Transitions Towards an Inclusive Future:

Vocational Skills Development and Employment Options for Persons with Disabilities in Europe & Eurasia

October 2009

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Acronyms and Abbreviations

CBR	Community-based Rehabilitation
CBO	Community-based Organization
DPO	Disabled Persons' Organization
DWA	Decent Work Agenda
DWCP	Decent Work Country Programme
ICF	International Classification and Functioning
ILO	International Labor Organization
IYDP	International Year of Disabled Persons
NGO	Non-governmental Organization
UNDP	United Nations Development Programme
UNCRPD	United Nations Convention on the Rights of Persons with Disabilities
UNESCAP	United Nations Economic and Social Commission for Asia and the Pacific
UNESCO	United Nations Educational, Scientific and Cultural Organization
WHO	World Health Organization

Executive Summary

Persons with Disabilities: Skills Development and Employment

According to the World Health Organization (WHO) and the World Bank, people with disabilities constitute at least 10 percent of any population. Worldwide, the approximate number of persons with disabilities is 650 million; for those who are of working age, the estimate is 470 million (ILO, 2007a). The ILO (2006d) estimates that unemployment rates for individuals with disabilities range anywhere from 50 percent to 80 percent internationally, rates which are two or three times higher than those for the general population. Pineda and Cuk (2007) estimate that the unemployment rate for persons with disabilities in Central and Eastern Europe and the Commonwealth of Independent States (CEE/CIS) is between 80 percent and 90 percent .

High unemployment rates for persons with disabilities within Europe and Eurasia and elsewhere are in part a consequence of their limited access to education and vocational skills training. Less than 10 percent of the population with disabilities internationally attends educational institutions (UNESCO, 2006); even fewer attend vocational skills training. Consequently, persons with disabilities routinely face economic hardship. The strong relationship that exists between disability and poverty reinforces itself. Poverty makes individuals more vulnerable to disability and disability, through the lack of jobs and opportunities, reinforces poverty. Hope (2003) states that 82 percent of persons with disabilities in developing countries live below the poverty line; Elwan (1999) suggests that 15 percent to 20 percent of the poor in developing countries are disabled.

In Europe and Eurasia (statistics do not include Russia), where the government has historically been the primary provider of educational and vocational skills training and employment-related services (UNICEF, 2001), the estimated number of persons with disabilities is 16.5 million. Across the region, the governments spend up to one percent of GDP in service and care provision primarily by means of a centralized, segregated, institution-based service delivery system (UNICEF and World Bank, 2003). Unfortunately, a segregated, institution-based service delivery system is not only expensive, but it is also less effective in terms of preparing individuals to successfully transition into gainful employment and mainstream society (Tobis, 2000). Persons with disabilities who are a part of the segregated educational and vocational skills training and employment-related service delivery system in Europe and Eurasia are, unfortunately, ill-prepared to transition into gainful employment and mainstream society.

A Human Rights Issue: Rights-Based Approach to Disability

Preparation for, and subsequent integration into open, gainful employment for persons with disabilities are critical to any initiative that strives to reduce the degree of poverty experienced by persons with disabilities. The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD, 2006) is one of several international conventions (ILO Convention No. 159, 1983) that establish a legislative framework for vocational skills training and employment for persons with disabilities.[1] This United Nations convention, which promotes the right to work, does not establish new rights but rather qualifies existing rights and encourages strong responsibilities for state parties. Implicit in adopting the UNCRPD (nine countries have signed the Convention and four countries have ratified it across Europe

[1] See Annex 3 - Policy Initiatives and Guiding International Documents on Vocational Training, Employment and Rights of Persons with Disabilities

and Eurasia) is a commitment of governments in Europe and Eurasia to move away from a "medical" model of disability and its corresponding segregated, institution-based programming approach, and towards a "social" or "rights-based" model that promotes more inclusive programming and advocates for the creation of an enabling environment within society. The **medical model** views disability as a result of an individual's inability to function and assumes that the problem lies with the person with a disability, whereas the **social model** views disability as an interaction of a person's functional status with the physical, cultural, and policy environment. As a result, the social model emphasizes the creation of an enabling environment that reflects society's respect for the rights of individuals with disabilities.

From Legislation to Implementation: Models and Best Practices

Governments, international agencies, non-governmental organizations (NGOs), disabled persons organizations (DPOs) and community-based organizations (CBOs) in Europe and Eurasia are starting to realize the need to increase their involvement, as well as their institutional capacities, so that commitments to UNCRPD are met, and persons with disabilities are provided with increased opportunities to gain access to mainstream society. Several countries in the region have begun to draft and adopt national social welfare legislation and policies that promote the full inclusion of persons with disabilities in mainstream society. These same countries have learned that the drafting and adoption of such legislation and policies have proven easier than their implementation. The successful integration of persons with disabilities is not only contingent upon the degree to which governments identify philosophically with a ¨rights-based¨ approach to disability, but also how well these same governments develop the institutional and organizational capacity to promote, facilitate, and support the design, implementation, monitoring and evaluation of educational and vocational skills development and employment-related programs that are consistent with such an approach.

International ¨best practices¨ and ¨lessons learned¨ from ¨model¨ programs can play an important role in guiding NGOs, DPOs, and CBOs in the provision of vocational skills training and employment-related services to persons with disabilities in Europe and Eurasia. After such organizations have been sensitized through awareness raising initiatives to the potential role that they can play in contributing to the creation of an enabling environment for persons with disabilities, institutional capacity building approaches and technical assistance interventions in the areas of vocational skills training and employment-related services can be introduced. When their institutional capacity has been developed, these same organizations can play a critical role in the delivery of inclusive, community-based vocational skills training and employment-related services.

Report

This report presents internationally recognized models, approaches and ¨best practices¨ in programming and implementation of vocational skills development and employment-related services that have successfully transitioned persons with disabilities into open, gainful employment. The models and approaches range from most-to-least restrictive depending on the profile and specific needs of the individual participant. Irrespective of the model or approach, emphasis is placed on facilitating the movement of an individual with disabilities from a more restrictive to the least restrictive environment in order to transition him or her towards mainstream society. A least restrictive model of vocational skills development and employment may have greater application for individuals who require less intensive and continuous support, whereas a more restrictive approach, which focuses on creating a

more supportive environment, may have greater application for severely disabled individuals. These ¨best practice¨ models and approaches have general applicability for any workforce development initiative that strives to prepare individuals with disabilities for a successful transition into gainful employment, and they could be adapted to the particular context of Europe and Eurasia.

In addition to describing various models, approaches and ¨best practices¨ for vocational skills development and employment-related services, this report identifies the target disability group for which each model or approach is best suited. Needless to say, there are several models or approaches that can be used with both disabled and non-disabled groups. The **employment trial model** and the **supported employment model** promote full participation of persons with moderate to severe disabilities (physical, mental and/or sensorial) and strive to integrate this population into mainstream society; whereas, **apprenticeship training** and **on-the-job training** are approaches that can be used with mildly disabled and non-disabled groups. Likewise, open, competitive employment, self-employment, and **social enterprises** are approaches that can be used with both disabled and non-disabled persons.

Goals of This Report

The sensitization of key stakeholders on ¨best practices¨ and ¨lessons learned¨ for a ¨rights-based¨ approach to disability is a necessary, but not sufficient, condition in any effort to facilitate the transition of persons with disabilities into gainful employment and mainstream society. Additionally, targeted interventions must be designed and implemented so that the key stakeholders, i.e., NGOs, DPOs, and CBOs, are able to develop the capacity to offer ¨best practices¨ vocational skills training and employment-related services. USAID Missions in Europe and Eurasia can play a critical role in facilitating and supporting the process of creating the institutional capacity of key stakeholders to offer ¨best practices¨ skills training and employment-related services to the population with disabilities at the community level, as well as nationally.

This report outlines a set of specific recommended actions for USAID missions in the region of Europe and Eurasia regarding how to support the development of vocational skills training and employment-related services that are consistent with a ¨rights-based¨ approach to disability and will effectively contribute to the successful transition of persons with disabilities into gainful employment and mainstream society:

1. For countries that do not yet have a national transition strategy, support efforts of both the public and private sectors to develop a strategy in order to move towards a decentralized community-based service delivery system;
2. For countries that lack institutional capacity to implement the services consistent with a national transition strategy, support institutional and human capacity building initiatives targeted at national, regional and local agencies, as well as NGOs, DPOs, and CBOs, in order to implement effectively and efficiently a decentralized, inclusive, community-based service delivery system;
3. Support the design, development and implementation/piloting of different ¨best practices¨ vocational skills training and employment-related services interventions for persons with disabilities;
4. Support the development of community-based support systems, i.e., transportation and health services, required by persons with disabilities to secure and maintain open, competitive employment;

5. Support the development of a monitoring and evaluation system for successfully implemented community-based vocational skills training and employment models, as well as a service delivery system.

The conceptualization, development, implementation (on a pilot basis), and the monitoring and evaluation of vocational skills training and employment-related approaches for persons with diverse disabilities will generate important lessons learned vis-à-vis the implementation of the select approaches with public and private sector employers, as well as with the self-employed. The lessons learned from the key stakeholders, i.e., employers, technical staff, and persons with disabilities, combined with the information obtained from the monitoring and evaluation activities will provide the USAID with invaluable data upon which future decisions can be based.

1. Support the creation of a coordination body that has the capacity to (a) provide technical assistance in skills training and employment-related services to key implementing agencies; and (b) monitor and evaluate the implementation of vocational skills training and employment-related services for persons with disabilities.
2. Support the development of an advocacy group (comprised of key stakeholders) that will promote and support the inclusion of persons with disabilities in vocational skills training and employment-related services, as well as strive to strengthen inter-agency collaboration to ensure that persons with disabilities receive the support services necessary to maintain employment status.

Key stakeholders in Europe and Eurasia are in need of technical assistance and institutional capacity building support in order to implement "rights based" reforms and to provide quality services to persons with disabilities. With its inclusive approach to disability and development, its long-standing history of fostering community- and rights-based approaches to service delivery for vulnerable populations, and its commitment towards strengthening education, vocational skills training and employment-related services, USAID could play a critical role in the region's successful transition towards an inclusive, ¨rights-based¨ approach to service delivery for persons with disabilities. Key stakeholders in the region believe that the issues of skills development, underemployment, and unemployment of persons with disabilities will not be adequately addressed without active contribution from the international community and its commitment and expertise.

Introduction

Purpose, Scope, and Methodology of the Report

The purpose of this study is to assist USAID in better determining needs of, as well as recommending intervention strategies for programming related to the provision of vocational skills training and employment for, people with disabilities across Europe and Eurasia. Responding to the objective of this activity—to present an overview of "best practices" and lessons learned in providing vocational training and jobs skills for people with disabilities, as well as to provide concrete and practical "how-to" steps and recommendations to guide Missions that would like to develop programming in this area in the Europe and Eurasia region—this report:

1. Reviews "best practices," lessons learned and model programs in vocational skills training and employment for persons with disabilities, both in Europe and Eurasia and internationally.
2. Identifies challenges that persons with disabilities and key stakeholders such as government and non-governmental service providers face regarding policy, service delivery, institutional capacity building, and monitoring and evaluation of program activities and outcomes.
3. Proposes a concrete set of recommendations for strategic interventions and successful programming for USAID that addresses the challenges faced by persons with disabilities, governments and non-governmental organizations as they strive to provide services to persons with disabilities that are ¨rights-based¨ and inclusive.

The first section of the report describes the evolution of the service delivery system inclusive of vocational skills training and employment for persons with disabilities across the region of Europe and Eurasia. The second section presents a summary of good practices, strategies, and models of vocational skills training and employment options that have been implemented internationally for persons with disabilities. The third section presents timely and specific recommendations on how to assist key stakeholders such as governmental and non-governmental service providers in Europe and Eurasia as they strive to provide vocational skills training that will enhance the inclusion of persons with disabilities into mainstream society while contributing to the creation of an enabling environment consistent with international conventions, policies and practice.

In terms of methodology, the report is a desk review of relevant documents and literature on service delivery systems, vocational skills training, and employment for persons with disabilities from international organizations, NGOs, DPOs, and governmental agencies both internationally and from within the region of Europe and Eurasia.

Profile of the Service Delivery System and Programs for Persons with Disabilities in Europe & Eurasia

Situational Analysis

The following sections present a brief description of the historic and current service delivery system of vocational skills training and employment options for persons with disabilities in Europe and Eurasia, as well as a concise situational and prevalence analysis of the status of this target group. The analysis reflects an historical perspective and identifies the challenges that national governments and civil society

organizations face in transitioning persons with disabilities into mainstream society. Despite the challenges that confront various key stakeholders, an opportunity exists for many countries of Europe and Eurasia to conceptualize, legislate, design, and implement programs and interventions that reflect internationally recognized values of human rights and equal opportunities for persons with disabilities who have been historically marginalized.

Prevalence of Disability in Europe and Eurasia

According to the International Labor Organization (ILO, 1995), few reliable statistics on the prevalence of disability for countries in Europe and Eurasia were available in the first years of the region's democratic transition. Economic downturns, migration, civil unrest, and conflict in certain parts of Europe and Eurasia presented further challenges to disability data collection. Despite more recent data by the United Nations Development Programme (1997), the World Bank (2003), and USAID and TransMONEE (2009), the number of persons with disabilities in Europe and Eurasia can be categorized as an "estimate," at best (See data in **Annex 1**), and there is a lack of consistent and comparable data across countries. Axelsson, Granier and Adams (2004) state that for Europe and Eurasia, disability statistics are scarce, and more importantly - universal definitions of disability for cross-national comparisons are problematic. According to the World Health Organization, the World Bank, and USAID, people with disabilities constitute at least 10 percent of any population. Worldwide, the approximate number of persons with disabilities is 650 million; for persons with disabilities who are of working age, the estimate is 470 million (ILO, 2007a).

