



ANED country report on the implementation of policies supporting independent living for disabled people

Country: Romania

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PART 1: EXECUTIVE SUMMARY AND CONCLUSIONS

Theoretically, in Romania people with disabilities benefit mainly of some rights and facilities, in accordance with Law no. 448/2006, Regarding the Protection and Promotion of the Rights of Disabled Persons, Published in Official Gazette no. 1006 – December 18, 2006, Republication 1 OG no. 1 – January 3, 2008. This law has many gaps, makes differences between disabled people according to their age and the deficiency causing their handicap, does not remove the existing barriers and does not prevent the apparition of new barriers; people with disabilities can be confronted with: educational, access to goods and services, employment, independent living, etc. Other laws make little reference to people with disabilities or are not applied – for instance the mental health law, where a lot of provisions are not applied (http://www.ms.ro/fisiere/pagini_virtuale/114_163_Law_on_Mental_Health.pdf).

In the Disability Manifesto in Romania (Report of Romanian National Council of Disability, 2003, Bucharest) referred to the fact that the national policies have started to provide the need for social dialogue, collaboration and integrating approach in the matters regarding the people with disabilities, in reality, in each social sector, the problems of the people with disabilities are treated separately; sometimes they are avoided or even ignored. In the disability field, lack of cooperation between various governmental bodies can still be noticed. The changes promoted at the level of the authorities and institutions dealing with the problem of the disabled, are not enough in order to determine a change at the community and at the society level at large.



PART 2: LEGAL AND POLICY CONTEXT

In Romania the principal laws and official documents relevant to independent living for people with disabilities are:

- [Law no. 448/2006](#), Regarding the Protection and Promotion of the Rights of Disabled Persons, Republication (last [amended in June 2008](#)) [269/207](#) provides detailed rules for implementation.
- Norms for accessibility in the built environment are set out in [NP 051 2001](#) \ (<http://www.integration.ro/?id=253>).
- Law on mental health and protection of people with mental disorders (http://www.ms.ro/fisiere/pagini_virtuale/114_163_Law_on_Mental_Health.pdf).
- The [National Strategy for the Special Protection and Social Integration of Disabled People in Romania](#) was approved in 2002, based on the principles of the 1993 UN Standard Rules, and addresses: rehabilitation; special education; equal opportunities; support services.

In Romania the protection and promotion of the rights of disabled persons are based on the following principles: the observance of the fundamental rights and freedoms of the human being; the prevention and fight against discrimination; equal chances; the adaptation of society to the disabled person; equal treatment as to labour employment and occupation of labour force; the freedom of option and the control or decision on one's own life, services and forms of support one benefits from; the person-focused approach in providing services; the choice of the least restrictive alternative in determining the necessary support and assistance; the social integration and inclusion of disabled persons, with equal rights and obligations as all the other members of society (Law no. 448/2006, chapter I, art. 3). All these principles are in line with international norms, but in reality are still some simple theories (discrimination, equal chances, the freedom of options is not understanding correctly in community, in decision structures and in people perception and mentality).

In the same law (Law no. 448/2006) we can read in some chapters that the public authorities (National Authority for Disabled Persons - ANPH - a governmental body with responsibilities for policies, national and regional strategies and intervention programs for all person with disabilities, managing services, proposing legislation and monitoring NGOs) shall take the following special measures: creation of the access conditions for all the types of services corresponding to the individual needs of disabled persons; initiation, support and development of social services focused on the disabled person, in collaboration or in partnership with legal, public or private persons; assurance of the weight of the specialized personnel employed in the disabled persons protection system by reference to the types of social services: social assistants, psychologists, ergotherapy instructors, kinetotherapists, recovery pedagogues, logopedists, psychopedagogues, supporting teaching staff, specialized educators, psychiatrists, dentists, hospital attendants; involvement of the family of the disabled person in the activities related to his/her care, rehabilitation and integration; assurance of training in the specific problem of the disabled person of the personnel performing its activity in the protection system of disabled persons, including of personal assistants and professional personal assistants; development and support of collaboration programs between parents and experts in the handicap field, in collaboration or in partnership with legal, public or private persons.

