accordance with the Convention on the Rights of Persons with Disabilities.

2. In your opinion, what are the biggest challenges and difficulties in the practical implementation of obligations and standards assumed by the Convention on the Rights of Persons with Disabilities and other key international agreements? In terms of the gaps/differences between the rights guaranteed by the laws and the practical application/access to the rights in the daily life of persons with disabilities.

3. The institution you represent plays a significant role in monitoring and providing exercise of the rights of persons with disabilities in Serbia. From your previous work, what are the most common areas of violation of the rights of persons with disabilities? Areas that can be discussed: equality, accessibility, inclusive service delivery, budgeting for participation programs and inclusion of persons with disabilities.

4. How do you assess Serbia's progress in providing accessible, affordable, and quality services in the field of social protection, health care, employment, education, access to justice, reducing the risk of poverty, managing risks in emergency situations? Adapt the
areas (it is not necessary to discuss each) to the interlocutor in relation to the competence of the institution he/she represents.

5. How do you assess the participation of persons with disabilities and representative organizations in the processes of drafting public policies and programs important for the realization of the rights of persons with disabilities? Do you think they are adequately included and represented in all processes that concern their lives?

6. What, in your opinion, are the three priority areas that should be worked on in the next period in order to improve respect for the rights of persons with disabilities, especially those from the most sensitive social groups?

Annex 4: Online survey for persons with disabilities

**Online questionnaire for people with disabilities**

FemPlatz is conducting a situational analysis of the position of persons with disabilities in Serbia, with the support of UN Women, in order to look at the biggest obstacles in realizing the rights of persons with disabilities and make recommendations for improvement.

Your opinion is important to us in this process. Please fill out this questionnaire and participate in providing a clearer picture of the position of persons with disabilities in Serbia.

The questionnaire is anonymous, and we do not collect your personal data in any way. Your answers will be analysed and presented in the final study.

Thank you very much for your cooperation and support!

Demographic characteristics:

1. Sex/gender:
   a) female
   b) male
   c) other

2. Age
   a) 18 - 30
   b) 31-40
   c) 41-50
   d) 51-65
   e) over 65

3. Education
1. Education:
   a) No education
   b) Primary education
   c) Secondary education
   d) Higher (university) education

4. Place of residence:
   a) City
   b) Village
   c) Other (e.g. institution)

5. Activity:
   a) Student
   b) Employed
   c) Unemployed
   d) Retired
   e) Farmer
   f) Something else (write)

6. Asset assessment:
   a) Very bad
   b) Bad
   c) Average
   d) Above average
   e) Very good

7. Are you a member of an organization of persons with disabilities or do you work in it:
   a) YES
   b) NO

8. If you are employed in an organization of persons with disabilities, in which position do you work:

9. Are you a person with disabilities or participate as a family member of a disabled person (e.g. a parent):
   a) A person with a disability
b) A family member of a disabled person

10. Choose everything that applies to you (or your disabled family member):

a) Blindness or other visual impairment that cannot be corrected with glasses;

b) Deaf or hard of hearing;

c) Developmental disability that I have had since childhood, which affects motor, cognitive, social, emotional skills or speech;

d) Learning difficulties such as dyslexia, dyspraxia or ADHD (attention deficit disorder);

e) Long-term illness or medical condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy;

f) Mental health problems such as depression, schizophrenia, anxiety, etc.

g) Physical impairment that significantly limits one or more basic physical activities such as walking, climbing stairs or carrying things;

h) Social-communication difficulties such as speech impairment or a condition on the autism spectrum;

i) Health condition or impairment not specified:

j) I don't want to answer

The position of persons with disabilities in Serbia

10. The position of persons with disabilities has been improved in Serbia in the past ten years.

Rate how much you agree with this statement on a scale of 1 (strongly disagree), 2 (disagree), 3 (don't know), 4 (agree), 5 (strongly agree)

1  2  3  4  5

11. Relevant institutions respond adequately to the needs of persons with disabilities in Serbia. Rate how much you agree with this statement on a scale of 1 (strongly disagree), 2 (disagree), 3 (don't know), 4 (agree), 5 (strongly agree)

1  2  3  4  5

12. Organizations of persons with disabilities are representative and adequately represent my rights and interests.

Rate how much you agree with this statement on a scale of 1 (strongly disagree), 2 (disagree), 3 (don't know), 4 (agree), 5 (strongly agree)

1  2  3  4  5

13. Organizations of persons with disabilities practice the principles of democracy, participation of all members, equality in decision-making.