At the same time, people with disabilities, like those who belong to other vulnerable groups, live among the poorest segments of every society, facing daily exclusion and discrimination. UN statistics suggest that 82 percent of persons with disabilities in developing countries live below the poverty line (Hope, 2003); similar estimates suggest that 15 percent to 20 percent of the poor in developing countries are disabled (Elwan, 1999). Persons with disabilities are among the most marginalized groups within any society. They are more likely than people without disabilities to suffer from poverty and face barriers vis-à-vis access to services and to the realization of their rights. **Annex 1** presents disability statistics for Europe and Eurasia by the UNDP (1997) in **Table 1** and the World Bank (2003) in **Table 2**.

Categorization and Definition of Disability

One of the principle reasons why the prevalence of disability in Europe and Eurasia has been underestimated is because these countries have used the Soviet classification process known as "defectology," which defined disability as a diseased state or a problem of the "abnormal" (UNICEF, 1998). Individuals were classified as disabled based upon a medical model and one's ability to work. Categorization was based on a medical assessment of restricted ability that was set for life, without the expectation of improvement or the need for review. One example of how the process of "defectology" underestimates the prevalence of disability is in Uzbekistan (JICA, 2002), where a recent country study suggested that only 1.33 percent of the national population was disabled.

Aside from "defectology" and its application in Europe and Eurasia, the lack of uniformity in research design or approach also contributes to disability prevalence rates varying across most countries and many times appearing lower than UN estimates (Mont, 2007). Different research designs produce different rates. Research projects usually define disability differently and employ different methodologies in the data collection process. For instance, depending on whether disability is narrowly defined in the "medical" sense as physical disability, or formulated more widely in the "social" sense (i.e. as lack of enabling environment, inclusiveness within society, and "rights-based" approach), different prevalence

rates will result. Moreover, the quality of the research design differs, i.e., some studies have a stronger methodological foundation than others.

In order to establish a comparable prevalence rate across nations, efforts now focus on how an individual's ability to function is affected by the environment in which he or she lives, that is, the measurement of functional limitation by the nature of the interaction between the individual and the social, physical and policy environment. The definition of disability in many countries of Europe and Eurasia is currently approaching the International Classification of Functioning, Disability and Health (ICF) of WHO as a result of the regions' gradual shift from a "medical" to a "social" model of disability, as well as the efforts to legally acknowledge the rights of all persons with disabilities (JICA, 2002). Despite these positive developments, several countries in Europe and Eurasia, such as Turkmenistan (JICA, 2002) and Uzbekistan (Pineda and Cuk, 2007), continue to use "defectology" and define disability in medical terms.

Service Delivery

Historical Context

Throughout Europe and Eurasia, residential institutions have historically been a part of the social policy for persons with disabilities. Under former socialist regimes, service delivery models for persons with disabilities were based on political and social contextual needs. The institution-based model, which predominated, supplanted families and communities (Davis, 2006) and emphasized political and social control at the expense of effectiveness and society's needs. The social contract with the general population required the government to take care of the needs of the people and ensure that everyone had the same rights. A general lack of knowledge of civil rights among citizens persisted, as did a lack of citizen participation in the development and implementation of programs and services (UNDP, 2005). The social contract also assumed that through quasi-universal employment, subsidized goods and social benefits, the State could protect all citizens, thus making social services unnecessary. The family was not recognized either as an integral part of this social contract or the welfare system (Davis, 2006).

As a result, persons with disabilities were provided with social, educational, vocational, and employment services in specialized, segregated facilities, which for most meant little prospect of ever participating in or re-entering mainstream society. Specialized institutions for persons with disabilities were isolated from the community, creating an impression that these individuals were not part of the society and therefore eliminating expectations for community integration. This centralized, institution-based service delivery approach, combined with a difficult local economic environment that offered few employment opportunities, has been severely inadequate in preparing persons with disabilities for a successful transition into gainful employment.

The Institution-Based Model

Large institutions failed to prepare persons with disabilities in Europe and Eurasia for independent living. Basic needs were provided for (ready cooked meals, clean clothes, accommodation), which led to dependency upon a model that did not exist in mainstream society and did not encourage independence and inclusion. No social model was available for teaching institutionalized persons with disabilities about normal relationships, responsibilities, and control over their lives. Until recently, efforts to build vocational and independent living skills were ignored. Unlike most of their peers, persons with disabilities had to go through a double, very complex and difficult transition, not only from school to work (primarily because the vocational skills training provided were in occupational trades for which

there was limited demand in the local labor market), but also from a status of "assisted" to "independent."

This centralized, institution-based system and the method of "defectology" were the cornerstones of the service delivery approach for persons with disabilities in Europe and Eurasia, and that remained fundamentally unchanged throughout the socialist period. "Defectology" was both the theory and treatment of disability with its own methods and techniques (UNICEF, 1998). The role of the environment in support of the individual was ignored; treatment consisted of a diagnosis, segregation of the "normal" and the "abnormal" individuals, and correction of the defect (Johnson, 1998). It should be mentioned that, in some countries that have yet to make a successful transition to the western model, this approach continues to dominate treatment even today (World Bank, 2000; USAID, 2007).

The countries of Europe and Eurasia inherited that centralized, institution-based, and segregated service delivery system in the period of democratic transition after 1989. Over-reliance on segregated, residential facilities and an institutional-based approach to service provisions for persons with disabilities has been one of the most harmful, costly, and intractable legacies of command economies of Eastern Europe and the former Soviet Union. Needless to say, national legislation was also influenced by these same legacies. In fact, in the transition period legislation throughout the region focused on social security and/or social protection, health and medical rehabilitation, employment quotas, and employment compensation. Consequently, persons with disabilities were forced to reside, be educated and trained, and work in segregated, specialized institutions. Those persons with disabilities who lived with their families had limited or no access to community-based services. State protection consisted of financial benefits, mostly provided at home. In urban communities, NGOs, DPOs, or other organizations supported the development of some services. In rural areas, access to such services was, and still is, extremely limited.

Transition to a Community Based Service Delivery System

The process of democratization in the early 1990s provided the countries of Europe and Eurasia with the option of an alternate approach to service provision for persons with disabilities that was different from that of the State-based centralized model that existed previously**.** The total economic transition contributed to a weakening of the family structure and influenced negatively on the school-to-work transition process. Those who were graduating from residential welfare institutions and who also had weak family support systems were more seriously affected by the economic transformations and had more difficulty transitioning into mainstream society. In order to address the large number of disenfranchised individuals, many countries began to focus less on a centralized, institution-based approach to service delivery and more on one that was decentralized and community based. This paradigm shift is seen as a means by which to increase family participation as well as to de-centralize and de-institutionalize services targeted at persons with disabilities.

Davis (2006) characterizes the transformation of the care and service delivery systems in Europe and Eurasia as multi-faceted and complex. Any transformation of a service delivery system that has been and is institution-based requires not only the "dismantling of the old system" but also the design and implementation of new interventions and strategies. Early in the transformation process, the overarching structure of financing, administration, and management of a newly conceived service delivery system begins to reflect democratic principles and moves from centralized towards decentralized decision-making mechanisms with national oversight and accountability (Davis, 2006). This shift, however, cannot occur over a short period of time without hurting those who were employed in the old system of care and people with disabilities whose needs cannot yet be met by a new and developing system. A transition strategy from an institution-based system to one that is more

community based can be greatly enhanced if model programs that have demonstrated their success in preparing as well as transitioning persons with disabilities into competitive, gainful employment are designed and implemented. Gate keeping systems must also be included in these strategies. Unfortunately, parallel funding of the two systems strains the budgets of most governments. USAID support is potentially essential to ease this transition. Such support of proven models, programs, and projects that demonstrates an effective approach to preparing and transitioning persons with disabilities into gainful employment would be of tremendous value.

Few initiatives in the region offer vocational skills and independent living training programs for persons with disabilities who are graduating from institutions. In Romania, persons with disabilities who live in institutions are not considered eligible for independent living programs (USAID, 2007). On the other hand, Romania has employed an inclusive independent living model for persons graduating from residential institutions, which could also be applied to the population with disabilities. For example, in Romania approximately 2,000 adolescents graduated from institutions in each of the past five years. With USAID support, standards were created and legislated in 2005 for independent living services. This process drew attention to the issues confronting institutionalized populations, and in 2006 a national strategy was adopted to foster their social inclusion. The strategy includes legislation and specific measures to ease the transition from institutions to the mainstream labor market and community. For instance, employers are provided with fiscal incentives for hiring graduates of the residential institutions. Yet, although no studies document the results, the estimate is that less than 50 percent of the adolescents who leave institutions find jobs in the first year after their graduation (Pirciog, 2008, Muga,M., 2005). Moreover, there is no follow-up after the first year to measure and document the social insertion into mainstream society and the labor force. Unless initiated as early as possible in an individual's upbringing, efforts to ease the transition hardly yield results.

In the process of democratic transition, the following countries adopted social protection laws that recognized the rights of persons with disabilities: Tajikistan, Kazakhstan, Uzbekistan, Belarus, Russia, Armenia, and Azerbaijan. These social protection laws, however, stipulated that service provision for children with disabilities be delivered in specialized, segregated residential facilities, and historically, the government was the service provider. Research into a segregated, institution-based, service delivery approach found that in many cases it is more expensive per person served than inclusive approaches designed to support individuals within their families and communities, and the segregated approach produces inferior welfare outcomes (Tobis, 2000). This research supports the argument that the primary justification for a segregated, institution-based service delivery approach was political and social in nature, not economic.

Recent Developments

Recent legislative initiatives in the region have been more consistent with a rights-based approach to disability and have included anti-discrimination, employment equity, and civil rights laws, as well as measures that focus on job retention and return to work. Rights-based legislation focuses on integration, inclusion, and reasonable accommodation, and it recognizes the important role of family and communities in preparing vulnerable groups for independent lives. Bulgaria recently adopted a national Law of Integration of the People with Handicaps (2005) that promotes equality and inclusion and states that persons with disabilities have the right to education. In Romania, Law 519/2002 stipulates that access to education is free and equal in accordance with the "type of disability, level of disability and educational needs¨ (Russell, 2008). Additionally, vocational training and skills development are promoted as part of this law. A more comprehensive law that passed in 2006 (Law 448, regarding the protection and promotion of the rights of people with disabilities) sets up a rights-based system of

policies and services. The law is currently under revision for compliance with UNCRPD due to Romania ratifying the Convention.

Several examples of positive developments can be found in Romania, Russia, and Croatia (USAID, 2007; UNICEF, 2002; UNDP, 2007a). Romania has evolved towards a decentralized system of community-based services for institutionalized children. This same approach is being replicated for the provision of services to persons with disabilities as well as for the elderly. Russia has seen the development of rehabilitation and empowerment models of community-based services for institutionalized and special needs children through early intervention programs and advocacy efforts of persons with disabilities. Croatia is signatory to all the major international human rights conventions, including those relating to the rights of persons with disabilities. Croatia has also created an Advisory Committee for the Disabled and the National Strategy of a Unified Policy for the Disabled 2003-2006.

Recent initiatives in numerous countries across the region focus on moving from a segregated, institution-based service delivery system to one that is inclusive and community-based. Tobis (2000) has identified several challenges that result from an institution-based service delivery system serving an ideology of ¨defectology¨ and the belief that national governments are responsible for caring and providing for the population with disabilities, that need to be addressed in order for the transition to be successful:

- Financial and organizational pressure to maintain residential institutions;
- Public acceptance of this form of care as appropriate;
- Absence of national social welfare infrastructure, systematic monitoring and oversight, and legislative framework that focuses on protecting the rights of vulnerable persons; and
- Absence of alternative service providers on the community level (NGOs and DPOs).

Concerned with similar challenges, Davis (2006) states that although national legislation and policy suggest that a commitment to a community-based approach is developing, a lack of institutional capacity, which hinders strategic planning and the implementation of activities consistent with such an approach, still exist.

Non-Government Sector Involvement

Despite these weaknesses, Davis (2006) suggests that the overarching structures of finance, administration and management in European and Eurasian governments are beginning to reflect the development of principles of democracy as well as a shift from centralized to decentralized decision making. At the same time in the region, the presence of civil society organizations such as DPOs and NGOs have increased considerably (Mete, 2008). In fact, one can increasingly find vocational programs for persons with disabilities run by NGOs throughout the region. These developments represent a better understanding of the "community management of risks" by community-based organizations (UNDP, 2007a).

Through NGOs and DPOs, the non-profit sector is gradually emerging as the primary provider of social services in the region (Davis, 2006). The efforts that have focused on moving from segregated, residential institution-based service delivery to inclusive, community-based service delivery are demonstrated by a number of excellent projects from which some important lessons can be learned. The Child Net project in Romania (USAID, 2007) sought to develop a community-based child welfare service system inclusive of national legislation, a national monitoring system, establishment of standards, and capacity building of humans as well as institutions. The lessons learned from this project could potentially be applied towards initiatives that focus on persons with disabilities both within Romania as well as in other countries in the region.

In conclusion, throughout the region of Europe and Eurasia, significant progress towards fulfilling the global commitment to equalization of opportunities and recognition of the rights for persons with disabilities is beginning. However, in order to ensure that the rights of persons with disabilities are recognized, efforts need to continue towards the development of model programs and "best practices" to ensure that persons with disabilities have the opportunity to acquire the knowledge, skills, and attitudes necessary to transition successfully into gainful employment and to become productive and contributing members of their respective communities. More importantly, such efforts need to focus not only on the State systematic level, but also on the community level, enhancing the capacity of NGOs and DPOs to design programs and drive change.

Education and Vocational Training

Education. As evidenced by the number of countries that have signed the UNCRC (see Annex 2, Table 2), many countries in Europe and Eurasia are committed to equal rights to education for all children, including those with disabilities. But in practice, education is not equally accessible to all children, specifically children with disabilities (UNESCO, 2006). In fact, the large number of children with disabilities that remains separated from biological families and lives in residential social welfare institutions is often justified on the premise that specialized care and education are not available in the community.

