



# Advocacy messages on the Ukraine DI strategy



# Introduction

In 2022, Ukraine officially received the status of a candidate country for EU membership and pledged to move closer to European human rights standards, including ensuring the right to independent living for people with disabilities who currently live in segregated and isolated institutions. Three years later, about 47,000 people with disabilities and older people remain isolated from the community in 259 large institutions and 305 other segregated settings.

In 2024, Ukraine adopted, as part of the EU enlargement process, and in line with the conditionalities attached to the disbursement of the Ukraine Facility, long-awaited national Strategy for reforming psychoneurological and other residential institutions and deinstitutionalising care for adults with disabilities and the elderly by 2034 or Deinstitutionalisation (DI) Strategy. While formally meeting a milestone required under the Ukraine Plan, the Strategy raises serious concerns among organisations of persons with disabilities and other civil society actors.

The drafting process was largely top-down and lacked meaningful participation of rights-holders and their representative organisations. Instead of laying the foundation for a systemic transition to independent living in the community, the strategy focuses on gradual adjustments to the existing institutional system. Without substantial revision and safeguards, this strategy may become tokenistic exercises that may satisfy reporting requirements but fail to deliver genuine reforms or to advance Ukraine's alignment with the EU acquis and the UN Convention on the Rights of Persons with Disabilities.

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This advocacy activity was organized with the support of the International Renaissance Foundation as part of project "Creating the preconditions for an independent and dignified life for all" and in partnership with the "Whole-of-Society Accession" project. Content of this publication is the exclusive responsibility of the authors and does not necessarily reflect the views of the European Union and the International Renaissance Foundation.

**We are specifically concerned about:**

## **1. Weak conceptual basis and misunderstanding of DI principles**

The Strategy and Operational Plan, which together form the basis of the Government of Ukraine's approach to deinstitutionalisation until 2028, reveal a systemic conceptual weakness and fundamental misunderstanding of the nature and objectives of deinstitutionalisation. Key concepts such as legal capacity, supported decision-making and personal assistance are being incorporated into unchanged institutional frameworks, without a genuine paradigm shift from substitute decision-making and institutional care towards inclusion and independent living. In practice, this risks creating the appearance of reform while sustaining segregation and exclusion of persons with disabilities through small group homes, inflexible services, inaccessible social housing and substituted decision-making. The lack of clear definitions of key concepts such as independent living, institutions and criteria for their identification creates room for manipulation within the implementation.

### **Recommendations to the Government of Ukraine**

1. Apply a comprehensive approach to ensure that the State's commitment to deinstitutionalisation is systematically integrated across all national measures related to the development of human capital. This includes housing, inclusive education, veterans' policy, employment, and social protection, in line with the obligations arising from the UN Convention on the Rights of Persons with Disabilities and the EU acquis.
2. Ensure structured and systematic participation of persons with disabilities, including survivors of institutionalisation and local organisations of people with disabilities, in all stages of policy development, implementation, and monitoring through a **formal advisory mechanism under the Government**, in line with **Articles 4(3) and 33(3) CRPD** and the **EU acquis on participatory governance**.
3. Conduct a comprehensive review of all relevant domestic legal framework to fully align its content with the Convention, as per

CRPD Committee's 2024 recommendations to Ukraine. This should include applying CRPD-compliant definitions in all national documents in the field of disability (strategy, operational action plan, state standards of social services, etc.) and providing training and awareness-raising activities to the government officials and civil servants at all levels.

### Recommendations to the EU

- a. Use all venues available, including pre-accession processes and human rights dialogues, to assess the quality of DI reforms, not just their formal adoption. The reviews should specifically consider the [EU Guidance on Independent Living for Persons with Disabilities](#) and the [UN Guidelines on deinstitutionalisation, including in emergencies](#).
- b. Make alignment with CRPD-based reforms a horizontal condition for EU funding under the Ukraine Facility and other instruments, with clear qualitative milestones on legal capacity reform, personal assistance legislation, and inclusive housing policies.
- c. Provide sustainable funding and technical support to Ukrainian civil society and independent human rights mechanisms so they can strengthen the government's understanding and application of independent living, supported decision-making, and legal capacity reform.
- d. Include Ukrainian organisations of persons with disabilities in all relevant EU fora on with the view to building their capacity and visibility and also to gain a vision of changes and reforms from the perspective of the Ukrainian community of people with disabilities.

## 2. Insufficient measures to address the rising number of institutionalised persons during the Russian full-scale invasion of Ukraine

Despite the warnings and recommendations set out in the UN Guidelines on deinstitutionalisation, including in emergencies, alarmingly, admission to institutions has become easier during the war, leading to a significant increase in the number of institutionalised persons, particularly among internally displaced persons, veterans, older persons, children with disabilities, which is also indicated by the Concern 22(h) of the UN Committee's Concluding Observations. The Strategy's Operational Plan lacks concrete prevention measures and does not include mechanisms to stop new forms of institutionalisation, such as shelters, rehabilitation centers, and dormitories for internally displaced persons. Without targeted prevention and short-term safeguards, the number of institutionalised persons will continue to grow, undermining long-term DI goals in line with international commitments.