Rate how much you agree with this statement on a scale of 1 (strongly disagree), 2 (disagree), 3 (don't know), 4 (agree), 5 (strongly agree)
14. Mark three areas in which you believe that the rights of persons with disabilities are most threatened in Serbia:

a) Health care  
b) Social protection  
c) Housing  
d) Employment  
e) Mobility and movement  
f) Providing financial resources for life  
g) Family protection  
h) Access to justice  
i) Information  
j) Education  
k) Something else (specify what)

15. If you wish, you can clarify the answer to the previous question:

16. In your opinion, what are the three priority areas that should be worked on in the next period in order to improve the position of persons with disabilities in Serbia?

17. If you want to add, comment, or suggest something, feel free to write:

Annex 5: Number of focus groups participants by city, affiliation, and gender

<table>
<thead>
<tr>
<th>Focus group</th>
<th>Persons with disabilities</th>
<th>Parents of children with disabilities</th>
<th>Other (expert associates, mentors, employees, etc)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No. of women</td>
<td>No. of men</td>
<td>No. of women</td>
<td>No. of men</td>
</tr>
<tr>
<td>Novi Sad</td>
<td>11</td>
<td>/</td>
<td>1</td>
<td>/</td>
</tr>
<tr>
<td>Zajecar</td>
<td>8</td>
<td>1</td>
<td>/</td>
<td>/</td>
</tr>
<tr>
<td>Nis</td>
<td>8</td>
<td>2</td>
<td>/</td>
<td>/</td>
</tr>
<tr>
<td>Belgrade</td>
<td>7</td>
<td>1</td>
<td>4</td>
<td>/</td>
</tr>
<tr>
<td>Total</td>
<td>34</td>
<td>4</td>
<td>4</td>
<td>/</td>
</tr>
</tbody>
</table>

Annex 6: Self-identification of the type of impairment of focus group participants
<table>
<thead>
<tr>
<th>Type of impairment</th>
<th>No. of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blindness or other visual impairment that cannot be corrected with glasses</td>
<td>1</td>
</tr>
<tr>
<td>Deaf or hard of hearing</td>
<td>2</td>
</tr>
<tr>
<td>Developmental disability that I have had since childhood, which affects motor, cognitive, social, emotional skills or speech</td>
<td>12</td>
</tr>
<tr>
<td>Learning difficulties such as dyslexia, dyspraxia or ADHD (attention deficit disorder)</td>
<td>1</td>
</tr>
<tr>
<td>Long-term illness or medical condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy</td>
<td>2</td>
</tr>
<tr>
<td>Mental health problems such as depression, schizophrenia, anxiety, etc.</td>
<td>1</td>
</tr>
<tr>
<td>Physical impairment that significantly limits one or more basic physical activities such as walking, climbing stairs, or carrying things</td>
<td>11</td>
</tr>
<tr>
<td>Social-communication difficulties such as speech impairment or a condition on the autism spectrum</td>
<td>2</td>
</tr>
<tr>
<td>Health condition or impairment not specified</td>
<td>4</td>
</tr>
<tr>
<td>I don’t want to answer</td>
<td>1</td>
</tr>
</tbody>
</table>

The table does not include data for participants of focused groups discussion held in Novi Sad, because these questions were inserted lately.

Annex 7: Self-identification of the type of impairment by online survey responders

<table>
<thead>
<tr>
<th>Type of impairment</th>
<th>No. of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blindness or other visual impairment that cannot be corrected with glasses</td>
<td>23</td>
</tr>
<tr>
<td>Deaf or hard of hearing</td>
<td>14</td>
</tr>
<tr>
<td>Developmental disability that I have had since childhood, which affects motor, cognitive, social, emotional skills or speech</td>
<td>29</td>
</tr>
<tr>
<td>Learning difficulties such as dyslexia, dyspraxia or ADHD (attention deficit disorder)</td>
<td>9</td>
</tr>
<tr>
<td>Long-term illness or medical condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy</td>
<td>16</td>
</tr>
<tr>
<td>Mental health problems such as depression, schizophrenia, anxiety, etc.</td>
<td>15</td>
</tr>
<tr>
<td>Physical impairment that significantly limits one or more basic physical activities such as walking, climbing stairs, or carrying things</td>
<td>89</td>
</tr>
<tr>
<td>Social-communication difficulties such as speech impairment or a condition on the autism spectrum</td>
<td>20</td>
</tr>
<tr>
<td>Health condition or impairment not specified</td>
<td>37</td>
</tr>
<tr>
<td>I don’t want to answer</td>
<td>8</td>
</tr>
</tbody>
</table>
Annex 8: Combined data for focus groups participants and online survey responders