UNESCO (2006) has asserted that the vast majority of children with disabilities worldwide – perhaps more than 90 percent – do not attend school. The few, less than 10 percent, who do gain access to education services are confronted with inaccessible buildings, a lack of teaching materials, unqualified teachers, and a lack of transportation to and from the schools. As a result, disability and poor education outcomes are often linked experiences.

In Europe and Eurasia in particular, separate education (specialized, segregated institutions) often means reduced access to school (Mete, 2008). Certainly, enrollment rates for youth with disabilities (8 to 15 years of age) are less than those for non-disabled youth, for example, 81 percent in Bulgaria, 58 percent in Moldova, 59 percent in Romania. Enrollment rates for adolescents with disabilities (16 to 18 years of age) are 40 percent in Moldova, 60 percent in Georgia, 40 percent in Bulgaria, and 30 percent in Romania. In 1992 in Ukraine, nearly 70 percent of registered disabled people had less than secondary or basic vocational school education.[1]

In Tajikistan, only 25 percent of children with disabilities actually attend school (JICA, 2002). Such education is provided by specialized, residential schools. For those individuals with intellectual impairment, the only educational option is long-term residential facilities (Open Society Foundation, 2006). Denial of the opportunity to develop important employability skills (ILO, 2007a) is the reality for many individuals with disabilities throughout Europe and Eurasia.

Nevertheless, some promising developments in education for children with disabilities from across Europe and Eurasia are evident. Programs and services in some countries focus on providing services to persons with disabilities as part of national educational initiatives. For example, the Ministry of Education Strategy in Armenia strives to integrate children with disabilities from communities and

[1] Mete, C., Braithwaite, J., & Schneider, P.H. (2008). ¨A Regional Overview-Introduction p. 21¨. Economic Implications of Chronic Illness and Disability in Eastern Europe and the former Soviet Union. (Ed. Mete, C.). The World Bank: Washington, D.C.

institutionalized settings into regular classrooms (UNICEF, 2002). Inclusive education represents a major shift in thinking about the role of schools in the education of children with disabilities. Previously, children with disabilities had to "fit" into existing schools or receive education from specialized schools for children with disabilities; however, many Ministries of Education initiatives throughout the region are increasingly implementing inclusive education initiatives where mainstream schools are adapting their programs to accommodate the needs of children with disabilities. Unfortunately, at this point such efforts are still scarce and unlikely to scale up soon.

Despite the scarcity of these efforts, an inclusive approach in Europe and Eurasia has opened the doors of many community schools to children with disabilities who previously were not able to gain access to such educational services. As a result, more and more children with disabilities are participating in the formal education system than ever before. Needless to say, a need for capacity building amongst administrators, teachers, and instructors persists in the region because of the general lack of knowledge about civil rights of persons with disabilities as well as about specialized teaching methodologies. Along with capacity building for professionals, public awareness must be raised regarding the abilities of children with disabilities. (In many cases, the reaction of parents of children without disabilities, which results from ignorance and fear, risks pushing children with disabilities outside mainstream schools.) These positive developments in the integration of persons with disabilities into local education and rehabilitation services and the matching of vocational training with labor market needs are part of a shift towards a community management of risks and services in Europe and Eurasia (UNDP, 2005).

Vocational Training. Vocational skills training has been proven as a policy approach that can bridge the gap between employment and disability, and therefore it should be considered with a special emphasis in the context of Europe and Eurasia. In international practice, efforts focus more and more on counterbalancing the negative social and professional consequences of disability by providing vocational skills training services as well as reasonable accommodation in order to increase the productivity and competitiveness of persons with disabilities instead of trying to promote their employment through "demand-side" measures that include quotas—levy systems for hiring of persons with disabilities and anti-discrimination legislation. The counterbalancing approach and the use of vocational skills training develop the capabilities of persons with disabilities so that they can participate in the general workforce. This inclusive approach can be promoted by more integrative employment policies such as vocational skills training, supported employment, and reimbursement mechanisms for workplace accommodation (Mont, 2000).

National Systems

While many countries (i.e., United States, Canada, Sweden, Finland) developed employment strategies for persons with disabilities based upon the counterbalancing approach described above, the countries under the Soviet system developed an employment strategy based on a system of reserved employment schemes and State-authorized enterprises managed by persons with disabilities (Metts, 2000). Persons with disabilities were generally placed in segregated, specialized institutions after their assessment and categorization for both skills development and employment, with little prospect of re-entering mainstream employment or utilizing their skills or knowledge (ILO, 1995). The Soviet approach to skills development and employment permeated the system adopted by the countries of Europe and Eurasia.

Vocational training for persons with disabilities from residential institutions has not historically been part of an effective process in Europe and Eurasia. The disconnection between education and work that characterized the communist education system is particularly relevant when an individual transitions from institutions to mainstream communities. In most cases, the vocational training provided by the institutional system is not relevant for the labor market. As a result, the vast majority of persons with

disabilities who have attempted to transition into the labor market are unprepared. In Serbia, many vocational schools created for persons with disabilities are losing their momentum because the traditional trades in which persons with disabilities were trained are no longer in demand (e.g., training as telephone operators for persons with visual impairments (Pineda & Cuk, 2007). The reality is that on a central level, the national vocational training systems in Europe and Eurasia for many persons with disabilities are irrelevant and disconnected from the labor market and thus fail to provide the targeted population with marketable skills and successful transition to gainful employment. Responding to that challenge, Bulgaria, Romania, and Serbia have been crafting and implementing national legislation that focuses on vocational skills training for persons with disabilities since the 1990s (ILO, 1995). For instance, in 2005 Romania adopted a National Strategy on Disability and Vocational Education and Training.

Community-based Programming

On the other hand, currently in Europe and Eurasia, "demand-driven" vocational skills training for persons with disabilities as an alternative to the State system is still at an early stage of development due, in part, to the legacy of State socialism. However, a transition is in progress towards community-based approaches to education and vocational training that provide persons with disabilities with marketable skills to better integrate them into society. Such new community-based programs are being launched in Bulgaria, Romania, Armenia, Azerbaijan, Bosnia, and Serbia (Davis, 2006; ILO, 2006a; Onu, 2003).

Although governments and NGOs in Europe and Eurasia are beginning to develop policies for integrating persons with disabilities into mainstream vocational training schemes, in practice few people participate in training courses available to the general population. At the same time, the old segregated, specialized training programs remain over-burdened, under-resourced (ILO, 2006a), and not adequate to the current economy. Throughout the region, new social welfare legislation and policies have been adopted; however, their implementation has taken longer than in some of the western, more established social welfare systems, due to insufficient human and financial resource allocations.

According to the ILO (2002a), some of the critical issues concerning vocational skills training of persons with disabilities that still exist in Europe and Eurasia and need to be addressed by programming are as follows:

- **Catchment** – Can all persons with disabilities be reached by community-based vocational skills training?
- **Relevance** – Does the training reflect labor market needs, and does it lead to employment?
- **Standards** – Are the training standards acceptable?
- **Institutional Capacity** – Are community-based vocational training institutions prepared to provide services to persons with disabilities?
- **Human Capacity** – Do the staff of community-based vocational skills training institutions possess the knowledge, skills, and attitudes necessary to provide services to persons with disabilities?

Employment

Unemployment for persons with disabilities is a chronic problem. The statistics that follow demonstrate the gravity of the situation worldwide; the ILO (2006d) estimates that the unemployment rate of adults with disabilities is between 50 percent and 80 percent. In Europe and Eurasia, the unemployment rate for persons with disabilities is between 80 percent and 90 percent (Pineda and Cuk, 2007). In part, the

high unemployment rate is due to a lack of preparedness for gainful employment. However, another reason is due to the social welfare system's disincentives associated with employment for persons with disabilities. For example, when persons with disabilities become employed, they lose many of their entitlements and social benefits. According to Mete (2008), due to the social welfare system's disincentives that affects motivation to look for a job, the probability that a person identified as disabled is employed when compared to a non-disabled person ranges across the region from 60 percent less likely in Moldova to 20 percent less likely in Bosnia-Herzegovina. In Croatia, 78 percent of the population with disabilities is registered as unemployed for longer than one year. Lastly, De Jong (2005) states that 90 percent of the population with visual impairments in the region is unemployed.

Throughout the region, the barriers that persons with disabilities are confronted with are so great that very few successfully transition to gainful employment. Some of the most challenging barriers include lack of physical access and workplace accommodation, lack of accessible transportation, stereotypic attitudes on the part of employers, lack of skills training programs that provide individuals with marketable skills, lack of employment-related services, and poor esteem. All of these obstacles also place persons with disabilities at risk of becoming more socially vulnerable.

The discussion of transition to an inclusive and decentralized approach towards employment option for disabled persons in Europe and Eurasia is somewhat limited to national legislation, policies, and strategies. Despite the need for community-based programming, as well as some successful models and practices implemented in Europe and Eurasia (e.g., Romania), the non-governmental sector generally lacks the capacity and any substantial track record.

National Systems

Historically, for persons with disabilities in the region, two main approaches have been used to encourage their employment: provide and encourage supported (sheltered)[2] work establishments and quota-levy systems (a government commissioned mandatory employment quota for employees with disabilities). These approaches have focused on benefits for persons with disabilities who don't work or incentives for employers who may hire persons with disabilities, regardless of capability (Middleton, Zindeman & Van Adams, 1993). Supported work establishments (similar to sheltered workshops) do not encourage the integration of their workers with disabilities into mainstream employment. Their success is dependent upon the degree to which they can "maintain" or "keep" the productive disabled workers with them. This leads to the segregation of this group of individuals instead of its integration into mainstream society. Supported work establishments also lead to increased dependency on the establishments rather than freedom of choice across the entire labor market.

Protected employment remains the most common employment option for persons with disabilities living in countries of the region. Many countries in Europe and Eurasia have adopted social work (sheltered) establishments and/or quota-levy systems. For example, in Bulgaria, which uses both sheltered employment schemes as well as a quota-levy system (ILO, 2006a), an estimated 13 percent of the population with disabilities is employed (Russell, 2008). Romania has adopted a quota-levy system whereby employers in businesses of more than 50 employees must ensure that four percent of that workforce is disabled. Despite the quota-levy system, only about five percent of the people with disabilities in Romania were employed in 2008. The quota system in Romania is not functioning efficiently because taxes (penalties) for not complying are insignificant for the corporate budgets and

[2] Supported employment is defined as competitive work in an integrated setting for individuals who, because of their disabilities, need on-going support services to perform that work (Wehman, Sale & Parent, 1992).

most of the large companies chose to pay the penalties instead of hiring people with disabilities. Moreover, money collected by the state under this system is not tracked or funneled to create other employment opportunities for people with disabilities.

National employment policies for persons with disabilities are beginning to reach beyond the traditional hiring quotas, reserved employment schemes, and rehabilitation strategies of the past in order to address the root causes of inequality in the work place. However, in spite of the measures implemented to stimulate employment opportunities for persons with disabilities in some countries, success has been limited, and this group has remained a financial burden on families as well as on the social welfare system. Viable alternative systems (e.g., decentralized, inclusive, community-based services) that have the capacity to produce employment opportunities for persons with and without disabilities have yet to be developed.

As countries in Europe and Eurasia attempt to move away from segregated, specialized employment opportunities for persons with disabilities, rehabilitation and employment efforts should be re-focused away from adapting the person to the market place and shifted towards making the marketplace itself more accessible and accommodating (Metts, 2000). This could be done in part by adopting national legislation that requires employers to provide reasonable accommodations to employees with disabilities at a reasonable cost. Through the Act of Occupational Rehabilitation, Croatia has begun to regulate the rights and conditions of the employment of persons with disabilities (UNDP, 2007). With the development of a National Strategy for the Social Protection and Social Integration of Disabled Persons in 2002, which is based on the UN Standard Rules of Equalization of Opportunities for Persons with Disabilities, Romania has begun to move in the direction of a rights-based approach to vocational skills training and employment (Onu, 2003).

Policies and strategies that support the employment of persons with disabilities must be initiated in ways that will enhance this group's employability such as by improving its low level of formal education, lack of work experience, and long-term unemployment history. Several measures include the following:

- Mainstream persons with disabilities into training and employment services;
- Increase involvement of employers;
- Improve employment support services; and
- Provide incentives to participate in education, training and work initiatives.

Most important, these recommendations also need to be presented to stakeholders on the community level (NGOs, DPOs, private sector) whose contributions to an inclusive and decentralized delivery system in Europe and Eurasia have been limited thus far but are absolutely crucial.

Summary

Until recently, the service delivery model in Europe and Eurasia for persons with disabilities has involved an institution-based approach that provided only specialized, segregated services. Media campaigns, international conventions, "best practice" documentation, policy development initiatives, and general forums that have brought together key stakeholders, including representatives from DPOs, have helped shift the approach for persons with disabilities to one that is rights based. A rights-based approach to education and employment for all persons with disabilities encourages their full participation as well as their complete integration into all aspects of society. Any movement towards integration, championed by persons with disabilities themselves, is bolstered by an increased appreciation for the nature of their reality.

However, as disability is increasingly viewed from a social or human rights perspective—one that strives to ensure the civil, cultural, economic, political and social rights of persons with disabilities—more emphasis will be placed on the creation of an enabling environment that reflects society's respect for the rights of all citizens. Despite the efforts towards independent living and increased participation on the part of persons with disabilities, community-based programs and services need to be established and/or strengthened so that persons with disabilities can remain in their communities as opposed to being relegated to segregated, institution-based services.

Three important components need to be included in any successful effort to integrate persons with disabilities in Europe and Eurasia into gainful employment in their respective communities: (1) an increased focus on community-based services and programs; (2) improved economic opportunities for persons with disabilities by integrating them into vocational skills training and employment-related service delivery systems; and (3) the encouragement of stronger links between vocational training service delivery systems and the private sector.

The existing body of literature on vocational skills training and employment for persons with disabilities in Europe and Eurasia, as well as "best practices," is limited. However, international literature and experience suggests that "best practices" in vocational skills training and employment-related services for persons with disabilities can potentially prove invaluable in assisting countries in the region in their efforts to improve the quality of service delivery as well as facilitate the integration of persons with disabilities into mainstream society. Therefore, international experiences must be drawn upon to better understand how this transition process can successfully occur.

