### PUBLIC POLICIES REGARDING PERSONS WITH DISABILITIES

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#### Abstract

Objectives of the study: the study aims to analyze public policies regarding people with disabilities. The research methods used are the qualitative research method and the observation method. Results and implications of the study: children, and as they continue to become adults, in the short term, in order to diminish suicide attempts, they must be monitored so that the traceability of the integration of persons with disabilities can be determined from the moment of their institutionalization. In the long run, these people with disabilities will integrate and from sustained people will become supporters of social health, unemployment and pension insurance institutions, relevant to the change process.

**Keywords:** institutionalization of children, social center, medical center, legal representative, guardian, placement.

JEL Classification: K23

### 1. Identification of the problem

The research showed that the institutionalized child care system for children with disabilities is not correlated with that of the disabled adult. In other words, once an institutionalized child becomes an adult, he is forced to get out of the system in the absence of public policy perspectives to help him integrate into society, the family and the labor market.

On the other hand, the main problem in finding a job for people with disabilities is the level of education. The rate of non-schooling is seven times higher and the drop-out rate after the primary cycle is twice as high as the general population. Thus, the identified problem regarding the inclusion of people with disabilities in the labor market is intrinsically linked to the level of education<sup>2</sup>.

The quality of education in segregated education or in home education is perceived as significantly weaker.

At the same time, the motivation of people with disabilities to follow training according to the needs of the labor market is low.

Inclusion involves adapting education to the needs of a person with disabilities.

#### 2. New approaches in relation to existing doctrinal approaches

What is new in relation to the existing doctrinal approaches is that it envisages an integrated vision of the researched problem and a unitary solution and with the involvement of several institutions, authorities, bodies, as follows: National Authority for Persons with Handicap, National Agency for Employment, Ministry of Labor and Social Justice, Ministry of National Education, Ministry of Transport, local public authorities, public media bodies: TVR, Radio Romania, Agerpres, etc.

#### 3. Structure of research

The theme addresses public policies on people with disabilities.

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<sup>&</sup>lt;sup>2</sup> Alexandru Ticlea, Laura Georgescu, *Dreptul securității sociale, Curs universitar*, 7<sup>th</sup> edition, Ed. Universul Juridic, Bucharst, 2016, p. 121; Claudia Ana Moarcăș Costea, *Dreptul securității sociale*, Ed. C.H. Beck, Bucharest, 2013, p. 52; Denisa-Oana Pătrașcu, *Drept social. Curs universitar*, Ed. Universul Juridic, Bucharest, 2014, p. 71.

Public policies are defined as the totality of the activities carried out by the specialized central public administration in order to solve the identified public policy problems. A certain solution can be implemented through one or more normative acts<sup>3</sup>.

Disability is defined as the physical, mental or mental state, which limits a person in movement, activity, reception<sup>4</sup>.

The rationale behind the research is that these people with disabilities could become dependent, less dependent or even independent. The addiction situation is a consequence of illness, trauma and disability and may be exacerbated by the absence of appropriate social relations and economic resources according to art. 31 par. (2)<sup>5</sup>.

## 3.1. Public policies in the field of social protection of persons with disabilities

Responsibility for developing their own social integration capacities and active involvement in resolving situations of difficulty rests with each person and his / her family, the state authorities intervening by creating equal opportunities and, in the alternative, by providing social assistance benefits and adequate social services. The State, through the central and local public administration authorities, assumes responsibility for implementing the measures and actions stipulated in the normative acts on the benefits of social assistance and social services. The State, through public policies in the field of social services, contributes to promoting, respecting and guaranteeing the beneficiaries' rights to an independent, fulfilled and dignified life, as well as facilitating their participation in social, economic, political and cultural life. The central public administration authorities ensure the elaboration of the legal framework in the field of social protection, support of disadvantaged categories, fight against poverty and social exclusion, development of family support policies throughout the life cycle of its members and transfer to public administration authorities local and civil society, including the worship institutions recognized by law, the powers and financial means necessary for the social assistance actions provided by the special laws<sup>6</sup>.

