



# STATE SOCIAL SUPPORT FOR PERSONS AND CHILDREN WITH DISABILITIES IN UKRAINE:

## Current Mechanism and Areas for Improvement

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The research was based on 2023 data and was conducted at the request of the Ministry of Social Policy of Ukraine with the financial and expert support of the United Nations Children's Fund (UNICEF), to identify gaps in the system of providing state assistance for people with disabilities and children with disabilities to find possible ways to meet their needs.

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# KEY CONCLUSIONS AND RECOMMENDATIONS

The research findings yielded the following key conclusions:

1. **Support for persons with disabilities is provided unevenly by the state, with insufficient focus on practical needs.** The amount of assistance may not depend on a person's level of functional limitation or other factors affecting their vulnerability. Priority is given primarily to whether the person with a disability belongs to a certain professional group or holds a specific status (such as a person disabled due to war, from among military personnel and other individuals who have been granted disability pensions).
2. **There are existing problems with statistical data sharing regarding persons with disabilities.** The data exchange system between central government bodies is imperfect, and statistics are generalized, which complicates the process of analyzing information for subsequent management decision-making.
3. **Existing mechanisms for professional adaptation and reintegration of persons with disabilities into the labour market have low effectiveness.** Low employment rates endanger economic independence of persons with disabilities and pose a risk to their social inclusion. This can lead to their further marginalization and increase dependence on government payments. For the labour market, low integration levels of persons with disabilities may mean a loss of workforce that is crucial for the state's economic development, especially during wartime.
4. **Failure to consider the needs of parents raising children with disabilities has negative long-term consequences for the entire family.** Caring for children with disabilities places additional burden on parents due to the need to find caregivers or provide care independently, forcing them to switch to part-time employment or leave their jobs entirely. The conditions and amounts for care benefits are insufficient to address the issue of providing care services.

To improve the social support system for persons and children with disabilities, we developed key recommendations for the Ministry of the Social Policy and other stakeholders:

1. **Assign assistance to persons with disabilities using an Individual needs assessment method.** The assessment should include clear quantitative and qualitative criteria that will demonstrate changes in well-being and overcoming difficult life circumstances. Quantitative criteria will allow for objective measurement of health status, level of functional limitations, and progress in rehabilitation. Qualitative criteria will help evaluate the impact of assistance on quality of life, social integration, and other factors. Their combination will ensure effective use of state and/or local budget funds and tailored support for each individual.
2. **Improve the administration mechanism for care services and payments.** Mandatory information exchange should be established among registries of various government agencies (Ministry of Social Policy of Ukraine, Ministry of Health of Ukraine, Pension Fund

of Ukraine) and social service providers to create an objective assessment of social protection provision for people with disabilities and ensure effective resource utilization.

3. **Increase protection levels for families raising children with disabilities by reviewing current support instruments.** It is necessary to remove restrictions on receiving simultaneous care benefits for children with disabilities while maintaining the ability to work and study. Expand access to rehabilitation centers and networks of early intervention centers to identify the needs of children with disabilities at an early stage, introduce day care services for children with disabilities aged 4 to 18 who do not attend educational institutions, and young people up to age 35. This can be achieved by increasing targeted information about the availability of relevant services, assessing the territorial placement of rehabilitation centers and social adaptation centers according to the residence of families raising children with disabilities. It is also worth adapting the practice of providing financial support for children whose parents are insured persons in the mandatory state social insurance system. This is aimed to encourage the working-age population to seek formal employment.
4. **Review the amount of care payments and supplements that do not correspond to the subsistence minimum.** The amount of care payments and allowances should correlate with subsistence minimum or minimum wage. This should protect relatives who are forced to provide care for persons with disabilities instead of working from economic vulnerability and the risk of poverty.
5. **Transform or review ineffective types of support (such as sanatorium treatment and its compensation) and reallocate funds to more relevant areas.** The following areas of social protection require resource strengthening: social adaptation, transportation, rehabilitation of children with disabilities, and especially employment of people with disabilities.