Vocational Training and Employment for Persons with Disabilities: International Good Practices, Strategies, and Models

Introduction

Persons with disabilities belong to the poorest segment of every society and face daily exclusion and discrimination. Generally, people with disabilities confront significant barriers in accessing vocational training and employment, as well as in exercising their fundamental rights to education and employment, and the region of Europe and Eurasia is no exception. A long-term initiative to fully integrate persons with disabilities into open employment should address the educational and employment barriers and strive to identify innovative approaches that will produce desired results. Also, emphasis on gender equity should receive special attention in view of the fact that women with disabilities often face multiple barriers related to poverty, disability, and gender, which results in increased social exclusion and discrimination—even more than what is faced by male counterparts.

Addressing the barriers that persons with disabilities confront and providing appropriate interventions will require initiatives on policy, fiscal, and human resource development, as well as practical applications, all of which will need to be monitored and evaluated. It is critical that people with disabilities are included in such initiatives; that employers, representatives from the private sector, and possibly trade unions are engaged not only as technical experts but also as facilitators of work-based training options; and that experienced and novice skills development trainers provide input into the process as well.

The vocational training and employment models presented later in this section reflect a range of models that have been successfully implemented internationally for persons with disabilities in efforts towards

gainful employment. Segregated, sheltered vocational training and employment models are more restrictive in nature and are generally reserved for individuals who would have a difficult time functioning independently in open society. However, the employment trial and the supported employment models have successfully transitioned persons with moderate and severe disabilities into open employment. Mainstream vocational skills development approaches such as apprenticeship training and on-the-job training are currently being adopted internationally for persons with disabilities because of the success that they have demonstrated. Lastly, open, competitive employment (wage employment), self-employment, and social enterprises are employment options for persons with disabilities who may not require continuous support.

With respect to the implementation of these models in Europe and Eurasia, international organizations and non-governmental organizations such as UNDP, ILO, and Handicap International have introduced such vocational skills training and employment models on the community level as alternative approaches to an institution-based service delivery system. In addition to national policies and strategies as was described earlier, those community-based approaches to service delivery have also been piloted by DPOs in countries like Russia, Croatia, and Romania.

Best Practices, Strategies, and Models in Europe and Eurasia

One of the few examples of an initiative to address workplace accommodations and job development for persons with disabilities is a project implemented by a Russian NGO, Perspektiva, with funding from the Ford Foundation (Perspektiva, 2005). The purpose of the project was to motivate youth with disabilities to seek job skills training and employment opportunities through an inclusive employment approach. This meant focusing on creating an enabling environment that accommodated all individuals irrespective of their educational backgrounds, work histories, and/or personal characteristics. Such an approach was appropriate for all individuals irrespective of the disability group to which they belonged. The project focused on training employment agency personnel in job search skills and awareness raising activities so that they would acquire the skills necessary to provide employment-related services to persons with disabilities along with the non-disabled persons they already served. The impact on employment for persons with disabilities was not immediate and rather limited; however, awareness was created among employment service personnel that they can play an important role in mainstreaming people with disabilities.

In Croatia (Leutar, 2005), a unified strategy that addresses the high unemployment rate for persons with disabilities does not exist. In fact, some indicators of employment and disability reveal that in 2006, 48 percent of registered persons with disabilities had no work experience, and 78 percent of persons with disabilities had been registered as unemployed for longer than one year. Nevertheless, through the Right to Live in a Community: Social Inclusion of Persons with Disabilities Project, UNDP (2007) is developing and implementing a "supported" employment[3] model for persons with intellectual disabilities so that they can transition into and maintain open employment[4]. At the same time, the project is researching other employment options for persons with diverse disabilities.

Considering that countries in Europe and Eurasia are still in a transition from an institution-based to a community-based approach to service provision for persons with disabilities, changes in public

[3] Supported employment is defined as competitive work in an integrated setting for individuals who, because of their disabilities, need on-going support services to perform that work (Wehman, Sale & Parent, 1992).
[4] Open, competitive employment includes jobs in the open labor market that are subject to individual choice and/or suitability.

perception, legislation, and policy initiatives have had a limited impact on implementation efforts, especially on the community level. As a result, examples of "best practices" from within the region are scarce. However, the wide array of internationally well established and successful "best practices" and models in vocational skills training and employment-related services suggest that these same models could be adapted and applied in the context of Europe and Eurasia to improve the quality of service delivery as well as to facilitate the process of integration of persons with disabilities into mainstream society.

Internationally Applied Vocational Training Strategies and Models

Vocational training has been defined by the ILO (2006b) as activities to develop the knowledge, skill, and attitudes required for effective work in an occupation or group of occupations. It comprises initial, refresher and updating training, retraining and job-related training. It may also include general education subjects.

Vocational training and skills development is a central factor in enabling persons with disabilities to participate in the labor force. Individuals who gain access to marketable skills have demonstrated their potential to earn a living and contribute to the world of work. The development of vocational rehabilitation programs has its origin in the United States after World War I where arrangements were put in place for veterans and later for employees injured in the workplace (Metts, 2000). Early vocational rehabilitation models emphasized separate, specialized facilities. However, over the years the trend in service delivery has moved away from specialized, segregated institutions and towards mainstream, community-based programs. Vocational skills training is an essential instrument of public policy in support of persons with disabilities in that it looks beyond issues of passive support and custodial care and focuses on interventions that will enhance their quality of life (Bennell, 1999).) Nevertheless, as mentioned earlier, in many countries persons with disabilities do not generally attend school due to the various barriers they are confronted with, thus being denied the opportunity to develop important employability skills.

In terms of individual employment outcomes from skills training initiatives, numerous studies suggest that the "rate of return" on all forms of training can be substantial (Middleton, Zindeman & Van Adams, 1993). However, the context in which vocational skills training occurs is critical to its success. Vocational skills training in the absence of relevant economic opportunity will not produce results – even the best training is of little use if employment opportunities do not exist or are inaccessible – and ideally partnerships with potential employers need to be created. Potential employers can contribute to the creation of employment opportunities through their involvement and participation in the development of training curricula for vocational skills training programs. Skills training must be linked to employers and be adequately financed, efficiently organized, and sufficiently autonomous to meet employment needs. To ensure the entry of persons with disabilities into the labor market, vocational skills training for persons with disabilities is increasingly viewed as part of a package of inter-linked support measures rather than sufficient in and of itself, (ILO, 2006a).

Following are several sustainable vocational skills training approaches that have been successfully implemented internationally for persons with disabilities. The approaches range from specialized, segregated institution-based approaches to inclusive community-based approaches.

Specialized, Segregated Vocational Training

Vocational skills training for people with disabilities has traditionally been offered (especially in Europe and Eurasia) in sheltered, segregated settings—that is, in settings where people with disabilities are congregated and supervised or trained by people outside those groups (Powers, 2007). Sheltered workshops and/or segregated, specialized vocational skills training programs remain the principle means by which persons with disabilities acquire vocational skills in order to prepare themselves for the labor market. Such programs can play an important role for some individuals with more challenging needs but may not be the most appropriate approach to vocational skills training for the majority of persons with disabilities, particularly for those who are interested in integrating themselves into their communities through gainful, competitive employment in the open labor market. Specialized, segregated vocational skills training institutions are faced with several inherent challenges:

1. Sheltered services are only available to a limited number of individuals; they are primarily targeted at urban-based vulnerable populations, and they do not enhance social inclusion by their inherent nature.
2. Because sheltered settings rely primarily on subcontract work, the kinds of work available rarely resemble actual jobs in the community.
3. Persons with disabilities often do not acquire from a segregated, sheltered environment the employability and social skills needed for open, competitive employment.

Even though special, segregated institutions remain the principal venue for the provision of vocational skills training for persons with disabilities, increased efforts are focusing on the provision of such services to these target populations in "mainstream" institutions so that the potential beneficiary is better prepared to transition into competitive employment in the open labor market.

Specialized, segregated vocational training is best suited for <u>persons with moderate and severe disabilities.</u>

Inclusive Vocational Training

Inclusive vocational training is more than simply training disabled and non-disabled persons in the same place. Inclusive skills training requires that training providers proactively accommodate people with disabilities, modify the learning environment to ensure that it is accessible, and offer support so that all can succeed (O´Reilly, 2007). Inclusive vocational training can be provided by formal and/or non-formal short-term training programs run by NGOs, DPOs, and governments (similar to job corps in the US) that provide skills development in occupational trades. However, schools can also provide inclusive vocational education by integrating persons with disabilities into their vocational education programs. An inclusive vocational training approach is much more effective, sustainable, and possibly better at facilitating the integration into society of persons with disabilities than the segregated, institution-based approach (Powers, 2007).

In Europe and Eurasia, most education and vocational training programs are still state-run, with only few exceptions; inclusive vocational training models may take longer to be implemented in the mainstream education systems which has been confronted with constant downturns and overhauls since the early 1990s. Developing an inclusive, vocational training program should take into consideration all factors: existing legislation, infrastructure, human resources, curriculum, public awareness, and public attitude.

Failing to alter these factors may result in further discrimination. In Romania, for example, the law on child protection (2004) requires that children with disabilities be included in integrated education classes. The imposition of such a system without additional resources allocated to implement the law resulted in protests of non-disabled children's parents. The lack of public awareness, adapted instruments, and teachers' aids, and sometimes the lack of an adapted physical environment in and outside the schools, were real barriers. Pilot and demonstration programs are encouraging, and the number of schools that accommodate children with disabilities is increasing. However, five years since adopting the legislation, the principles of inclusive education are still far from universally accepted in Romania.

Some of the key elements and practical steps to be considered by policymakers and educators for the **design of a community-based inclusive vocational skills training system** include:

- The **integration** of disabled and non-disabled people into **one overall system**;
- The **involvement of disabled people** in all aspects of that system, including design and development of programs and the hiring of disabled people as trainers and teachers in these programs;
- A **barrier-free environment** that seeks to eliminate all types of barriers, including psychological. Infrastructure must be designed and built with accessibility for disabled people in mind, and existing facilities will need to be renovated. Accommodations should be made, systems must be accessible to all people, including people who are blind or deaf, and transport must be accessible;
- **Teaching methods** are adapted and assistive learning devices made available;
- **Career guidance** is offered so that people with disabilities can make appropriate choices. This includes individualized assessments of students' skills and proactive guidance that does not discriminate against people with disabilities;
- **A market driven approach** that ensures the quality of training and maximizes employment outcomes and the active **involvement of employers** to ensure that skills are developed in line with their needs;
- Recognition of the importance of cultivating **positive attitudes** – including the attitudes of non-disabled students and staff – to ensure a welcoming and supportive atmosphere for people with disabilities;
- A **teaching/training staff** and **disability specialist support staff** who can **adapt instructional methods and techniques** to ensure that all students, including those with disabilities, develop the vocational competencies they need;
- **Adequate resources** to support the training of all types of students;
- **Adequate preparation** of people with disabilities to ensure that they succeed in vocational training. This includes children with disabilities attending schools and succeeding in their basic education and building linkages between secondary schools and vocational education systems.

In terms of carrying out the training per se, the main assumptions guiding **inclusive training practices** to be considered are:

- People with disabilities have the same rights and responsibilities as others;
- People with disabilities have talents that can be identified and developed through training;

- People with disabilities are not a homogeneous group; their individuality, particular strengths, aspirations and needs must be recognized;
- It is not the impairment or limitation itself, but the effect that this impairment or limitation has on the individual's ability to access, learn and demonstrate knowledge and skills that is relevant. Making the learning environment accessible can minimize the effect of the impairment or limitation;
- Modifications of approach to accommodate disabled people often benefit other non-disabled trainees. For example, visual aids introduced to accommodate a person with a hearing impairment can result in an improvement in the comprehension of all trainees.

Community-based vocational **training institutions** that are inclusive in nature need to incorporate the following elements:

1. **A clear policy and a strategy for implementation –** Vocational training institutions need a clear policy that affirms the importance of all trainees and ensures that any trainee who may require additional support or resources is no less valued. A strategy that outlines how the organization will implement that policy is also needed.
2. **An inclusive curriculum** – A curriculum needs to be developed that does not create additional barriers for the trainee and his/her vocational training instructors. The curriculum defines the competencies required; it should not impose unnecessary restrictions on how these competencies are attained. For example, people with disabilities do not need, and certainly do not benefit from, a totally separate curriculum or training program. What they may need are individualized programs of work and modified instructional strategies.
3. **Effective, established links between the training institution, family and/or advocate, and community –** The support of families, advocates, and the broader community can contribute greatly to the success of vocational training programs, and vocational training institutions should seek to form partnerships with them to assure that all the needs of the individual are met.
4. **Adequate skills and knowledge base among the institution's staff –** Vocational training instructors need additional skills in assessment, curriculum development. and pedagogy. Efforts must be made to provide all institutional staff with basic skills in working with people from diverse vulnerable groups. Relevant knowledge, skills, and attitudes need to be shared with all staff of the institution. Employing staff with disabilities or from other vulnerable groups can assist this process and provide good role models.

Inclusive vocational training is well suited for <u>persons with and without disabilities alike;</u> however, some people with disabilities may require support services.

Employment Trial Vocational Training Model

Work/employment trial is a "work activity that provides experience in, or tests suitability for, a particular job" (CRS Australia, 2005). The work/employment trial is an employment opportunity generally supported by government funding which provides a person with a disability with the opportunity to work in an open employment setting with an employer who may or may not agree to provide a permanent employment opportunity at the end of the trial period. Implementing the work/employment trial model with persons with disabilities reassures many employers who are

originally hesitant about hiring from that cohort. To deal with the "risk" involved in hiring a person with disability, a probationary period within an employment contract or an employment agreement enables the employer to observe the work performance of the individual and decide whether he or she has the necessary skills, knowledge and attitude required for the job.