To protect and promote the rights of people with disabilities, public authorities have an obligation to include the special needs of this category of people in all public policies, regional, county or local development strategies and programs, as well as in government programs<sup>7</sup>.

The complex assessment of people with disabilities and people who have lost at least half of their work capacity and the elderly is aimed at identifying in detail the needs of the person and developing a strictly individualized support program that contains all the social measures and services , education, medical, rehabilitation and adaptation / rehabilitation needed to be granted to the person to facilitate his social integration / reintegration.

The complex evaluation process mainly pursues the following aspects:

- (a) assessing physical, mental and sensory capacities for disability, disability, or dependency, as well as determining the level of impairment of functional autonomy with regard to the ability to carry out the usual activities of daily life, learning abilities and adaptation to an independent life, and the ability to meet the requirements of a profession / occupation;
- b) assessing the family's ability to provide the necessary conditions for childcare, care and education, as well as to meet the maintenance obligations;
  - c) assessing the physical and social environment in which the person and / or family live;
  - d) assessing the degree of social integration or integration;
- e) assessing the person's potential to engage in actions, programs and support services to overcome difficulties;
- f) assessing the person's perception of their own needs, their vulnerability and their consequences on personal safety and security<sup>8</sup>.

<sup>&</sup>lt;sup>3</sup> http://www.dictionar.1web.ro/administratiepublica/politici+publice/ consulted on 1.10.2017.

<sup>&</sup>lt;sup>4</sup> https://dexonline.net/definitie-dizabilitate, consulted on 1.10.2017.

<sup>&</sup>lt;sup>5</sup> Social Assistance Law no. 292/2011, published in the Official Gazette of Romania no. 905/20.12.2011, with the later modifications.

<sup>&</sup>lt;sup>6</sup> Idem art. 3.

<sup>&</sup>lt;sup>7</sup> Idem art. 80.

On the basis of the results of the complex assessment, special protection measures, personal care services and social assistance benefits or other social security benefits, as the case may be, are established<sup>9</sup>.

Following the comprehensive assessment, an individualized care and assistance plan is drawn up which, in order to be effective and workable, must take into account issues relating to:

- a) the motivation of the person or his / her legal representative to ask the state authorities for assistance and care;
- b) motivation of the person to participate actively in the recommended intervention programs, intervention measures and social services;
- c) negative consequences for the person in the case of failure to provide necessary social services;
  - d) own perception of functional capacity, performance and resources;
- e) the capacity of the informal network made up of family members, friends, neighbors or other unqualified persons who take responsibility for the care of the person, to provide social services;
  - f) support needs of formal and informal care and support staff;
- g) the existence of social services in the community, the way they can meet the needs of the person, as well as the access of the beneficiary to the respective service.

On the basis of the results of the complex assessment, the beneficiary is presented with the list of accredited providers of existing services that can fully or partially cover the identified needs. The Beneficiary has the right to freely choose from accredited service providers.

The provision of social services is based on the individualized assistance and care plan developed by the social service provider with the agreement and participation of the beneficiary.

In order to monitor the effectiveness of the social services provided, as well as to determine the continuation of the intervention or removal of the case, the situation of the beneficiary is reevaluated periodically<sup>10</sup>.

In the case of personal care services at home, their allocation is planned and scheduled in daily, weekly or monthly visits, distributed at regular intervals.

Personal care at home can be formal and informal:

- a) formal care is ensured by the qualified, professionally certified person;
- b) informal care is provided by family members, friends, neighbors or other unqualified persons who take responsibility for the care of the person.

Dependents in need of assistance and / or continuous monitoring may benefit from day care provided at home, formal caregiver for more than 8 hours / day, consecutive or distributed at regular intervals throughout the day.

Exceptionally, personal care given at home can be insured for more than 8 hours / day, informal carers or carers qualified trainers, only the law.

Dependent people who request assistance in residential centers have priority if they do not have a family or their family can not provide the necessary care.

Care services that help to carry out the instrumental activities of daily life are provided by informal and volunteer carers and, in their absence, by formal carers<sup>11</sup>.