# INTRODUCTION

**One of the consequences of the ongoing full-scale war is an increase in the number of persons with disabilities, which poses serious challenges for the state and ensuring an adequate level of population welfare.** Due to the continuation of hostilities and the unpredictable duration of active warfare, the number of persons with disabilities will most likely continue to grow significantly. While Ukraine had 2.7 million people with disabilities before 2022, in 2023 their number exceeded 3 million people, including 231,000 children with disabilities (under the age of 18)<sup>1</sup>. According to the nationwide survey by KSE Institute "National Survey on Public Perception and Awareness of Social Policy in Ukraine" conducted in January 2024 with UNICEF support (hereinafter referred to as the KSE Institute survey), among respondents aged 18 and older, 10 indicated they have a disability, and overall, 24% of respondent households have at least one person with a disability<sup>2</sup>. The rising numbers of persons with disabilities, including among children and youth, is considered by the state as one of the demographic and social challenges<sup>3</sup>. Persons with disabilities and children with disabilities require comprehensive rehabilitation and adaptation, which the existing social protection system cannot fully provide.

**Ensuring adequate resources for supporting persons with disabilities presents a challenge for the social protection system.** The growing number of social assistance recipients creates additional burden on the state and local budgets. This affects the ability to introduce new support instruments and fully fund existing ones. Particularly relevant now is ensuring quality prosthetic limb services, social adaptation, psychological rehabilitation, care for persons (children) with disabilities, and employment of persons with disabilities. Support measures for children with disabilities require separate attention, namely: their education, socialization, supported living, and care. The social policy system must also focus on supporting parents and mothers of children with disabilities, particularly rural residents who may have limited access to social services.

**The Ukrainian social protection system reveals a gap between the rights enshrined in law and the ability to realize them.** Different categories and groups of persons with disabilities, children with disabilities, persons with disabilities from childhood should not only be provided with rights nominally enshrined in legislation, but also real opportunities for their implementation. In practical terms, this means ensuring freedom from discrimination, independence, personal autonomy, as well as full and effective participation in society and social inclusion. These and other principles are fundamental according to the Convention on the Rights of Persons with Disabilities, which Ukraine ratified in 2009<sup>4</sup>. However, the low level of social payments does not correspond to real living expenses, forcing people with disabilities to limit themselves in meeting basic needs. Furthermore, employment opportunities for them remain limited, and transportation infrastructure is not accessible everywhere.

**Existing approaches to supporting persons with disabilities need updating to meet current requirements.** Within the constraints of limited financial, human, material (housing, transport, clothing) and infrastructural resources, there is a demand to review the assistance allocation system for persons with disabilities and assess its effectiveness. When evaluating perceptions of the current social support system's effectiveness, only 22% of respondents called it effective, while 48%

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<sup>1</sup> Calculated as the number of children with disabilities who received social assistance (data provided according to the 2023 Report on the implementation of budget programs of the Ministry of Social Policy)

<sup>2</sup> Survey sampling and geography: 2,047 respondents aged 18 and over were interviewed

<sup>3</sup> Demographic development strategy of Ukraine for the period until 2040, <https://www.kmu.gov.ua/storage/app/uploads/public/66f/c43/106/66fc4310689bb131307545.pdf>

<sup>4</sup> Convention on the Rights of Persons with Disabilities, [https://zakon.rada.gov.ua/laws/show/995\\_q71#top](https://zakon.rada.gov.ua/laws/show/995_q71#top)

considered it ineffective<sup>5</sup>. It is essential to establish a connection between the directions of financial resource allocation and achieving specific outcomes in improving living conditions and inclusion of various target groups, particularly persons with disabilities, children with disabilities, and persons with disabilities from childhood.

Therefore, at the request of the Ministry of Social Policy of Ukraine (hereinafter referred to as the Ministry of Social Policy), the KSE Institute analytical team, with financial support from UNICEF and in close coordination with UNICEF's Social Policy Section and the Ministry of Social Policy, examined the current mechanism of social and financial support for persons and children with disabilities. The team developed directions for its improvement, which are presented in this report.

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<sup>5</sup> KSE Institute survey "National survey on the perception and awareness of social policy in Ukraine", January 2024.



# RESEARCH METHODOLOGY

**The study "Social Support for Persons and Children with Disabilities in Ukraine: Current Mechanism and Areas for Improvement" was conducted as a desk study in 2024 and covers the period of 2023.** In the process of preparation, regulatory and legal acts of Ukraine, budget programs of the Ministry of Social Policy, and international practices for supporting persons and children with disabilities were analysed. The study also incorporates findings and recommendations from both government and non-government experts on the topic. The research was formatted in text with the use of charts and figures.