In essence, in a work/employment trial scenario, a fixed term employment contract with an employer may be signed for a three month trial employment opportunity. Ideally, during the three month work/employment trial, any employer concerns over work performance or productivity are minimized, and a mutual understanding between the employer and the probationary employee is deepened. If so, the aim of creating a regular employment opportunity may be achieved. In cases where regular employment is not secured by the probationary employee at the end of the three month trial period and the mutually agreed upon contract comes to an end, the person is released and begins to look for another employment opportunity.

In Japan, the work/employment trial model is part of a job search and pre-employment process that allows a person with a disability to participate in a trial employment opportunity for a three month period (JEED, 2008). In essence, a fixed term contract with an employer is drafted and signed; after the person with disability begins to work, his/her performance is monitored and evaluated periodically. The work/employment trial model is targeted at those employers who may be hesitant to hire a person with a disability and who need an opportunity to experience and observe the individual's work performance in order to become convinced of the value that such an individual can bring to the work place. During the work/employment trial, a job coach/employment specialist is present at the job site to provide direct, specialized support to the person with disabilities who is undertaking the trial.

In Australia, the work/employment trial model for persons with disabilities is comprised of three different types of trial arrangements (CRS Australia, 2005): (1) job sampling – for people who want to sample a job as a learning experience; (2) job training – for people who want a job to develop their skills; and (3) job auditioning – for people who are ready to work at capacity but need an opportunity to demonstrate their abilities when the necessary adaptations and supports are in place.

With the work/employment trial model, the goal of the trial must be determined at the onset because this will establish the nature of the relationship between the employer and the person with disabilities. Also, the goal of the work/employment trial has implications for all of the conditions that will be settled between the employer and the trainee such as eligibility, timeframe and conditions of employment, payment, nature of support, and obligations at the end of the work trial. Again, the purpose of this work/employment trial is to provide the person with a disability with an opportunity to perform a job in an open, competitive employment setting as well as to provide an employer the opportunity to observe the performance of the individual.

This model may be especially relevant in the Europe and Eurasia region due to the general skepticism that people with disabilities have the ability to be productive. Foreign and multinational companies with a culture of diversity in the workplace are generally more open to implementing this model and are a resource that can be used to demonstrate the work/employment trial and also to improve public perception. Individual success stories should be publicized to increase public awareness. Despite a general policy of employing people with disabilities in western countries, very few companies are willing to do so in Europe and Eurasia. Co-workers' attitudes are a concern, alongside the lower education levels of people with disabilities in the region compared to western societies (due to the lack of marketable vocational training opportunities). Nevertheless, there are good practices examples in the region demonstrate how this model can be implemented. Motivation Romania Foundation, for example, has successfully implemented this model (MRF, Annual Report, 2008). Its approach includes careful

selection and matching, counseling of both the employee and co-workers, and assistance in adapting the workplace, as necessary.

The Employment Trial Model of vocational training is best suited for persons with mild to severe disabilities.

On-the-Job Vocational Training Model

On-the-job training (OJT) is a carefully planned, on-the-job process that builds performance capability, especially for workers entering new jobs. It requires an appropriate work environment, careful selection, training and support of experienced workers for training roles, and support materials for learning and testing (Becker, 1962; Becker, 1964). This model is rather demanding at the analysis, design and development stages; however, the benefits are many when it comes to ensuring the successful acquisition of work-related and work-specific skills needed to maintain one's employment. On-the-job training is an approach that is being used more frequently with persons with disabilities (ILO, 2006a) so that they acquire job-specific skills required to perform a job for which they have been placed. On-the-job training schemes may be financed by the government or by private companies that are interested in hiring persons with disabilities as part of their social commitment. In Malaysia for instance, Carrefour supermarket chain provides on-the-job training to persons with diverse disabilities so that they can meet an in-house target of five percent disabled workforce; the City Council of Johor State in Malaysia also provides on-the-job training to persons with disabilities so that they, too, can meet a national target of one percent disabled workforce (UNDP, 2007b).

The central characteristics of a well-defined OJT program are: (1) learning takes place at the work site; (2) detailed training plans, including task analyses of how the job is performed that guide the training process; (3) an instructor and/or job coach who is knowledgeable about how to perform the job and all of its corresponding tasks and who guides the training process; (4) availability of support materials (i.e., tools and equipment) during the training process; and (5) well structured integration of the entire process so that trial-and-error with corrective feedback is included. In other words, the system is comprehensive and unified.

With respect to the learning process, the trainee observes and practices a specific work-related task under the supervision of an experienced trainer/job coach. All tasks are performed repeatedly until the trainee has demonstrated an ability to perform them independently at an established level of criteria. During the acquisition/learning phase, the trainer/job coach provides the necessary feedback so that the task is mastered.

The task acquisition process undertaken by the trainee follows a systematic process that includes such components as: (1) identification of the job-related tasks that must be mastered; (2) identification of the personnel who will assume the tasks of providing the on-the-job training at the work site; (3) preparation of the task analyses for the identified job-related tasks and the data collection forms used in the training process; (4) provision of on-site training based upon the principles of systematic instruction; (5) facilitation of the transition to natural support systems that will reinforce the independent work performance of the trainee/employee; and (6) evaluation and improvement of the OJT content and processes.

Numerous benefits result from providing OJT training vis-à-vis the successful transition to gainful employment for persons with disabilities. The identified benefits include reduced learning time, reduced training costs, acquisition of work-site specific skills, higher learning rate on job specific tasks, heightened

new worker job confidence, and the building of positive relationships between new and experienced workers at the work site. The Open Employment Model (UNDP, 2007b) currently being implemented in Malaysia has successfully adopted the OJT training approach in order to expedite the transition of persons with disabilities into gainful employment.

Implementing this model in countries in Europe and Eurasia may also require consideration of other elements such as: physical adaptation of the work place, training of co-workers, and in some cases finding solutions for traveling to the workplace, as often the public transportation infrastructure is not wheelchair accessible and access to wheelchair-adapted vehicles is not common.

The On-the-Job Model of vocational training is well suited for <u>all persons, including persons with disabilities.</u>

Apprenticeship

Apprenticeships have been providing a traditional method of developing vocational skills for individuals for many years. The ILO first recognized the relevance and value of an apprenticeship system of vocational training as far back as 1939 in the Vocational Training Recommendation No. 57 and in the Apprenticeship Recommendation No. 60. The traditional apprenticeship refers to a well-organized transfer of skills within families and social groups based on socio-cultural conventions. It consists of an agreement between the master craftsman and the parents or guardian of the apprentice regulating skills training. The modern apprenticeship is usually regulated by an "Apprenticeship Act" that stipulates the length of the training period, the training format, the number of working/training hours, the payment of (part of) minimum wage and the like (ILO, 2006b).

Good practices in apprenticeship training include such components as pre-employment training of apprentices conducted by an institution that establishes the apprenticeship agreement and the delivery of supplementary training to the master craftsman and the apprentice. Assisting in the development of the training plan and strengthening the teaching skills of the master craftsman constitute ways in which to improve the quality of skills training.

The apprenticeship approach to skills training is an alternative to other options that has important implications for persons with disabilities who are interested in learning in a community-based environment the technical, social, and entrepreneurial skills that one may need in order to transition successfully into open, competitive employment. Apprenticeship training has been a hallmark of job training for persons with disabilities over the years. Informal apprenticeship schemes have been established with family members or a person who is known for a small fee. Formal apprenticeship schemes for persons with disabilities have also been piloted by international agencies such as the ILO and UNDP, as well as with NGOs, e.g., Caritas, in a wide range of countries; one in particular is Cambodia (Poyhonen, 2004).

Apprenticeship as a model of vocational training is well suited for <u>persons with and without disabilities alike.</u>

Internationally Applied Employment Options

After an individual has completed his or her vocational skills training program, numerous employment options are available to him or her depending upon aptitudes, interests, skills, and capacity. Some individuals, particularly those who have a severe limitation or disability, may be better suited for an employment option within a sheltered employment scheme, while others may be best suited, and interested in, an open, competitive employment opportunity. Each individual person, regardless of the nature of the limitation or disability, should be provided with the opportunity to obtain employment in the least restrictive and most inclusive environment possible. Following are descriptions of the various employment options that should be made available to different groups of persons with disabilities upon completion of a vocational skills training program.

The open, competitive employment, self-employment, and social enterprise options may prove to be more appropriate to persons with less severe disabilities. The segregated employment and supported employment options are generally more suitable for persons with moderate to severe physical, sensorial, and/or mental disabilities. Having said this, the focus of this report is to facilitate and ensure access to vocational skills training and gainful employment in the least restrictive environment of the target population.

Open, Competitive Employment, Including Self-Employment

Open, competitive employment (sometimes referred to as wage-employment) includes jobs in the open labor market that are subject to individual choice or suitability. Open employment for persons with disabilities is facilitated through a range of strategies including employer awareness raising, employment promotional campaigns, government subsidies, and workplace accommodation so that it is accessible to the individual. ILO Recommendation No. 168 (1983) suggests that persons with disabilities should enjoy equality of opportunity and treatment with respect to access to, retention of, and advancement in employment that corresponds to their own choice and takes account of their individual suitability for such employment. Despite the fact that research indicates higher productivity levels in open employment versus sheltered employment for persons with disabilities (Power, 2007), their participation rates in the open labor market tend to be considerably lower than that of other workers.

For some persons with disabilities who live in areas where open and/or sheltered employment opportunities do not exist or are limited, or for those who have difficulty traveling to the workplace, self-employment may be the only practical option. In economic terms, self-employment may be the most cost-effective way of creating jobs, because frequently the capital requirements can be relatively small. Also, self-employment is not necessarily limited to an individual activity undertaken by one person. Examples of successful co-operatives or group business enterprises (see next paragraph) demonstrate how a number of persons with disabilities have come together in order to pool their resources and their skills and to start a business together. This form of self-employment has many advantages: (a) people can share the numerous responsibilities for the business; (b) they can take advantage of the economies in purchasing raw materials and operations that arise from the larger scale of their business; and (c) they can also benefit from the mutual support and encouragement of their fellow members/co-workers rather than laboring alone.

Open, competitive employment in the formal sector, public or private, has been the employment option sought for persons with diverse disabilities in Malaysia (UNDP, 2007b). Job coaches have identified employment opportunities, matched persons with disabilities to specific jobs, placed and trained them on-the-job (OJT) and provided follow-up services through an open employment model implemented by

the Johor State government. Self-employment is many times the most viable employment opportunity for persons with disabilities where formal sector opportunities are limited. Persons with disabilities who are transitioned into self-employment opportunities usually require business management training in addition to job skills training because they are expected to manage a business, e.g., customer service or accounting, as well as provide a service or produce a product. Self-employment was the primary focus of the ILO/DRT project in Cambodia (ILO, 2002c).

Open, Competitive Employment, including Self-employment is a well-suited model for persons with or without disabilities alike; however, those with more severe disabilities may require continued support.

Sheltered Employment

The concept of sheltered employment was originally based on the need to provide occupational activities for severely disabled persons who could not compete on equal terms with other workers in the open labor market. Such sheltered workshops often required heavy subsidies from public funds in order to meet costs of maintenance and operational losses (Kregel & Dean, 2002), which is also predominantly the case with the institution-based systems in Europe and Eurasia. However, this old concept of providing heavily subsidized work for persons with disabilities is gradually being replaced within a sheltered context by "production" workshop schemes. The essential difference between "production" workshops and traditional sheltered workshops is that the emphasis is placed on the production of saleable articles of a much wider variety; operations are carried out on commercial lines; and the employees generally include many categories of persons with disabilities and able-bodied workers as well.

Sheltered employment was created based on a belief that for some persons, due to their disability and limitations, open, competitive employment was not a feasible option. In fact, ILO Recommendation No. 168 (1983) as well as the UN Standard Rules on the Equalization of Opportunities for Persons with Disabilities (1993) – see Annex 2 – state that governments should "support the establishment of various types of sheltered employment as an alternative for persons with disabilities for whom access to open employment is not practicable." Any effort that focuses on sheltered employment must bear in mind that, as mentioned earlier, a built-in conflict of interest is present because many times the best workers (or those suitable for open, competitive employment) are often needed within the sheltered setting to perform the tasks associated with the subcontract work that constitutes most of the business for these establishments. Therefore, many sheltered employment schemes resist transitioning or placing their best workers in open, community employment opportunities because their departure can negatively impact the productivity and income of the sheltered workshop (Bellamy, Rhodes and Albin, 1986).

Sheltered Employment is a well-suited option for persons with severe disabilities.

Supported Employment

Supported employment is defined as competitive work in an integrated setting for individuals who, because of their disabilities, need on-going support services to perform that work. The term "supported employment" was first defined as "paid work in a variety of settings, particularly regular work sites, especially designed for handicapped individuals (a) for whom competitive employment at or above minimum wage is unlikely; and (b) who, because of their disability, need intensive, on-going support to perform in a work setting" (Albin, 1992). Over time, the definition of supported

employment has changed, but the characteristics across all definitions include the following: integration with able-bodied workers at the regular worksite, paid employment, individualized services, and on-going support (Wehman, Sale & Parent, 1992).

Supported employment was conceived and implemented as a mechanism to provide employment support to persons with severe disabilities. The principles and assumptions of supported employment are based on the initial work of Marc Gold (1972) and Lou Brown and Eve Pearce (1970) who demonstrated that persons with severe developmental disabilities could learn to perform complex, vocationally relevant tasks. These principles were coupled with increased acceptance of the principle of normalization (Wolfensberger, 1972) that led to greater expectations for persons with developmental disabilities to integrate with non-disabled persons in work settings.

The fundamental assumption of supported employment is that all persons, regardless of severity or nature of disability, should have the opportunity to work in the community. The supported employment model represents a significant deviation from, and alternative to, the traditional sheltered, as well as the open, competitive employment models. The supported employment model does not focus on the development of prerequisite skills prior to job placement, nor does it direct efforts only to those individuals who are deemed job ready (often after long periods of training) but rather suggests that the important elements of job success are the identification and development of meaningful jobs in the community and the provision of necessary on-site job accommodation, training, and support. It is a "place and train," rather than a "train and place" vocational skills and employment development model.