<table>
<thead>
<tr>
<th>Type of impairment</th>
<th>No. of responses</th>
<th>% of total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blindness or other visual impairment that cannot be corrected with glasses</td>
<td>24</td>
<td>10%</td>
</tr>
<tr>
<td>Deaf or hard of hearing</td>
<td>16</td>
<td>7%</td>
</tr>
<tr>
<td>Developmental disability that I have had since childhood, which affects motor, cognitive, social, emotional skills or speech</td>
<td>41</td>
<td>18%</td>
</tr>
<tr>
<td>Learning difficulties such as dyslexia, dyspraxia or ADHD (attention deficit disorder)</td>
<td>10</td>
<td>4%</td>
</tr>
<tr>
<td>Long-term illness or medical condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy</td>
<td>18</td>
<td>8%</td>
</tr>
<tr>
<td>Mental health problems such as depression, schizophrenia, anxiety, etc.</td>
<td>16</td>
<td>7%</td>
</tr>
<tr>
<td>Physical impairment that significantly limits one or more basic physical activities such as walking, climbing stairs, or carrying things</td>
<td>100</td>
<td>43%</td>
</tr>
<tr>
<td>Social-communication difficulties such as speech impairment or a condition on the autism spectrum</td>
<td>22</td>
<td>10%</td>
</tr>
<tr>
<td>Health condition or impairment not specified</td>
<td>41</td>
<td>18%</td>
</tr>
<tr>
<td>I don’t want to answer</td>
<td>9</td>
<td>4%</td>
</tr>
</tbody>
</table>
Annex 9: Daily support services to persons with disabilities: availability, scope, coverage

<table>
<thead>
<tr>
<th>Service</th>
<th>Available to / Purpose</th>
<th>No. of municipalities and % of all</th>
<th>No. of active service providers</th>
<th>General coverage rate</th>
<th>Service users</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home assistance</td>
<td>Available to people whose physical and mental impairments hinder their independent life in their homes without regular help in activities of daily living, care and supervision, where there is no available or sufficient family support. Purpose: support to persons in meeting daily life needs in order to improve or maintain quality of life: maintenance of personal hygiene, care, maintenance of apartment hygiene, and assistance for satisfying existential and other needs.¹⁸²</td>
<td>129 88% of municipalities</td>
<td>96</td>
<td>234,5</td>
<td>Total of 16,438 service users 90% of the service users were elderly over 65, and two thirds of service users had a disability, with majority of them persons with physical and multiple impairments</td>
</tr>
<tr>
<td>Child Personal Companion</td>
<td>available to a child with disabilities, who needs support in meeting everyday basic needs in the area of movement and mobility, personal hygiene, feeding, dressing, and communicating with others, provided that a child attends a school. The service is available until a child graduates from school. Purpose: to provide suitable individual practical support to a child for inclusion in regular schooling and activities in the community, to achieve the highest possible level of independence.¹⁸³</td>
<td>95 65% of municipalities</td>
<td>37</td>
<td>204,9</td>
<td>2,760 users (68% boys) 93,6% users are children, while others are young people with disabilities attending schools. 30,9% were children with autism; 20% of children with multiple impairments</td>
</tr>
<tr>
<td>Day-Care Centers</td>
<td>According to the legal provisions, daycare is a local service, whose purpose is to improve the quality of the user’s life in their own social environment through the maintenance and development of social, psychological, and physical functions and skills, in order to gain skills for an independent life to the greatest extent possible. It is available to children and adults with disabilities, and services providers are licensed in three categories of daycare centres – for children, for adults, and for elderly people.</td>
<td>51 35% of municipalities</td>
<td>57</td>
<td>18,2</td>
<td>1,593 of persons with disabilities using this service in Serbia adults over-represented – 60,9%. Majority of service users were persons with multiple impairments (39,3%) and intellectual impairments (34,2%)</td>
</tr>
</tbody>
</table>

¹⁸² Rulebook on conditions and standards for the provision of social protection services, Articles 73-74
¹⁸³ Rulebook on conditions and standards for the provision of social protection services, Articles 83-84
Endnotes

i **OPDs**: Novi Sad City Organization of the Association of the Blind and Visually Impaired, IM-PACT 21, National Association of Paraplegics and Quadriplegics, Organization of Paraplegics and Quadriplegics of South Banat, Out of Circle Vojvodina (organization supporting women with disabilities and women victims of violence), Center for Independent Living (CIL) of Serbia, Out of Circle Niš, Association of Persons with Muscular Dystrophy Niš, Association of the Deaf and Hard of Hearing of Serbia, Cerebral Palsy Association, Association of the Blind of Serbia; **parents associations**: Association for Support to Mentally Underdeveloped Persons, Association for Support to Persons with Down syndrome, Belgrade City Association for Support to Persons with Autism, Belgrade City Association for Polio and Cerebral Palsy; **CSOs**: Organization Sun, Organization "Lighthouse in Blue," Association for Support to Persons with Mental disabilities Rime Zajecar, “Halfway There” – service provider, Mental Disability Rights Initiative of Serbia (MDRI-S).