**The research hypothesis is that the existing social support system does not meet the needs of persons with disabilities and children with disabilities.** Existing social protection mechanisms reflect significant disparities in the scope of assistance provided between different categories of persons with disabilities, low effectiveness of available support instruments, and insufficient financial, human, and material resources to cover basic needs.

**The purpose of the study is to identify current gaps in the social support system for persons with disabilities (including children with disabilities and persons with disabilities since childhood) and formulate recommendations for their improvement.** To achieve this objective, the strengths and weaknesses of the existing support system in 2023 were identified and analysed. Based on the research results, we formed specific conclusions. They are reflected in recommendations for improving the mechanism of providing support to persons with disabilities. Research questions were formulated during consultations within the framework of requests from the Ministry of the Social Policy of Ukraine and UNICEF.

**To achieve the research objective, a number of tasks were defined. The completion of each can be considered as research stages:**

- Legal analysis: systematization of legal and regulatory acts that form mechanisms for providing assistance to persons with disabilities and children with disabilities;
- Instruments evaluation: analysis of support coverage for different categories of persons with disabilities and children with disabilities;
- International approaches: presentation of best international practices for supporting persons with disabilities and children with disabilities that would be relevant for implementation in Ukraine;
- Improvement proposals: development of recommendations for improving the support system for persons with disabilities and children with disabilities.

**The study employed both qualitative and quantitative research methods.** The qualitative methods involved collecting and analysing information from the legal and regulatory acts to identify the existing groups and subgroups of persons with disabilities, obligations regarding their social protection, and instruments for its implementation. The qualitative method was also used to study the perception of the problem of supporting persons with disabilities and children with disabilities by public and civil institutions, along with best international practices. The quantitative method involved collecting information about the number of assistance recipients, compensations, and services by



different recipient categories, their cost, and total expenditure volume. By combining quantitative and qualitative methods, the study provided a comprehensive analysis of the support system for persons with disabilities and children with disabilities, assessing its alignment with the needs and interests of the primary target groups.

**The analysis of international experience covered European Union countries (Germany, France, Croatia, Lithuania), as well as Canada and Israel.** These countries were selected based on their approaches to designing and implementing social support systems that could be used by Ukraine during social protection system reform. These countries were selected according to two criteria. The first criterion involved implementing human-centered national policies and having various instruments that could potentially be applied in Ukraine (Germany, France, Canada). The second criterion concerned the experience of countries that rebuilt after war or faced challenges of post-Soviet socialist policy. The EU countries were included due to their relevance for Ukraine's EU integration efforts, which require alignment with European social policy standards. Israel was chosen for its innovative approaches to social protection for persons with disabilities, particularly in providing rehabilitation and adaptation for those affected by military actions. Canada has successful experience in integrating persons with disabilities into society through inclusive programs and modern technologies. Official websites of government bodies, national insurance institutions, as well as resources of international organizations and federations such as the European Social Policy Network (ESPN) and the European Commission were used to analyze their experience. Based on the results of the analysis, we formulated recommendations for the Ministry of Social Policy to regarding improvement of the social support toolkit and social assistance provision mechanism. These recommendations align with best practices, the state's financial capabilities, current realities of social development, and achievement of social policy goals oriented toward the needs of children and families.

# CURRENT MECHANISM OF SUPPORT FOR PERSONS WITH DISABILITIES AND CHILDREN WITH DISABILITIES IN UKRAINE

## Disability Identification

**In Ukraine, "Disability" is one of 16 factors identified by legislation as causing difficult life circumstances.** Other factors include old age, low income, unemployment, gender-based violence, human trafficking, and others. These phenomena are not isolated from one another by nature. In practice, a person may experience the impact of multiple factors simultaneously. For example, a person with a disability may face employment barriers, leading to unemployment and low income factors. Another example is the consequences of war for women with disabilities. Suffering from multiple forms of discrimination, women with disabilities encounter numerous barriers in accessing services for protection from sexual and gender-based violence<sup>6</sup>. The problem with the existing social protection system is its failure to account for the consequences of multiple factors' impact on the lives and well-being of persons with disabilities.