Also, disabled persons shall benefit from social services granted: at the domicile, in community, in day centres and residential, public or private centres. The social services destined to disabled persons shall be protected and adapted according to the person's individual needs. (Law no. 448/2006, Regarding the Protection and Promotion of the Rights of Disabled Persons, [Published in Official Gazette no. 1006 – December 18, 2006, Republication 1 OG no. 1 – January 3, 2008](#)).



In fact, we can not identify more positive experiences and practices in communities because they don't have availability and resources (financial, human and logistics). Most of those working in social services and institutes for people with disabilities have not enough expertise and professional resources to be effective. In the last 10-15 years the entry of young professionals, trained in schools of psychology and pedagogy has begun to make changes in the system of services for people with disabilities (between 1978-1990 psychology, pedagogy and social sciences were prohibited by the communist regime).

The protection of disabled persons is financed from the following sources: the local budget of communes, towns and municipalities; the local budgets of counties, respectively of the sectors of the Bucharest municipality; the state budget; monthly contributions for the support of the disabled persons benefiting from social services in the centres; donations, sponsorships and other sources, as provided by law ([Law no. 448/2006](#), as [amended in June 2008](#)). [269/207](#) provides detailed rules for implementation). Details about the composition and allocation of budgets are approved by the financial general law (for funds from the state budget) and approved by the local authorities (for funds at the local level). Unfortunately, in every year there are counties where there are problems related to these budgets, as funds are not arriving on time or do not cover the needs of beneficiaries.

To be more clear, the financing system of the social services is established by the social services legislation but there is much question about the application of these norms. Theoretically, the principle is that the local councils have to finance the basic social services, which's aim is to keep the person in need in family and community and prevent the social exclusion. The county councils have to finance the specialized social services, which aim to rehabilitate the person, or to maintain her/his potential at the best possible level. These specialized services are usually residential. Practically, the majority of local and county councils depend financially on allocations from the central governmental budget.

There is no calculated cost per service on a national level, so the governmental allocations for social services assured by local authorities are not transparent, are not based on an elaborated methodology and are not stable. In this situation, when the income of local authorities does not cover the costs, the majority of these authorities have very serious fears to start new services or to subcontract them to the NGOs. Subcontracting also is usually practiced in the bigger municipalities and counties, where authority incomes are higher, but depend a lot on the will of the key political decision maker (mayor, county council president) and relationships with the NGO leaders. This situation is possible also because there is no established minimal level of social services which has to be assured to any citizen of the country. In this way, a citizen from a big and developed city has access to many more services than a person from a village.

Legal competence is defined in Art. 948 of the [Romanian Civil Code](#) and mental capacity is defined in Art. 5 of the Romanian Mental Health Law 2002, as 'compatible, at a certain moment, with the exercise of civil rights or the carrying out of other specific activities'. It is characterised, in particular, by the ability to discern the 'content and the consequences' of a specific act, and is assessed by medico-legal expertise (although there is no standard form of assessment). Țătaru (2008) suggests that definitions of competency are shifting 'from generalized concepts of incompetence to a more specific construct of incapacity to perform specific tasks' (p151). Judgement of incapacity is made by the Courts. In cases of legal incapacity there is provision for either partial ('Curatela') or total ('Tutela') guardianship. The local authority can decide who the guardian will be (see also [Leat 2009](#)).



PART 3: PROGRESS TOWARDS INDEPENDENT COMMUNITY LIVING

In Romania Law 448/2006 specifically addresses the right to independent living (articles 29 and 50) and is underpinned by a set of guiding principles including (at article 3) the right to the freedom of choice and control or decision about one's life, services and the type of support one receives and the requirement to choose the least restrictive option when determining the assistance and support needed.