Compared to the situation in the early 1990s, persons with disabilities in Europe and Eurasia have gained increased access to the traditional vocational skills development "train-place" models whereby vocational training services are provided prior to job placement. However, this model/approach has accommodated only a small percent of all persons with disabilities. The "place-train" model with continued support after placement was adopted in the region as part of supported employment efforts in order to ensure that a greater number of persons with disabilities were successfully transitioned into gainful employment in the open, competitive employment market.

For many persons with developmental disabilities, paid employment, whether it is full- or part-time, is a key to independence and full participation in their communities. People want to work, for social as well as economic reasons. Active participation in the work force enables persons with disabilities to demonstrate their competencies and interact with non-disabled people in regular settings. Persons with disabilities have stated a preference for (paid) work over other training options.

Given the high levels of unemployment and underemployment of persons with developmental disabilities, the supported employment model has become an attractive program model among service providers in general, but particularly in Europe and Eurasia. One of its primary strengths is that the model has resulted in increased employment for persons with developmental disabilities within the regular labor market in the region and in general (Bellamy, Rhodes & Albin, 1986). This is in direct contrast to other "vocational training to employment training" models that often result in extended periods of "training" and never result in placement in real work settings.

Even though the supported employment model originated in the United States, it has been adopted internationally as a vocational training and employment model for integrating persons with severe disabilities into open, competitive employment opportunities. Burns (2007) states that the supported employment "place and train" model, when compared to other vocational rehabilitation models across six European countries, was found to produce the following results: (1) supported employment participants were likelier to gain employment, (2) the total cost of the supported employment "place

and train" model was less than traditional "train and place" models, and (3) individuals who had previous work experience had better job retention rates.

Jenaro, Mank, Bottomly & Doose (2002), who analyzed the relationship between supports and outcomes in supported employment across Australia, Germany, and the United Kingdom, found that (a) less natural support strategies during the entry process correspond to less typical job outcomes; (b) more typical interventions during the job development process correspond to better social, economic and performance outcomes; and (c) economic, social and performance outcomes are strongly encouraged. In other words, persons with disabilities who successfully adapt to the existing natural support system within the work site have a greater chance of maintaining their employment over time. A natural support is any strategy, resource, relationship or interaction provided by persons, procedures, instruments, or equipment that: (1) is usually found available in the environment where the person works and lives, (2) facilitates the positive results in the social, personal, and work environments, and (3) improves the quality of life of the individual. Thus, the need for job placement personnel to develop supportive work environments by using natural agents for persons with disabilities is critical to the production of a successful outcome.

According to Saloviita and Pirtimaa (2007), supported employment efforts in Finland seem to focus on a less severely disabled population than they worked with a number of years ago. A decline in the provision of intensive employment supports appeared to reflect both a change in European public policy on employment supports and a conceptual shift in supported employment from a paradigm for people with significant disabilities to a technical tool for the employment of people with limited support needs.

This model may be a solution to counterbalance the lack of marketable vocational skills of people with disabilities in Europe and Eurasia. Yet, in the absence of state subsidies for such services, the characteristics of the regional economies allow little or no place for supported employment. Legislation on subsidy, if not adequately formulated, may create further barriers to transitioning people with disabilities from supported employment to open job market. A subsidy for supported employment is an employer incentive targeted at boosting the demand for disabled workers. If the subsidy is perceived by the employer as insufficient to cover expenses associated with training and support, then the employer may lose interest in hiring persons with disabilities from the very beginning.

The Supported Employment Model is best suited for persons with severe disabilities; however, it is being used also with less severely disabled individuals.

Social Enterprises

Social enterprises are businesses that have a social purpose, for example, providing employment opportunities for those who have a difficult time finding employment. They are entities that function between the public and the private sector, are run and managed in a democratic way, provide equal rights to their members, and adhere to a special regime of property and distribution of profits whereby any surplus is reinvested in the growth of the entity and the improvement of services offered to its members and society at large (Viorreta, 1998; Borzaga & Defourney, 2001). By their nature, social enterprises adhere to their social mission and commit to the needs and capacities of persons with disabilities as employees. Social enterprises, which are supported by government policies of inclusion, recognize the value of creating employment opportunities for persons with disabilities and create workplaces that accommodate employees' needs in their governance, management, type of work, and on-going support. With the increased development and presence of organizations that represent international members from diverse disability groups such as DPOs, many believe that social enterprises

formed by such organizations could offer significant possibilities for new employment opportunities through cooperatives, mutual companies, or other associations that provide goods and services for which neither the market nor the public sector appear able to make adequate provision.

In Canada, the purpose of social enterprises is to provide employment opportunities for a segment of the population that has been traditionally excluded from open, competitive employment, including persons with disabilities (Broad and Saunders, 2009). Such social enterprises hire persons with disabilities in order to enhance their self-esteem, increase their independence, and broaden their social networks through their participation in the workforce. Two important components of this social enterprise model in the Canadian context are workplace accommodation and support strategies. Workplace accommodation and support services are critical to enabling the successful social enterprise model for persons with disabilities to balance revenue generating objectives with a mandate to employ a specific target population.

In Finland, the social enterprise model has been motivated by the need to improve employment opportunities for persons with disabilities who have been unemployed for a long period of time. Social enterprises are looked upon as a means by which to provide transitional employment to the population with disabilities and to improve their marketable skills so that they eventually obtain open, gainful employment (Pattiniemi, 2004). Similar to the Canadian model, two critical components of the social enterprise model in Finland are workplace accommodation and on-going support. Both the Canadian and the Finnish initiatives are supported by national and/or local governments.

Social enterprise is another preferred model in Europe and Eurasia, as many NGOs and DPOs created social enterprises as the only alternative they could provide for employment. The social enterprise model resembles a long-standing tradition of cooperatives for the disabled people that were established under communism and continue to exist in most post-communist and socialist countries (UNDP, EMES, 2008). The funding of international organizations and bilateral donors played a role in this transformation. The social enterprises have the double advantage of improving the sustainability of the organizations and offering employment to people with disabilities.

Social Enterprises are an instrument well fitted to support persons with and without disabilities alike

Recommendations

Even though the countries of Europe and Eurasia have historically segregated persons with disabilities, these same countries are currently experiencing a democratic transition towards a society that embraces such political, economic, cultural and social values and principles as equalization of opportunity and civil rights. Consistent with these values and principles is a keen interest in providing services to persons with disabilities that promote full participation and recognize their rights as citizens. Recognition of key rights is critical to the successful integration of persons with disabilities. They include the right to vocational skills training and to work. These key rights can be secured by developing the capacity of the vocational education school system, as well as NGOs, DPOs, and CBOs, to provide and/or support vocational skills development and employment-related services that are inclusive and rights-based and will facilitate the transition of persons with disabilities into open, competitive employment.

The recommendations section of the report intends to highlight areas of priority, in the form of a set of very concrete and practical "how-to" steps to guide USAID Missions that would like to develop

programming in vocational training and employment options for persons with disabilities. The recommendations also address the conditions necessary for these types of programs to be successful and describe "best practices" towards the objectives.

Next Steps - What Needs to Happen?

In order to facilitate the transition of persons with disabilities in Europe and Eurasia into open, competitive employment, vocational skills training programming must focus on creating an opportunity for this population to acquire the knowledge, skills, and attitudes that society deems necessary in environments that are as similar as possible to those of mainstream society. Inclusive, community-based initiatives are generally better positioned to provide persons with disabilities with the requisite knowledge, skills, and attitudes for open, competitive employment. Therefore, community-based services should be the focal point of any vocational training design efforts in the region.

Objective

Support national efforts that strive to (a) transition away from a centralized, institution-based service delivery system towards one that is decentralized and community based, and (b) strengthen the capacity of vocational skills training and employment-related programs so that a greater number of persons with disabilities seek, obtain, and retain positions in open, competitive employment.

Specific Benchmarks

- Support capacity development and coordination efforts across key stakeholders to respond in a timely and adequate fashion to the diverse needs of persons with disabilities;
- Support the development of a resource base for data collection and documentation of inclusive and rights-based vocational skills training models;
- In addition to government and institutional support, enhance the capacity of NGOs, DPOs, CBOs to design, develop, implement, monitor, evaluate, and publicize vocational skills training and employment programs and services for persons with disabilities;
- Support the development of community-based support services that will help persons with disabilities seek, obtain, and retain open, competitive employment.

What Must Happen in Order to Achieve the Aims?

The following list of recommendations is intended to contribute to the development of a comprehensive inclusive, community-based service delivery system. For practical purposes, priority should be given to supporting pilot interventions consistent with international "best practices", institutional capacity building initiatives, and the development of a strategic framework. Subsequently, the necessary support services should be developed:

1. For countries and/or communities that do not have a strategy or approach on how to transition from a centralized, institution-based to a decentralized, community-based vocational skills development system for persons with disabilities, support both the public and private sector in the development of such a strategy could prove beneficial;

2. For countries that lack institutional capacity to implement the services consistent with a national transition strategy, support institutional and human capacity building initiatives targeted at national, regional and local agencies, as well as NGOs, DPOs, and CBOs, in order to implement effectively and efficiently a decentralized, inclusive, community-based service delivery system;
3. Support the design, development, and implementation/piloting of different internationally recognized ¨best practices¨ in vocational skills training and employment-related interventions for persons with disabilities (addressed in this paper);
4. Support the development of community-based support systems, i.e., transportation and health services, required by persons with disabilities to secure and maintain open, competitive employment;
5. Support the development of a monitoring and evaluation system for decentralized, inclusive, community-based vocational skills training and employment models, as well as a service delivery system;
6. Support the creation of a coordination body that has the capacity to: (a) provide technical assistance in skills training and employment-related services to key implementing agencies; and (b) monitor and evaluate the implementation of vocational skills training and employment-related services to persons with disabilities.
7. Support the development of, or strengthen an existing advocacy group that will promote and support the inclusion of persons with disabilities into vocational skills training and employment-related services as well as strengthen inter-agency collaboration to ensure that persons with disabilities receive the support services necessary to maintain employment status.

Next Steps - How to Make It happen

Following the seven steps above that highlight the objectives, this section elaborates on how to achieve these goals.

1. For countries and/or communities that do not have a strategy or approach on how to transition from a centralized, institution-based to a decentralized, community-based vocational skills development system for persons with disabilities, support both the public and private sector in the development of such a strategy could prove beneficial.

Any national effort that focuses on creating an enabling environment for persons with disabilities should: (a) call for the restructuring of a service delivery system; (b) promote the development of inclusive, participatory national, regional and local structures; and (c) encourage all sectors of society (e.g., government, NGOs DPOs, CBOs, service providers, private sector and other social partners) to participate in the decision-making processes related to the development of national policies and strategies. A strategy development process that reflects a social model of disability and contributes to the creation of an enabling environment for persons with disabilities should embrace two key principles that are consistent with the promotion of an inclusive and rights-based society: participation and partnerships.

Any strategic framework that guides the transition process from a centralized, institution-based to a decentralized, community-based system must address at a minimum the following issues: (1) re-directing resources and financial incentives; (2) developing a transition plan for the closing of institutions (including institutions' staff, availability and accessibility of community-based services, public support); (3) establishing standards, licensing, and accreditation procedures for service provision; (4) determining gate keeping procedures that include such activities as needs assessment and mapping of services at the local

level and accessing criteria procedures for services and allocation of resources; (5) determining contracting and funding of services, and (6) monitoring and evaluating of services.

The following is a series of steps that may guide the strategy development process. These steps should be considered as a means by which to develop the strategy that will facilitate the transition process from a centralized, institution-based to a decentralized, community-based service delivery system.

Step 1 - Organize a participatory workshop, conference or forum that will create a framework to identify issues that must be addressed; identify the needs of the target populations; and develop a mechanism that can coordinate efforts and resources associated with the development of the strategy.

Step 2 - Establish an Inter-Agency Task Force that will coordinate and guide the strategy development process.

Step 3 - Develop a work plan, time schedule and operating principles for the Inter-Agency Task Force that will coordinate the development of the strategy. Goals to be included:

a. convene policymakers, families, communities, NGOs, DPOs and CBOs to raise awareness and mobilize change agents;
b. promote reform of the care and service delivery system and programs that support families, target populations, and community-based alternatives;
c. develop a framework on how to implement the components of the service delivery system, i.e., finances, access, standards;
d. determine what agency/entity should be responsible for coordinating the assessment of the target population and service delivery system;
e. identify services in the community that can provide help and support to target population and families;
f. design a decision-making process based on a systematic approach to the assessment and analysis of needs; and
g. design and implement an information system to provide feedback on the operation of the system.

Step 4 - Identify different issues to be targeted by the strategy.

Step 5 - Develop the draft strategy by Inter-Agency Task Force.

Step 6 - Present the draft strategy to stakeholders and for discussion and feedback.

Step 7 - Modify and finalize the strategy by Inter-Agency Task Force.

Step 8 - Present the final strategy for approval.

2. For countries that lack institutional capacity to implement the services consistent with a national transition strategy, support institutional and human capacity building initiatives targeted at national, regional and local agencies, as well as NGOs, DPOs, and

CBOs in order to implement effectively and efficiently a decentralized, inclusive, community-based service delivery system.

In order for countries in Europe and Eurasia to successfully transition from a centralized, institution-based delivery system for persons with disabilities to one that is inclusive and community based, the involved parties must draw upon "best practices," model programs, and lessons learned from successful vocational skills development and employment-related initiatives that have been implemented internationally and in the region. In countries where such models already exist, costs for capacity building can be reduced by organizing study visits and exchange programs to existing in-country models. A national strategy and efforts for integrating persons with disabilities into mainstream programs are necessary, but not sufficient, to ensure that a service delivery system is inclusive. Capacity building strategies and procedures that focus on the design, implementation, monitoring, and evaluation of inclusive, community-based programs must be developed. At the same time, a technical assistance mechanism must be developed so that the capacity of organizations is enhanced. In some countries, formal education programs might be needed to train professionals to staff services or to retrain existing professionals in new methods of implementing community-based programs. Organizations need to develop the capacity to provide support services such as pre-vocational skills training, life skills/basic education, employability, entrepreneurship, and employment-related services for persons with disabilities that are consistent with international conventions and practices.