**In Ukraine, the level and amount of assistance for a person with a disability is determined not by factors causing difficult life circumstances, but by the disability group.** Disability status is established upon application by individuals through medical-social expert commissions (until January 01, 2025) formed at healthcare institutions. Causes of disability include general illness, disability from childhood, workplace accident (occupational injuries or other health damage), occupational diseases, injuries, concussions, and mutilations<sup>7</sup>. There are three disability groups: I, II, and III. Persons with disabilities of group I also have subgroup A and B. Regarding disability categories for children, there are two groups identified: a child with a disability and a child with a disability of subgroup A. Each group has specific criteria for establishing disability status (the list of criteria is provided in Appendix 1). When assigning payments or social services, the disability group plays a primary role. However, persons with disabilities can receive additional support through financial assistance for low-income individuals and subsidies. These are more targeted instruments since their provision depends on actual need rather than legislatively defined status.

**Each disability group consists of various criteria that may be incomparable to each other and complicate the assessment of the need to assign specific assistance.** Due to the existing criteria system, individuals with unique functional limitations, requiring tailored approaches to support, may be classified into the same disability group. For instance, the criteria for establishing Group I disability include simultaneously:

- Inability for self-care or complete dependence on other persons;
- Significant limitations in learning ability or inability to perform certain types of work activities.

<sup>6</sup> UN, Analytical Report "On Disability", 2021, [https://ukraine.un.org/sites/default/files/2021-12/UN%20Policy%20Paper%20on%20Disability\\_UKR.pdf](https://ukraine.un.org/sites/default/files/2021-12/UN%20Policy%20Paper%20on%20Disability_UKR.pdf)

<sup>7</sup> p. 26 of the CMU Resolution dated December 3, 2009, No. 1317 "Issues of medical and social examination" <https://zakon.rada.gov.ua/laws/show/1317-2009-%D0%BF#Text>

These are mutually exclusive criteria that complicate the process of assigning and providing assistance for the corresponding category of individuals. During assessment, the disability group is primarily considered rather than individual need.

**Besides the disability group, the type and amount of assistance can be influenced by the status of persons with disabilities as defined by legislation.** Each social sphere is regulated by specific legislation. If the activities of this sphere are covered by disability risks, the relevant law stipulates protection guarantees in case of disability onset. For example, enhanced protection is provided for police officers (according to the Law of Ukraine "On National Police"<sup>8</sup>), for those affected by the Chernobyl disaster (according to the Law of Ukraine "On Status and Social Protection of Citizens Affected by the Chernobyl Disaster"<sup>9</sup>), and for military personnel (according to the Law of Ukraine "On Social and Legal Protection of Military Servicemen and Members of Their Families"<sup>10</sup>). The enhanced protection level for each of these categories arises due to the risky nature of their profession, unique circumstances and conditions in which they were injured/became disabled, or cumulative circumstances such as internal displacement. This demonstrates that the state values the contribution in terms of life and health of these categories. On the other hand, this indicates that the existing general level of support is insufficient and requires separate preferences in the form of increased allowances and payments. As a result, an imbalance emerges. Despite the wide range of support instruments, the least protected are people with disabilities who do not have a special status defined by law.

## Support Instruments

**A wide range of different support instruments is provided for persons with disabilities, similar to those used in other countries.** According to the KSE Institute survey results, 33% of households receiving any social payments include persons with disabilities, while 6% include children with disabilities<sup>11</sup>. Social protection for persons with disabilities in Ukraine consists of providing disability pensions, state assistance, compensatory and other payments, benefits, social services, implementing rehabilitation measures, establishing guardianship (care) or providing external care<sup>12</sup>, providing assistive rehabilitation devices and paying monetary compensation for self-purchased assistive devices<sup>13</sup>. Additionally, persons with disabilities are provided with support in education and employment. In Germany, France, Croatia, the United Kingdom, Israel, and Canada, social assistance for persons with disabilities includes monetary payments for living or disability payments (pensions), care payments, compensation for technical devices, psychological and physical rehabilitation services, social adaptation services, employment and education services, mobility services, and others. These types of state social assistance are similar in nature to those used by Ukraine but have certain specific features regarding provision criteria, namely more targeted needs assessment. As in Ukraine, social support programs for persons and children with disabilities are funded through state and local budgets, as well as social insurance. Ukraine has a multi-tiered system that ensures access to social payments, including social assistance for persons with disabilities since childhood and support for those whose disability developed later in life, who may

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<sup>8</sup>Law of Ukraine "On the National Police", <https://zakon.rada.gov.ua/laws/show/1317-2009-%D0%BF#Text>