Unfortunately, in Romania of this moment, most persons with disabilities are not respected yet as persons with equal rights and their value and human dignity are not fully recognized. At this moment, in Romania, the person with disabilities is confronted with a series of handicaps created by the society. The fundamental rights are being violated, not by the way they are formulated and stipulated in the law, but by the impossibility of having real access to them. Usually, the people with disabilities form a disadvantaged, marginalized and seldom discriminated group. These conclusions are included in the following official reports: [The Disability Manifesto in Romania](#) and the [Final Report of Phare Program: Access to Education for Disadvantaged Groups](#).

The widespread concept is that people with disabilities are limited people, lacking the abilities to learn and participate at important events; consequently they are regarded as being dependent. Often people with disabilities are appreciated through the perspective of their social productivity only. Other frequent activities are indifference, contempt, or fear for the problem of disability (Report of Romanian National Council of Disability, 2003, Bucharest).

People with disabilities do not have an adequate voice at the level of designing social policies and are not given yet their rightful place, as participants and decision makers in the elaboration of the strategies for the development of the society. They are either not consulted at all or their points of view are not accepted or integrated, or are not informed at all. The individual does not often know, his/her rights and interests, feels lonely and isolated. There are few organizations orienting the disabled in an individual way (*The Bulletin of National Institute for Prevention and Control of Social Exclusion for People with Disabilities* - INEPCESPH, Bucharest).

Although many positive experiences are known, the real partnership between the state organizations and the disabled organizations is still insufficiently developed: at decision making level at the service providing level and in providing orientation towards the necessary support forms and structures. The media often presents disability as being a 'charity and philanthropic' matter, and not as topic of observing fundamental human rights. In spite of the fact that the promotion of a correct image and in general of the adequate policies regarding people with disabilities both at local and national level has started, we appreciate that ensuring their personal identity, of their autonomy of their participation at the social productive life, at the cultural, leisure activities, etc do not reach an international standard – including the policy level, attitudes and social practices ([Final Report of Phare Program: Access to Education for Disadvantaged Groups](#), 2005).

Official data is published on the numbers of people with disabilities who are supported in family homes and in institutions. The table below shows the most recent figures:

	In institutions	Out of institution	total
Children	84	60,433	60,517
Adults	16,943	565,998	582,941
Total	17,027	626,431	643,458

(source: ANPH, *Quarterly statistical bulletin on labor and social protection No.2 (66) / 2009* at 31 March 2009, <http://www.mmuncii.ro/ro/632-view.html>):



For those in institutions, the largest numbers were people classed as having ‘mental handicap’ (Mintal) 8,085 and ‘psychic’ conditions (Psshic) 4,538. The figures were not reported by gender.

General disability statistics are available from the National Authority at <http://www.anph.ro/tematica.php?id=13&idss=41>

Each person who needs special intervention and services can access institutional services (if these have free places or conditions). For this, some documents are necessary (details on http://www.anph.ro/info_utile.php?m=informatii).

We were unable to identify how much money is spent on institutional care compared to community care, but the protection of disabled persons is financed from the following sources: the local budget of communes, towns and municipalities; the local budgets of counties, respectively of the sectors of the Bucharest municipality; the state budget; monthly contributions for the support of the disabled persons benefiting from social services in the centres; donations, sponsorships and other sources, as provided by law (Law no. 448/2006, chapter VIII).

In 2006, the amount of RON 3,463,000 was allotted from the state budget for special protection and socio-professional integration of disabled adults.

Two new residential institutions were set up for more than 200 persons, professional qualifications for 300 disabled persons were established, 31 ambulatory care centres for neuromotor recovery were developed and training for 160 persons working in the field. Capital repairs of 14 residential centres were funded, as well as sanitation and endowment of 45 centres.