ii The mandate of the Council is four years, and the latest Council includes 26 members - seven representatives of persons with disabilities and persons with different types of impairment are represented by their respective organizations (all members of NOOIS – national umbrella OPD), three representatives of the companies for professional rehabilitation and employment of persons with disabilities, 12 members from the relevant ministries (eight state secretaries or deputies to the minister, four expert associates), representative of the Social Inclusion and Poverty Reduction Unit of the Government of Serbia, representative of Republic fund for Pension and Disability Insurance, representative of the National Employment Service, and professor at the Faculty for Special Education and Rehabilitation, University of Belgrade.

iii The preparation of a strategy for the improvement of the position of persons with disabilities and its implementation, the development and monitoring of action plans for the strategy implementation; Preparation of individual administrative acts in the process of issuing permits for the performance of companies for professional rehabilitation and employment of persons with disabilities, issuing approvals for the measures and activities of professional rehabilitation of persons with disabilities; The allocation of funds from the budget of the Republic of Serbia intended for the promotion of programs in the field of protection of persons with disabilities and support to companies for professional rehabilitation and employment of persons with disabilities, and control of the intended use of those funds; Participation in the preparation of draft laws and other regulations in the field of support for persons with disabilities and companies for professional rehabilitation and employment of persons with disabilities; Inspection supervision over the implementation of entrusted work in the field of professional rehabilitation in companies for professional rehabilitation and employment of persons with disabilities; Exercising the right to a refund of the value-added tax paid when importing motor vehicles by persons with disabilities; Realization of the right to compensation for achieved preferential driving in internal passenger traffic by persons with disabilities; Preparation of analyses and reports on the achieved results regarding the improvement of the position of persons with disabilities and the work of companies for professional rehabilitation and employment of persons with disabilities and proposing intervention measures for their improvement; Participation in the preparation of reports on international cooperation and harmonization of the regulations under the competence of the Sector with the legal acquis of the European Union (EU).

iv It should be noted that the Statutes of national impairment-based associations (member organisations of NOOIS) allow only membership of local organisations rather than individuals. While persons with disabilities as individuals can not opt for membership in national associations or NOOIS and participate in their work directly, national associations abstract membership numbers from the local level to demonstrate that they fulfil NOOIS’s membership criteria. Arguably, the lack of opportunities for direct participation of individuals at the national level may cause a democratic deficit and alienation of persons with disabilities from the disability movement.
According to the law, adults shall be fully deprived of legal capacity in the event they are “incapable of sound reasoning due to an illness or psycho-physical developmental difficulties and are thus incapable of caring for themselves and protecting their rights and interests”. Consequently, their legal capacity is equal to the legal capacity of a younger minor (children below the age of 14).

The law also states that an adult person who, as a result of illness or difficulties in psychological or physical development, “directly threatens his or her own rights and interests or the rights and interests of other persons” may be partially deprived of his or her legal capacity. Therefore, their legal capacity is equal to that of an older minor (children between the age of 14 and 18).

Parental rights may be extended before a child reaches the legal age of majority if a child “is incapable of taking care of and protecting his or her rights, or if he/she threatens his or her rights and interests through his or her actions, as a result of illness or difficulties in psychological or physical development”, which in practice is equal to full deprivation of legal capacity.

According to Article 41 of the Law, these measures implemented by the Ministry include employment of professionals for vocational training and rehabilitation of persons with disabilities, transportation expenses for persons with disabilities and professionals for vocational training and rehabilitation of persons with disabilities, as well as the improvement of working conditions and production programmes, the introduction of standards, the improvement of product and service quality, and adjustment of workplaces or other purposes.

The Council’s tasks include:

- Monitoring the implementation of recommendations given to the Republic of Serbia within the process of the Universal Periodic Review of the UN Human Rights Council and recommendations of the UN treaty bodies,
- Proposing measures for the implementation of the received recommendations,
- Providing opinions on the progress of human rights during the reporting period,
- Providing professional elaborations on the condition of human rights and the achieved results through the implementation of the recommendations.