Model vocational skills training and employment programs, provided by NGOs, DPOs, and CBOs that have the capacity to provide services to both disabled and non-disabled persons should work closely with the existing vocational training and skills development system that provides services to the general population. Decision makers (including local level) need to be persuaded of the advantages of these services for both persons with disabilities and their families, but also for the general public. Financially demanding programs are less likely to be replicated by State systems and should be carefully used as a demonstration tool. An inclusive approach to vocational skills training will develop the institutional as well as the human capacity of the existing vocational skills development system to provide services to persons with disabilities. Some of the modifications that may be necessary to add to the existing vocational skills training and employment programs are as follows:

- Establish community-based pilot projects that employ different vocational skills training modalities such as inclusive vocational training, community-based employment trial model, apprenticeship schemes and on-the-job (OJT) training.
- Support the participation and involvement of key stakeholders, i.e., government, NGOs, DPOs, family members, in all community-based vocational skills training and employment-related services.
- Develop the institutional capacity of DPOs and NGOs to provide vocational skills training to persons with disabilities.
- Redesign all vocational skills training and employment-related service facilities to that they comply with the international standards for universal design.
- Sensitize and technically support potential employers on workplace adaptation and accommodation strategies in order to ensure that persons with disabilities are successfully integrated into the work environment.
- Ensure that low-cost assistive technology is available in all community-based vocational skills training and employment-related services.
- Ensure that technical support on assistive technology is available to persons who have transitioned into gainful employment.
- Ensure that all community-based vocational skills training service providers complement their services by providing employment-related services. Employment-related support services include the following:

- Supported employment services for those persons with disabilities who need the support and presence of a job coach in order to acquire and maintain job-related skills.
- Disability awareness training for employers and co-workers at the work site in order to ensure that a supportive work environment is created which will enhance the transition of the person with a disability into gainful employment.
- Provision of follow-up services to the person with a disability who has been placed in an open employment position by a job placement officer in order to learn from the employer, co-worker and the disabled worker about how well s/he is adapting to the new job.

3. Support the design, development and implementation/piloting of different internationally recognized ¨best practices¨ in vocational skills training and employment-related interventions (presented in this paper) for persons with disabilities.

The need exists to support the development and piloting of different skills training and employment models for persons with disabilities in the Europe and Eurasia context. Such skills training and employment models should be based on the premise that any person, irrespective of a disability, has the right to work for norm-based wages in an integrated employment setting. Unlike employment schemes that label persons as unsuitable for "open" employment opportunities because of the severity of their disability, the models that should be supported must be flexible enough to accommodate varying levels of disability.

Such skills training and employment models should not only focus on the development of prerequisite skills prior to job placement, nor direct their efforts only to those individuals who are deemed job ready (often after long periods of training), but rather should also focus on some of the other important elements of job success for persons with disabilities such as the development of meaningful jobs in the community as well as the provision of necessary on-site job accommodation, training and support. Such models should be flexible enough to be both "place and train" as well as "train and place". In other words, vocational training and employment models should be able to accommodate both persons who have completed a vocational skills training program as well as those who have never received vocational skills training but have the capacity to learn how to perform a job through "on-the-job training" after placement.

A comprehensive vocational skills training and employment model for persons with disabilities should include at a minimum the six components from the following diagram:

SKILLS TRAINING AND EMPLOYMENT MODEL

The six components or services begin with the preparatory phase of equipping an individual with the knowledge, skills and attitudes required for a specific job and end with the follow-up and/or follow-along services provided after placement in order to ensure that the individual is successfully transitioning into gainful employment. To follow is a description of the various components:

Job preparation. Job preparation refers to activities associated with obtaining a sound understanding of the career goals and interests of an individual participant, providing him/her with vocational guidance and/or orientation services regarding a viable employment option, and obtaining a sound understanding of the local labor market general trends and potential community employment opportunities. Vocational guidance incorporates the provision of comprehensive information advice and guidance on education, vocational training, and employment opportunities.

Job development. Job development refers to activities associated with following up identified employment opportunities for persons with disabilities through telephone calls, correspondence, and personal contacts, as well as identifying vocational and social skills required for a specific employment opportunity.

Job match. Job match refers to assessing an individual's characteristics in relation to specific job requisites.

Job placement and training. Job placement and training refer to procedures utilized to (a) place an individual into an open, competitive employment environment, and (b) train an individual with the specific vocational and social skills needed to successfully perform the job. In addition to the job placement and vocational skills training techniques, this component employs job modification strategies needed to adapt the job to the individual's specific disability.

Follow-up and/or Follow-along. Follow-up and/or follow-along refer to support services provided to the person with disability who has been placed into open, competitive employment that help ensure maintenance of his/her employment. Such services consist of personal visits and telephone contacts with the individual who has been placed, as well as with his or her employer/supervisor to determine if the individual's job performance is being maintained at an acceptable level.

4. Support the development of community-based support systems, i.e., transportation and health services required by persons with disabilities to secure and maintain open, competitive employment.

In order for many persons with disabilities to maintain their employment in an open, competitive setting, the coordination of support services must be available. Some individuals have specific health, social service, transportation and/or housing needs that if not met and coordinated may impact negatively on the ability of the person with disabilities to maintain his/her employment. If such community-based support services are not available and/or accessible, it is recommended that such services be developed and supported, and temporary solutions be found in the meantime to provide access to such support services.

5. Support the development of a monitoring and evaluation system for successfully implemented, decentralized, inclusive, community-based vocational skills training and employment models, as well as service delivery systems.

The monitoring and evaluation system of skills training and employment models and/or programs will allow institutions and organizations to assess the degree to which they are implementing a conceptual model and its related services, as well as the extent to which such a model is providing persons with disabilities with the necessary knowledge, skills, and attitudes to become gainfully employed. A monitoring and evaluation system can function as a formative and summative evaluation tool for the implementation of the model and/or program. The same monitoring and evaluation system can also serve as a means by which to assess staff performance vis-à-vis the implementation of the model. Lastly, the results of the monitoring and evaluation process can help identify areas of weakness in a vocational skills training and employment program that may require further technical assistance. Weak performance may be remedied by targeted technical assistance.

6. Support the creation of a coordination body that has the capacity to (a) provide technical assistance in skills training and employment-related services to key implementing agencies; and (b) monitor and evaluate the implementation of vocational skills training and employment-related services for persons with disabilities.

Achievement of the overall goal, which is to increase the number of persons with disabilities who seek, obtain and retain positions in open, competitive employment will require significant adaptations in the way in which services are provided. The adoption of such interventions will depend on several important issues. First, the will and support of key stakeholders; second, a legislative framework that will guarantee the stability of results; third, the allocation of sufficient resources to ensure that "best practices" and "model" are developed and implemented: and fourth, maintenance of the financial where-with-all to continue providing quality services.

An effort that focuses on contributing to the creation of an enabling environment for persons with disabilities in vocational skills training and employment calls for the support of the key stakeholders in the implementation, monitoring and evaluation of "pilot" or "model" programs. To achieve the overall goal, a strategy of active stakeholder consultation and engagement should be implemented. By involving all of the key stakeholders in consultation and forming a "body", it is hoped that there will be a common understanding of the problem and a sharing of ideas and experiences that can help formulate solutions. Stakeholders who have contributed to analyzing the problem and developing solutions are more likely to become invested in implementing those solutions. It is hoped that these consultative activities will foster stakeholder commitment and joint ownership of the initiative.

7. Support the development of, or strengthen an existing, advocacy group that will (a) promote and support the inclusion of persons with disabilities in vocational skills training and employment-related services; and (b) strengthen inter-agency collaboration to ensure that persons with disabilities receive the support services necessary to maintain employment status.

Disability organizations in Europe and Eurasia have been very active in the areas of advocacy, awareness raising, and sensitization. The production of national disability policies, legislation and acts are a direct result of their efforts. NGOs, DPOs and CBOs can also play an important role in the advocacy of inclusion for persons with disabilities in vocational skills training and employment programs. However, some organizations may not have a comprehensive understanding of the potential advocacy role that they can play. In many countries in the region, DPOs and NGOs still lack the capacity to assume all of the responsibilities associated with advocacy and sensitization activities. In such cases, capacities need to be developed so that organizations are better able to plan, implement, monitor and evaluate activities that support initiatives and programs that focus on vocational skills training, employment and disability.

There is a critical need for NGOs, DPOs, and CBOs to obtain information about effective vocational skills training and employment programs and initiatives. A lack of such information has had a negative impact on policymakers as well as on practitioners by reducing their abilities to make well informed decisions. The information gathering and dissemination role could provide useful information needed as part of the decision-making process. The advocacy campaigns that could be implemented by these organizations need to be targeted at different audiences.

Some sample activities that could be included in an awareness campaign might be awareness workshops for persons with disabilities, their families, and other support groups. The aim of such workshops would be to (a) increase awareness amongst persons with disabilities and their families on current employment recruitment systems; (b) raise preparedness of persons with disabilities for employment selection processes and to provide advice and information on where to receive such support; and (c) encourage family support for their participation in open employment.

With respect to employers, awareness activities should be focused on encouraging the hiring of persons with disabilities in the following ways (a) conference with employers; (b) distribute resource materials such as a video and fact sheet; (c) brief on "model" employers; (d) showcase the employment model; (e) share "best practices" and experiences of employers who are employing persons with disabilities; (f) provide factual information on adaptation, "how to," benefits for their companies (e.g., access to population with disability, diverse team culture, etc.).

Conclusion

European and Eurasian countries have a wealth of international "best practices" and experiences to draw upon as they embark on their own effort to transition from a centralized, institution-based to a decentralized, community-based vocational skills training and employment service delivery system for persons with disabilities. This report draws upon documentation from the international resource base on inclusive, community-based vocational skills training and employment models and services in order to provide countries in the region with approaches that could be adopted and developed for their own population with disabilities. As part of any comprehensive approach or strategy to provide community-based vocational skills training and employment services to persons with disabilities, it is recommended that the following activities be given priority: (a) "pilot" projects that employ the different vocational

skills training and employment models be supported; (b) participation and involvement of key stakeholders from the governmental, non-governmental and disabled persons' sectors in the design, development, implementation, monitoring and evaluation of such projects; and (c) implementation of capacity building and coordination efforts across key stakeholders and vocational skills training and employment service providers. Likewise, any comprehensive approach or strategy would be further enhanced if the other recommended activities are adopted as well. Gainful, open employment for persons with disabilities in Europe and Eurasia will be attained if an inclusive, rights-based vocational skills training and employment service delivery system is developed and implemented.

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Annex 1

Tables on Prevalence of Disability in Europe and Eurasia

Table 1. UNDP Disabled Population Estimates (1997)

Country	Total Population	Disabled Population (Low Estimate)	Disabled Population (High Estimate)
Albania	3,000,000	111,000	297,000
Armenia	4,000,000	148,000	396,000
Azerbaijan	8,000,000	296,000	797,000
Bulgaria	8,000,000	296,000	797,000
Croatia	4,000,000	148,000	396,000
Georgia	6,000,000	222,000	594,000
Kazakhstan	17,000,000	629,000	1,683,000
Kyrgyzstan	5,000,000	185,000	495,000
Macedonia	1,000,000	37,000	99,000
Moldova	4,000,000	148,000	396,000
Romania	18,000,000	666,000	1,782,000
Tajikistan	6,000,000	222,000	594,000
Turkmenistan	4,000,000	148,000	396,000
Ukraine	52,000,000	1,924,000	5,148,000
Uzbekistan	27,000,000	814,000	2,178,000

United Nations Development Programme (UNDP), Human Development Report (1997)

Table 2. World Bank Disability Estimates for Europe and Eurasia (circa 2003)

Country	Total Population	Disabled Population	Disabled Pensioners
Albania	3,200,000	84.565	31,051
Belarus	9,900,000	477,324	308,000
Bosnia & Herzegovina	4,060,000	23,163	83,061
Bulgaria	8,100,000	438,912	8,644
Croatia	4,400,000	n.a	237,000
Georgia	4,600,000	43,245	199,407
Kazakhstan	14,800,000	388,700	358,400
Kyrgyzstan	4,900,000	60,166	49,163
Macedonia	1,937,900	n.a.	52,514
Moldova	4,400,000	n.a.	119,942
Romania	23,000,000	414,620	752,101
Russia	144,100,000	11,233,900	4,800,000
Tajikistan	6,300,000	104,272	120,568
Turkmenistan	5,100,000	n.a.	71,200
Ukraine	48,700,000	2,260,711	2,676,018
Uzbekistan	25,300,000	817,000	574,400

World Bank, Administrative Statistics

The estimates in Table 3 are taken from a recent USAID study (Galbraith, 2009) that uses population data reported by national governments to the World Bank, and compares it with information on the number of persons with disabilities in country derived from limited national and international disability statistics, as well as from disabled people's organizations (DPOs) across the region, in order to calculate an estimated prevalence rate:

Table 3. USAID Estimated Prevalence of Disability in European and Eurasian Countries (2009)

Country	Current Population[1] (millions)	GDP 2008[2] (US$) (billions)	Population in Year of Most Recent Data[3] (millions)	Estimated Disabled Population[4]	Estimated Disability Prevalence[5]
Albania	3.14	12.29	3.13 (2007)	94,804	3.0%
Armenia	3.08	11.92	3.07 (2006)	148,656	4.9%
Azerbaijan	8.68	46.26	8.58 (2007)	281,000	3.3%
Belarus	9.68	60.30	9.70 (2007)	512,500	5.3%
Bosnia-Herzegovina	3.77	18.45	n/a	n/a	n/a
Bulgaria	7.62	49.90	7.91 (2001)	263,143	3.3%
Croatia	4.43	69.33	4.44 (2001)	429,421	9.6%
Georgia	4.36	12.79	4.43 (2006)	213,000	4.8%
Kazakhstan	15.68	132.23	15.15 (2005)	403,400	2.7%
Kyrgyzstan	5.28	4.42	n/a	n/a	n/a
Macedonia	2.04	9.52	2.04 (2006)	26,781	1.3%
Moldova	3.63[6]	6.05	3.76 (2005)	164,891	4.4%
Montenegro	0.62	4.52	0.62 (2008)	67,000	10.8%
Romania	21.51	200.071	21.55 (2007)	539,241	2.5%
Russia	141.80	1,607.82	142.10 (2007)	13,014,000	9.2%

[1] *Population 2008.* World Development Indicators database, World Bank, 15 September 2009.
[2] *Gross Domestic Product 2008*. World Development Indicators database, World Bank, 15 September 2009.
[3] World Development Indicators database, World Bank.
[4] Cara Galbraith, *The Prevalence of Disability in Europe and Eurasia*, USAID: Washington, 2009.
[5] Prevalence is based on the population estimate for the year in which the data was collected
[6] Includes Transdniestr.