During the period 29 November 2005 – 29 October 2007, the Phare project (2003/005-551.01.04 “Supporting the reform of the system for disabled persons protection”) and state financed 78 new services (protected homes (45), centres of integration by occupational therapy (5), care and assistance centres (13), neuropsychic recovery and rehabilitation centres (10), day centres (4), “respiro” centres (1).

There is still some investment in new institutions in reforms of the system 2007-2011 (e.g. in the ‘Social Inclusion Programme’ financed by IBRD at €14,400,000) includes setting up 20 protected homes and 16 social assistance centres for disabled adults.

The National Strategy for the Special Protection and Social Integration of Disabled People in Romania (2002) provided the follow aims: a. Prevention of institutionalization (limitation and prevention of residential admissions, family help, family counselling, emergency services - institutionalization risk for disabled persons); b. Institutional restructuring (individualized intervention plans for each beneficiary based on each person’s needs and potential. In the long term, institutions having more than 50 assisted persons will be gradually transformed, the final aim being their elimination. As a long-term objective an individualized plan for gradual restructuring of state residential institutions will be implemented. This will be possible only when an alternative of community care will be provided. The staff working in these institutions will be re-qualified in order to join the new communitarian services); c. development of the alternative assistance and special protection system; d. de-institutionalization (initiating new services for different age groups and types of deficiencies, development of the existing services and collaboration with foreign and Romanian NGOs that have proved a real, professional and efficient involvement during the last few years).



In the National Strategy, the main challenges over the next reference period, namely 2008-2010, focus on: the prevention of social exclusion, the continuation of efforts to improve the access of citizens to their social rights; the development of multidimensional prevention programmes in order to avoid putting citizens into exclusion situations; the implementation of customized measures by means of aimed interventions when a potential risk is identified and could lead to an impairment on living conditions; improving the access to resources for families who are in social exclusion situations, which may contribute to increasing the level of well-being in the society; monitoring programmes developed by the responsible authorities and developing a reference system with a well-established periodicity regarding the progress being made; organizing continuous sensitivity and awareness campaigns for citizens regarding their rights. In order to deal with all these challenges, public authorities must focus their measures to ensuring the access of various institutions/bodies/authorities/public or private natural persons to the best and most efficient absorption possible of structural funds. The implementation of the commitments of this report benefits from the advantages of Romania's first cycle of access to structural funds (National Strategy for the Special Protection and Social Integration of Disabled People in Romania).

In Romania we have *National Council for Combating Discrimination*. For example, this Council has influence in the follow areas: prevention of discrimination, investigation, fact finding and sanctioning discrimination, monitoring cases of discrimination, provide specialized assistance to victims of discrimination. Also, *Romanian National Council of Disability* and *National Institute for Prevention and Control of Social Exclusion for People with Disabilities* have responsibilities and programs for prevention of social exclusion of people with disabilities.

Finally I can say that I agree the conclusions (which are still available) of *Romanian National Council of Disability* in *The Disability Manifesto in Romania* from 2003. In Romania there are an important number of people with disabilities in large residential institutions, in particular for people with intellectual and mental health. Community services are still at an early stage of development. Those offered by the organizations for the disabled are not sufficiently promoted and valued. There are rigid legal norms, excessively bureaucratic, the accounting system provisions – which prevent or limit without justification the development of such services. Lack of a coherent and durable finance for the services provided by NGOs is well known. The sustainability of successful projects is not ensured, sometimes inefficient services are being promoted or they are provided by persons lacking the necessary experience or skills. Essential services do not exist, especially for those people who become handicapped at an adult age. In this context, it is important to mention the excessive centralism which still dominates the protection system.



PART 4: TYPES OF SUPPORT FOR INDEPENDENT LIVING IN THE COMMUNITY

Romania continues to adopt measures regarding the development of the social benefits system that does not create system dependence and that encourages a return to activity. The development of community services for adults with disabilities has been uneven around the country. There are areas where a network of community services has been developed. They include residential services (homes for groups and protected homes), employment services, respite care services, counselling services, advocacy and self-advocacy, community support, as well as recreational services. There are other areas in the country, however, where community services are completely non-existent.