# 3.2. Public policies on social assistance for disabled children

In order to ensure the implementation of social policies in the field of child, family, elderly, disabled, as well as other persons, groups or communities in social need, the local public

<sup>&</sup>lt;sup>8</sup> Idem art. 49.

<sup>&</sup>lt;sup>9</sup> Idem art. 50.

<sup>10</sup> Idem art. 51.

<sup>&</sup>lt;sup>11</sup> Idem art. 52.

administration authorities have attributions regarding the administration and granting of benefits of social assistance and social services<sup>12</sup>.

Any child who is temporarily or permanently deprived of his or her parents has the right to alternative protection consisting of the establishment of guardianship, special protection measures and adoption.

The special protection consists in the institution of the placement measure and the provision of social services for the care and development of the child up to the full exercise capacity, accompanied by the benefits of social assistance.

Decisions to separate the child from their parents or to limit the exercise of parental rights are necessarily preceded by social information and counseling, therapy and mediation services addressed to parents.

Young people who have benefited from special protection measures and do not have the possibility of returning to the family who are at risk of social exclusion may benefit, on request, from continuing to grant special protection measures for a specified period of time.

The protection measures are established by the individualized protection plan, drafted, applied and monitored by the authorities / institutions empowered by law<sup>13</sup>.

The disabled child is entitled to support and care measures tailored to his or her needs.

He and his parents, as well as those who have been placed in placement or guardianship, benefit from social services designed to facilitate the effective and non-discriminatory access of children with disabilities to education, training, healthcare, recovery, training to fill a place work, recreational activities, and any other activities capable of allowing them full social integration and personal development.

He is also entitled to personal care services established on the basis of the socio-psychomedical assessment and individual needs of help to carry out the usual activities of daily life.

The child with disabilities for whom the measure of guardianship or placement of a family or person has been instituted, if at the age of 18 years he / she does not attend a form of education or professional training, according to the law, may remain in their care for a further 3 years.

Only in the case of obtaining the family agreement or the consent of the person who was placed in placement or guardianship, the measure may be applicable at the request of the young person.

The child who does criminal acts and is not criminally responsible, benefits from special protection measures, namely placement and specialized supervision, as well as social services meant to support him / her in the process of social reintegration.

Throughout the period of application of the measures aimed at the child who commits criminal acts and is not criminally liable, his / her family benefits from social counseling services and support for facilitating the fulfillment of the obligations stipulated by the law during the specialized supervision period<sup>14</sup>.

Social services in the field of child and family protection have as their main objective the support provided for the child care, growth, formation, development and education within the family.

#### 4. Details of the research methods used

The research methods used are the qualitative research method and the observation method of the qualitative analyzes, the thematic analysis was the one used.

#### 5. The proposed solutions

The proposed solutions are as follows:

<sup>&</sup>lt;sup>12</sup> Idem art. 112.

<sup>&</sup>lt;sup>13</sup> Idem art. 70.

<sup>&</sup>lt;sup>14</sup> Idem art. 72.

- 1. Children and going on as they become adults in the short term to reduce suicide attempts should be monitored so that the traceability of integrating people with disabilities from the institutionalization can be determined.
  - 2. Development of urban infrastructure for people with locomotory disabilities
- 3. Development of a system of services aimed at people with disabilities: strictly home schooling for children with disabilities.
- 4. Organize information and awareness campaigns for people with disabilities about the importance of pursuing a form of education and, subsequently, training programs.
  - 5. Develop a flexible national curriculum

#### 6. Conclusions

#### 6.1. Research results

The research results are as follows:

- a. Tracking, tracing the integration of people with disabilities from the moment of institutionalization, in the case of children and continuing with the moment they become adults in the short term, will diminish suicide attempts among them.
- b. In the long term, these people with disabilities will integrate and from supported persons will become supporters of the social, health and unemployment insurance and pensions

# **6.2.** The way they are used

The way of capitalizing them will be done by communicating the results of the research in one of the following forms: elaborating a detailed research report; publishing articles on the topic in specialized journals, developing guidelines for informing the target audience, participating in scientific communications, communicating within a university lecture.

### **Bibliography**

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