Serbia	7.35	50.06	n/a	n/a	n/a
Tajikistan	6.84	5.19	6.17 (2000)	104,272	1.7%
Turkmenistan	5.03	18.27	n/a	n/a	n/a
Ukraine	46.26	180.36	47.45 (2004)	2,500,000	5.3%
Uzbekistan	27.31	22.3	26.49 (2006)	n/a	n/a

The household survey data from the Multiple Indicator Cluster Survey (MICS) disability module is particularly useful because it takes a biopyschosocial approach to disability, and rather than asking whether individuals in the household have been registered as disabled, it probes on how members of the household function and interact with their environment. That being the case, the results are quite different from the disability prevalence rates reported by national governments. **Table 4** below illustrates the differences in the data and the lack of participation among a number of countries in the region.

Table 4. Multiple Indicator Cluster Survey Estimated Prevalence of Disability in European and Eurasian Countries (USAID, 2009)[7]

Country	Prevalence in MICS study
Albania	11.1%
Armenia	Did not participate
Azerbaijan	Did not participate
Belarus	Excluded disability module
Bosnia-Herzegovina	6.5%
Bulgaria	Did not participate
Croatia	Did not participate
Georgia	14.4%
Kazakhstan	Excluded disability module
Kyrgyzstan	Excluded disability module
Macedonia	10.0%
Moldova	Did not participate
Romania	Did not participate
Russia	Did not participate
Serbia & Montenegro	11.3%
Tajikistan	Excluded disability module
Turkmenistan	Restricted access
Ukraine	Excluded disability module
Uzbekistan	2.0%

The countries with the largest variance between official reported data and household MICS data are Georgia and Albania. Further, some countries that do not have official data available, such as Bosnia-Herzegovina, Serbia, and Uzbekistan, have MICS data. These figures help shape the picture of the region.

[7] Cara Galbraith, *The Prevalence of Disability in Europe and Eurasia*, USAID: Washington, 2009.

Table 5. TransMONEE Total Number of Disabled Children in Residential Care (2009)

		1990	**1993**	**1996**	**1998**	**2000**	**2002**	**2004**	**2006**	**2007**
Albania	a	- n/a	- n/a	n/a	277	288	354	331	345	316
Armenia		4,145	3,498	3,445	5,124	4,875	3,456	2,043	1,935	1,707
Azerbaijan		3,326	2,464	2,166	2,661	2,979	3,219	3,705	3,051	4,290
Belarus		18,849	14,606	13,792	14,327	13,880	12,934	10,792	9,408	8,451
Bosnia-Herzegovina		-	-	n/a	n/a	1,238	1,318	1,451	1,553	1,511
Bulgaria		15,493	11,730	11,086	10,685	4,144	3,019	2,998	3,025	n/a
Croatia		3,348	-	3,047	2,455	2,777	3,266	3,090	3,283	n/a
Georgia	b	2,293	2,306	1,912	2,111	2,245	2,295	2,016	2,600	2,824
Kazakhstan		-	-	n/a	n/a	16,010	15,562	17,406	15,477	15,282
Kyrgyzstan		-	4,087	3,419	2,945	3,536	2,993	3,050	3,088	3,084
Macedonia		1,132	842	849	826	649	592	566	521	502
Moldova	c	11,381	5,550	5,400	5,340	4,788	4,770	5,506	5,003	4,674
Montenegro				n/a	n/a	390	388	342	366	n/a
Romania		-	-	n/a	n/a	n/a	n/a	5,909	n/a	10,108
Russia		255,484	206,744	202,305	194,785	183,976	174,432	162,221	149,409	141,848
Serbia	d	4,154	-	n/a	n/a	3,362	3,395	3,296	3,612	n/a
Tajikistan		3,877	2,392	1,400	2,246	1,537	1,892	1,937	2,140	1,774
Turk-menistan		197	299	247	240	2,775	2,721	2,732	2,568	n/a
Ukraine		10,458	8,716	8,276	8,024	7,977	7,781	7,716	7,304	7,158
Uzbekistan		15,645	14,142	13,612	14,956	16,961	18,079	16,133	16,694	n/a

a. Included disabled children 0-16 years residing in child homes, orphanages, boarding schools.

b. Data for 2005-2006 are UNICEF IRC estimates.

c. Data for 1992-2007 exclude Transdniestr.

d. Data for 1998 and 2000 exclude Kosovo.

S TransMONEE 2009 Database, UNICEF Regional Office for CEE/CIS, Geneva (adapted table)

Annex 2

Tables on United Nations Conventions

Table 1. Countries of Europe and Eurasia that have signed and ratified the United Nations Convention on the Rights of Persons with Disabilities

Country	Signatory	Date of Signature	Ratification	Date of Ratification
Armenia	X	3/30/2007		
Azerbaijan	X	1/9/2008	X	1/29/2009
Croatia	X	3/20/2007	X	8/15/2007
Kazakhstan	X	11/12/2008		
Macedonia	X	3/20/2007		
Montenegro	X	9/27/2007		
Serbia	X	12/17/2007		
Slovenia	X	3/30/2007	X	11/24/2008
Turkmenistan			X	4/9/2008
Uzbekistan	X	2/27/2009		

Table 2. Countries of Europe and Eurasia that have ratified the United Nations Convention on the Rights of Children

Country	Ratification	Date of Ratification
Albania	X	27/4/1994
Armenia	X	22/7/1993
Azerbaijan	X	12/9/1992
Belarus	X	31/10/1990
Bosnia-Herzegonia	X	6/3/1992
Bulgaria	X	1/7/1991
Croatia	X	8/10/1991
Georgia	X	2/7/1994
Kazakhstan	X	6/11/1994
Kyrgyzstan	X	6/11/1994
Macedonia	X	17/11/1991
Moldova	X	25/2/1993
Romania	X	28/10/1990
Russia	X	15/9/1990
Serbia	X	2/2/1991
Slovenia	X	25/6/1991
Tajikistan	X	25/11/1993
Turkmenistan	X	19/10/1993
Ukraine	X	27/9/1991
Uzbekistan	X	29/7/1994

Annex 3

Policy Initiatives and Guiding International Documents on Vocational Training, Employment and Rights of Persons with Disabilities

ILO Conventions and Recommendations on Vocational Rehabilitation and Code of Practices for Managing Disability

It is important to point out that equalization of opportunities for persons with disabilities in the area of vocational training and employment dates back more than 50 years when international initiatives that promoted and protected the full participation and civil rights of people with disabilities began to emerge as early as 1955 with ILO Recommendation 99. Equal opportunity and the use of existing services (for non-disabled persons) have been critical components to the International Labor Organization's (ILO) approach to disability. They are also addressed in ILO's Convention 159 concerning Vocational Rehabilitation and Employment of Disabled People (1983). In fact both Convention 159 and Recommendation 168 (1983) clearly claim the rights of persons with disabilities to equal opportunity and treatment in the workplace and to vocational rehabilitation and employment promotion services that help them achieve suitable and open employment.

ILO's Convention No. 159 stresses that "government policy should aim at ensuring that it is appropriate to all categories of the disabled persons and at promoting employment opportunities for disabled persons in the open labor market." The ILO Recommendation No. 168 also states that "disabled persons should enjoy equality of opportunity and treatment in respect of access to, retention of and advancement in employment which, wherever possible, corresponds to their own choice and takes account of their individual suitability for such employment."

Employment in the open labor market is an essential goal for persons with disabilities for three important reasons:

- Most adult disabled individuals need the reasonable income that can be obtained from gainful employment in the open labor market. Work provides economic rewards.

- Work in the open market satisfies fundamental human needs of developing and enriching life. Work is a right and a duty, and it is a matter of human dignity for every citizen.

- Open employment provides opportunities to integrate persons with disabilities in the normal flow of life, in which social relationships are formed, social skills are developed and social status is confirmed.

Policy issues related to ILO Convention No. 159 should focus on the development of National vocational rehabilitation policies that incorporate input from employers, labor unions and persons with disabilities. Such policies should address issues of equity and foster open employment. Action that should be taken includes the delivery and evaluation of vocational rehabilitation services as well as staff training and the development of a cadre of competent personnel in vocational rehabilitation.

The ILO Code of Practice for Managing Disability in the Workplace (2002) offers employers specific guidance about integrating and retaining disabled workers. The Code calls for employers to develop a policy for disability management that is based on the concepts of equal opportunity and treatment and

that includes the principle of non-discrimination in recruitment, human resource development, compensation, promotion and return-to-work.

The Code of Practice for Managing Disability in the Workplace (2002) offers an opportunity to the private sector because service providers (vocational rehabilitation providers) must learn to serve a new customer—the business community as a recipient of the target population that receives vocational training and employment-related services. Also, national policy makers must include employers in policy making and implementation activities. Likewise, policy makers and service providers must deliver high-level skills training to persons with disabilities in order to ensure that workers with all types of disabilities gain access to jobs. Lastly, trade unionists can help foster the integration of persons with disabilities into the mainstream labor force by removing barriers, providing supports to disabled colleagues on the job, representing their interests and encouraging co-workers to assist with their integration.

UN Declaration on the Rights of Mentally Retarded Persons

In 1971, the UN General Assembly proclaimed a Declaration on the Rights of Mentally Retarded Persons. The Declaration affirmed that persons with mental retardation had the same rights as everyone else. In the area of vocational training and employment, the Declaration stated that persons with mental retardation had the right to education, training, rehabilitation and guidance; the right to economic security and a decent standard of living; and the right to perform production work or to engage in any other meaningful occupation to the fullest possible extent of their abilities.

UN Declaration on the Rights of Disabled Persons

In 1975, the UN General Assembly proclaimed a Declaration on the Rights of Disabled Persons. The Declaration affirmed that persons with disabilities had the same civil and political rights as other people as well as the right to education, vocational training, counseling and placement services, the right to secure and retain employment or to engage in a useful, productive and remunerative occupation.

UN Standard Rules on the Equalization of Opportunities for Persons with Disabilities

The Standard Rules on the Equalization of Opportunities for Persons with Disabilities were adopted by the UN General Assembly in 1993. Employment of persons with disabilities is covered by Rule number seven. According to the rules, States should support the integration of persons with disabilities into open employment; design and adapt workplaces so that they are accessible to persons with disabilities; support the use and development of assistive devices, tools and equipment; include persons with disabilities in training and employment programs in the private and informal sectors to mention but a few.

United Nations Convention on the Rights of Persons with Disabilities (UNCRPD)

The United Nations Convention on Rights of Persons with Disabilities (UNCRPD) is another binding convention on disability (ILO Convention 159 was the first). This Convention was adopted by the UN General Assembly on December 13, 2006. The Convention is a human rights tool with development objectives (inclusion); it formalizes a paradigm shift in framing disability from a "medical" model to a "social" model. It does not establish new rights but clarifies and qualifies existing Human Rights procedures and sets strong responsibilities for State parties, including reporting obligations.

The UNCRPD provisions on vocational training and employment embrace key ILO principles such as: (a) recognition of the right of persons with disabilities to gain a living by work which is freely chosen or accepted, (b) equal opportunity, (c) equal treatment, and (d) non-discrimination. According to UNCRPD action to improve opportunities in work and employment are guided also by the principles of accessibility, equality between men and women, respect for inherent dignity, individual autonomy and full and effective participation and inclusion in society. Action to improve opportunities in work and employment will be guided by several of the general principles underlying the Convention – the principles of non-discrimination, equality of opportunity, accessibility, equality between men and women and the principles of respect for inherent dignity, individual autonomy and full and effective participation and inclusion in society.

Two articles of the Convention specifically address vocational training, work and employment. Article 24 states that countries must ensure that persons with disabilities are able to access vocational training without discrimination and on an equal basis with others. Article 27 promotes the access of persons with disabilities to freely-chosen work, general technical and vocational guidance programs, placement services and continuing training as well as vocational rehabilitation, job retention and return-to-work programs. Additionally, the Convention recognizes that self-employment or micro enterprises may be the only employment opportunity for persons with disabilities, and therefore access to training required for self-employment should be provided. With respect to labor and trade union rights, the Convention recognizes the right of persons with disabilities to exercise such rights. This means that employers' associations and trade unions must play a greater role in the social and economic integration of persons with disabilities.

Decent Work for Persons with Disabilities (2007)

Decent work has been defined by the ILO as opportunities for women and men, including those with disabilities, to obtain productive work in conditions of freedom, equity, security and human dignity. The ILO promotes the goal of decent work for all as a central objective of relevant national and international policies, as well as of national development strategies.

The Decent Work Agenda (DWA) is based on the premise that the creation and maintenance of decent work is the most sustainable and effective means for individuals, families and communities to work out of poverty. The ILO's DWA is made operational through national Decent Work Country Programs (DWCPs) that are developed by the ILO after a thorough country assessment with the participation of national constituents, and in consultation with UN agencies and a range of other stakeholders.