Disability benefit payments are financed by contributions from employees, employers, self-employed, and unemployed people. Long-term care benefits are provided by different schemes covering invalidity, employment injuries/diseases, old age, etc.

In 2007, RON 1,248,151,098 was spent on social benefits intended for disabled persons ([2008 Strategic National Report Regarding Social Protection and Social Inclusion](#)). 42,404 people received payments for severe and accentuated disability, 427,175 monthly allowances for severe and accentuated disability and 507,295 personal complementary budgets for severe and accentuated disability.

Disabled people are entitled to: free access to professional assessments, training courses, reasonable adaptations to the workplace; counselling before and, during employment, a paid trial period of at least 45 working days; the opportunity to work less than 8 hours per day, and exemption from the payment of tax on the salary.

There is a Complementary Personal Budget (buget personal complementar) for payment of tariffs (phone, radio, television, electricity subscriptions)

If we refer to people with intellectual disabilities they have the same rights for health services as any other citizen in Romania. They are insured by law if they are registered with the Authority for People with Handicap. They have free health care and they receive 100% compensation from the Insurance House for the prescriptions. In the case where an individual is not registered, they have no status and they have no health insurance. The problem for people with intellectual disability seeking health care is one of accessibility. In theory they can attend any health service for their health problems, but most often people with intellectual disability do not know where to ask for services if their family do not do this for them. Those living in the villages have access only to the family doctor and in special cases when they have to go to the handicap commission they visit other doctors. There are special health services for those with special needs. People living in residential places have full rights and accessibility to health care. They have access to a family doctor and can access the hospital when needed. In another hand, there are no statistical data about the life expectancy and health status of the people with an intellectual disability in Romania. All registered data are for the general population.



4.1: PERSONAL ASSISTANCE SERVICES

For those who live at home there may be limited options for support from Personal Assistants (asistent personal) or Qualified Personal Assistants (asistent personal profesionist). An assistant may be a person employed by the person with disabilities, a family member or a professional. Eligibility for support depends on a social and medical examination

Personal assistance services are set out in Law 448/2006. In this law the person with a severe handicap shall have the right, based on the social and psycho-medical evaluation, to a personal assistant (art 35). The local public administration authorities shall provide and guarantee in the local budget the necessary amounts from which the remuneration shall be paid, and the other rights due to the personal assistant. The adult with a severe or accentuated handicap not having a dwelling space, without income up to the level of the average salary per economy may benefit from a professional personal assistant (for example, a blind person, a person with neurological or physical disorder, may have a professional personal assistant). The care and protection of adults with a severe or accentuated handicap by the professional personal assistant shall be made based on the decision of the county or Bucharest municipality sector commissions for the evaluation of disabled adult persons. The opinion of the adult with a severe or accentuated handicap shall be taken into account in making the decision regarding the establishment of the professional personal assistant (article 45).

The legislative basis for provision of personal assistance is highlighted in official documentation provided by ANPH ([‘Documentar Asistentul Personal’](#)). Under the legislation, a personal assistant is intended to provide supervision, assistance or care for severely disabled adults or children in accordance with the individual service plan. It is intended that this should ensure conditions for equality of involvement in employment and community life, and improve quality of life. To qualify for a personal assistant, the disabled person must be in possession of an assessment certificate of the correct degree of disability. Initial contact is with the local Directorate of Social and Child Protection.

The employment of assistant staff is regulated by Government Decision 427/2001, which approves the Methodological Norms for terms of employment, rights and duties of the personal assistant, taking into account also equal opportunities, social and cultural factors according to age, sex, material factors, etc. The conditions for termination, modification and termination of contract are supplemented in Law 53/2003.