### Recommendations to the Government of Ukraine

1. Integrate DI measures into evacuation and emergency response plans according to the Guidelines on deinstitutionalisation, including in emergencies, in particular by ensuring an adequate number of accessible places and sufficient service and support opportunities in communities for evacuees with disabilities, as well as by limiting the re-institutionalisation of evacuees from institutions and gradually transitioning them to life in communities.
2. Prohibit new admissions to institutions during wartime, including "temporary" placements that often become permanent and to prohibit the institutionalisation of veterans through long-term or permanent stays in rehabilitation centers, which are inherently institutions.
3. Use the EU funds effectively to promote transition from institutional to community-based care.
4. To ensure appropriate digital record keeping across the country,

create a centralised and secure digital system to collect and process data about institutionalised persons. This database should include disaggregated data on individuals' profiles, pathways into institutions, health and support needs, and the types of assistance provided, with the objective of informing deinstitutionalisation policies and the transition to community-based services.

5. Ensure independent and regular access to all institutional settings for civil society organisations, representative organisations of persons with disabilities, independent experts, and the media, to enable transparent monitoring, research, and pilot initiatives in deinstitutionalisation, in line with Article 33(3) CRPD, the EU acquis on transparency and accountability.

### **Recommendations to the EU**

a. Require that EU-funded humanitarian programmes and post-war recovery investments include explicit prohibitions on financing institutional placements that replicate institutional settings, as well as for investments in the institutional system, including the reconstruction, reconstruction and creation of new institutions.

b. Increase the coherence of the external actions of the EU and its Member States on development and humanitarian assistance in a human rights-based manner according to the nexus approach, in particular regarding the consistent refusal to support the functioning and reconstruction of institutions within the framework of humanitarian response, including in Ukraine.

c. Call on Ukraine to introduce emergency measures to support people at high risk of institutionalisation in the community, rather than admitting them to institutions.

d. Provide emergency funding and technical assistance for community-based housing and support options tailored to wartime realities and also support local organisations that implement similar projects and provide humanitarian assistance to people with disabilities based on a human rights approach.

e. Request Ukraine to regularly collect and provide disaggregated data on the number of people entering, residing in, and leaving institutions during wartime and recovery.

### 3. Absence of effective safeguards against funding institutions

The EU considers “completed” the precondition for the disbursement of the Ukraine Facility funds linked to the adoption of the DI Strategy. However, in the absence of a systemic approach to monitoring the use of funds in line with international and EU’s own guidance on independent living, the EU runs the risk of repeating failures in the Member States where EU resources are known to perpetuate institutional care and compromising the continent’s human capital, as evidenced by the [European Ombudsman’s 2021 inquiry](#).

#### Recommendations to the Government of Ukraine

1. Include organisations of persons with disabilities and other civil society groups in consultation and monitoring structures, supporting their capacity to act as watchdog, in particular by creating an Interdepartmental Coordination Council on the implementation of the Deinstitutionalization Strategy and involving civil society organizations of people with disabilities and self-advocates in it, to enable meaningful participation.
2. Strengthening the representation and agency of the Ukrainian community of people with disabilities, including people with psychosocial and intellectual disabilities, self-advocates and survivors of institutionalisation, through their involvement in consultations and decision-making processes, ensuring an appropriate level of their accessibility.

#### Recommendations to the EU

- a. Strengthen financing safeguards in the Ukraine Facility and other financial instruments by explicitly prohibiting investments in institutional care, including small institutions.
- b. Improve coherency of the EU’s actions and those of Member States to prevent continuous financing of institutions by Member States.
- c. Introduce strict monitoring and corrective measures: condition disbursements on Ukraine setting clear quantitative and

qualitative DI targets, and establish a transparent and accessible EU-level feedback and complaints for rights holders and civil society organisations.

d. Call for a creation of a structured consultation platform on DI bringing together the government, civil society partners and survivors of institutionalisation with the view to ensuring EU funds are contingent on meaningful participation.

# About Fight For Right

**Fight For Right** is one of Ukraine's leading organisations of persons with disabilities, advancing human rights, equality, and inclusion in line with the UN CRPD and EU acquis. Since its establishment, Fight For Right has become a driving force behind Ukraine's disability rights movement, combining advocacy, research, humanitarian action, and leadership development.

During the full-scale Russian invasion, Fight For Right built one of the first disability-led **emergency** response systems in Ukraine, providing legal aid, psychosocial support, evacuation coordination, assistive technology and humanitarian support distribution in frontline areas.

Fight For Right founded the **Disability Research Center**, the first and only in Ukraine, which has produced over 50 analytical materials to support disability reforms.

Fight For Right was the first to publicly advocate for deinstitutionalisation and launched the country's first DI information **platform** and **media campaign**.

Our **Leaderka School** of Political Participation for Girls and Women With Disabilities and Veterans-Women's With Disabilities Programme empower women and girls with disabilities to lead.

Through evidence-based advocacy, partnerships, and EU integration efforts, Fight For Right continues to build an inclusive and democratic Ukraine.

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