According to Law 448/2006, over the period of care and protection of the adults with a severe or accentuated handicap, the professional personal assistant shall benefit from the following rights: basic salary established according to the legal provisions regarding the remuneration of the social assistant with average studies in the social assistance units in the budgetary sector, other than those with beds, and seniority bonus and other related bonuses granted as provided by law; a bonus of 15% calculated on the basic salary for neuropsychical overstraining and special work conditions in which he/she performs his/her activity; a bonus of 15% calculated on the basic salary over the period in which he/she takes care of and protects at least two adult persons with a severe or accentuated handicap; a bonus of 25% calculated on the basic salary, over the period in which he/she takes care of, and protects, an adult person with a severe or accentuated handicap infected with the HIV virus or who has AIDS (article 47).

Personal assistants are employed by the local authority (from the mayor’s budgets) and the local authority social work department carries out regular checks on personal assistants every six months. They should be over 18 years of age, have a basic level of health, training and education (except for relatives). The assistant has a right to a basic salary and to maximum working hours.



The employer should provide cover for the personal assistant's holidays or absence (or the disabled person is granted an allowance equivalent to the net pay).

According to Article 42 of Law 448/2006 the parents/representatives can choose a personal assistant or a monthly allowance that is equivalent to the net salary of a junior social worker with secondary education and last for the period of the disability certificate issued by the evaluation committee or child protection committee. There is no entitlement to such support for people in residential institutions. Adults with severe visual disabilities can choose between a personal assistant or attendant allowance (indemnizație de însoțitor).



4.2: ASSISTIVE EQUIPMENT AND ADAPTATIONS

In view of ensuring the access of disabled persons to the physical, informational and communicational environment, the public authorities shall take the following specific measures: promotion and implementation of the Access for all concept, in order to prevent the creation of new barriers and the occurrence of new discrimination sources; support of the research, development and production of new information and communication technologies and assistive technologies; recommendation and support of the introduction in the initial background of pupils and students of courses regarding the handicap problem and their needs and the diversification of the modalities to achieve accessibility; facilitation of the access of disabled persons to the new technologies; assurance of access to the public information for disabled persons; assurance of authorized interpreters of the mimic and gesture language and of the language specific to deafblind persons; design and performance, in collaboration or partnership with legal, public or private persons, of programs for accessibility or for becoming aware of its importance ([Law no. 448/2006](#), Regarding the Protection and Promotion of the Rights of Disabled Persons, Republication (last [amended in June 2008](#)). [269/207](#) provides detailed rules for implementation, Chapter IV).

In the same law, the public utility buildings, the ways of access, the dwelling buildings constructed from public funds, the common transportation means and their stations, the cabs, the railway transport wagons for the travelers and the platforms of the main stations, the parking spaces, the public streets and roads, the public telephones, the informational and communicational environment shall be adapted according to the legal provisions in the field, so as to allow the free access of disabled persons. The buildings in the patrimony and the historical buildings shall be adapted, observing the architectonic characteristics, according to the specific legal provisions. In 2001 Romanian authorities adopted the Norms for accessibility in the built environment are set out in NP 051 2001. In this document we can found all characteristics and specific elements in public buildings for access of people with disabilities (<http://www.integration.ro/?id=253>). Each public build must have accessibility for all people (elevators, access ramps, adapted toilets, adapted phone etc.). Also, the local and central authorities and institutions shall ensure, for the direct relations with the persons with a hearing or deafblind handicap, authorized interpreters of the mimic and gesture language or of the specific language of the deafblind person.

In fact, for more people with disabilities in not so easy to have access in public space or public services; most of them have not resources to bay equipments. National Insurance Medical House has not enough founds for all people who need special equipments and most of them need months an years to bay this (orthopaedic prostheses, hearing prostheses, wheelchairs etc). If they need special equipments (adapted computers and soft, cochlear implants etc.) these became a 'nice story' for them. Each person and their family if have money or found sponsors, if they are lucky to be included in NGOs program for support the people with disabilities may have possibility to use special equipments for movement, communication and independent living. Unfortunately the number of 'lucky' is too small compared with the number of beneficiaries.



PART 5: EVIDENCE OF GOOD PRACTICE IN THE INVOLVEMENT OF DISABLED PEOPLE

Unfortunately, in Romania, there are isolated cases of successful and meaning employment of disabled people in the open market though the size of the phenomenon does not make them a 'good practice'. It is often the individual manager who makes things happen rather than the system. Existing challenges view uneven distribution of services with big differences between regions and counties and rural and urban areas, imbalance between available human and material resources and the needs of beneficiaries, insufficient strategic planning, ineffectual management and reduced number of trained staff to work in this area. Promoting a pro-active and participative culture of the population in general and of the social assistance beneficiaries in particular is of great importance in order to prevent dependency on social benefits. In last years more NGOs projects try to change community members' perception and attitudes about social inclusion, personal resources and human value of people with disabilities. According with this we can identify a series of best practices. For example:

1. [IHTIS](http://asociatia-ihitis.ro/membrii/) - orthodox association, founded in 2004 by a group of young people with physical disabilities who have reason to say: 'This is what we make for ourselves in society which we live.' (<http://asociatia-ihitis.ro/membrii/>). Their project 'Support our campaign '350.000 Euros = 350,000 People's Solidarity'. Donate 1 Euro for the first Center for Independent Life to be built in Romania' is one of the first initiatives of persons with disabilities for their independent life.
2. [Save the children](http://www.savethechildren.net/romania/ce_facem/programe/institutii_ChildNet.html) – The project 'Life skills for independent living' - solution for de-institutionalization to create and develop skills for independent living and vocational integration of children and young people. The project included a number of 300 young people in placement centres, aged between 16 and 18 years and will take place in Bucharest (Sector 1) and in 5 counties, as follows: Dambovita, Iasi, Galati, Neamt and Vaslui. Of the total of 300 beneficiaries, roughly 5% are children with special needs and 20% of beneficiaries are Roma. To achieve the objective, Save the Children will work with Junior Achievement and the National Confederation of Romanian Employers. In the 5 branches will develop partnerships with the County Department for Child Protection (DJPDC) and County Agency for Employment (AJOFM) (http://www.savethechildren.net/romania/ce_facem/programe/institutii_ChildNet.html).
3. [Motivation Romania Foundation](http://www.motivation.ro/?&language=en) - The Wheels of Change - is a non-governmental, non-profit, Romanian organization, created in 1995 to provide support to children and adults with disabilities. The successes achieved recommended Motivation Romania Foundation, that became the partner of [Shaw Trust UK](http://www.shawtrust.co.uk) in 2008. They are members of [ANCOR Federation](http://www.ancor.org.uk) and [Workability Europe](http://www.workability.org), and since 2004 they are affiliated to the International Tennis Federation, through the [wheelchair tennis](http://www.wheelchair-tennis.org) program. Their services cover a large range of needs of children and adults with disabilities, from adaptive equipment for different types of motor disabilities to medical rehabilitation and independent life skills training with a peer wheelchair instructor. Our programs focus on the social, educational and professional integration through consultation for building accessibility, employment mediation, day care, or leisure activities - adapted sport, cultural events (<http://www.motivation.ro/?&language=en>).
4. [Foundation 'Pentru voi' \(for you\) Timisoara](http://www.pentruvoi.ro/) - a non-governmental organization which provides community-based services in partnership with the Local Council & Timisoara Municipality and advocates for the rights of persons with intellectual disabilities. 'Pentru Voi' was the first organization in Romania to develop and offer programs such as supported employment, independent living, self-advocacy, and an activity center for adults with profound intellectual disabilities. At this moment 'Pentru Voi' provides community based services to 175 individuals with intellectual disabilities and their families, being a training provider, a resource center and a voice to be considered by the authorities (<http://www.pentruvoi.ro/>).



PART 6: REFERENCES

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