<sup>9</sup>Law of Ukraine "On the Status and Social Protection of Citizens Affected by the Chernobyl Disaster" of February 28, 1991, No. 796-XII., <https://zakon.rada.gov.ua/laws/show/796-12#Text>

<sup>10</sup>Law of Ukraine "On social and legal protection of military personnel and members of their families", <https://zakon.rada.gov.ua/laws/show/2011-12#top>

<sup>11</sup>Analytical report "National survey on the perception and awareness of social policy in Ukraine", March 2024, KSE Institute

<sup>12</sup>Art. 4 of the Law of Ukraine "On the Basics of Social Protection of Persons with Disabilities in Ukraine", <https://zakon.rada.gov.ua/laws/show/875-12/conv#Text>

<sup>13</sup>CMU Resolution dated 05.04.2012 No. 321 "On Approval of the Procedure for Providing Persons with Disabilities, Children with Disabilities, and Other Specific Population Categories with Assistive Rehabilitation Devices (technical and other rehabilitation d, <https://zakon.rada.gov.ua/laws/show/321-2012-%D0%BF#Text>

also be eligible for social insurance. This framework emphasizes the maturity of the social system and the diverse financing mechanisms offered to meet various needs.

**Alongside the nominal availability of a wide range of support types, a major issue is low awareness about them, particularly about social services or their non-provision.** According to the KSE Institute survey, among the reasons why respondents do not apply for social services, lack of information about their availability, accessibility, and ways to apply is mentioned. This was reported by 19% of respondents among those who had not applied for social services. This is the most frequent reason after lack of need as such. There is also a certain problem with respondents' feelings of self-stigmatization because they feel uncomfortable seeking help. This was reported by 6% of respondents among those who had not applied<sup>14</sup>.

## Support for Children with Disabilities

**Children with disabilities are a separate category that has an enhanced level of support according to legislation.** According to the KSE Institute survey results, 4% of all respondents have a child with a disability in their household. Persons with disabilities since childhood and children with disabilities under the age of 18 are entitled to state social assistance and care allowances in the form of payments, the amount of which depends on the subsistence minimum<sup>15</sup>.

***For Information:** Persons with disabilities from childhood are persons with a disability from the age of 18 who acquired a disability in childhood. In international experience, assistance for people with disabilities over the age of 18 is provided equally according to need and is assigned regardless of the age of at which disability was acquired.*

Children with disabilities have access to free specialized medical and psychological care, including limb prosthetics, at designated public healthcare institutions. They are given the opportunity to receive basic, vocational-technical, and higher education, including at home. Such children are guaranteed free provision of individual correction devices. Children with disabilities have the right to free material, social-domestic, and medical provision, as well as provision of medications, technical and other individual correction devices according to legislation<sup>16</sup>.

**International experience indicates the need to support not only children with disabilities, but also their families.** Family support is a factor that strengthens and helps to provide care for a child with a disability. Without a support and assistance system, families may face overwhelming challenges that can lead to risky situations for the child, including institutionalization. In Israel, Family Centers have been created where information about rights and treatment methods is provided, along with supportive and professional psychological assistance<sup>17</sup>. Free day rehabilitation centers are also provided for children with disabilities up to 3 years old whose parents work in local authorities<sup>18</sup>. For all other children with disabilities, day-stay rehabilitation centres are open with partial financial participation from parents and guardians, except in some cases when treatment is provided at the

<sup>14</sup> Analytical report "National survey on the perception and awareness of social policy in Ukraine", March 2024, KSE Institute

<sup>15</sup> Art. 1. Art. 3 of the Law of Ukraine "On State Social Assistance to Persons with Childhood Disabilities and Children with Disabilities", <https://zakon.rada.gov.ua/laws/show/2109-14#top>

<sup>16</sup> Art. 26 of the Law of Ukraine "On Childhood Protection", <https://zakon.rada.gov.ua/laws/show/2402-14#top>

<sup>17</sup> Ministry of Welfare and Social Affairs of Israel, <https://www.gov.il/he/pages/molsa-people-with-disabilities-support-and-assistance-family-centers>

<sup>18</sup> Ministry of Welfare and Social Affairs of Israel, <https://www.gov.il/he/service/admission-of-toddlers-in-rehabilitation-day-care-centers>

expense of health care funds<sup>19</sup>. In Croatia, psychosocial support has been implemented, which includes professional forms of assistance and support that encourage the development and improvement of cognitive, functional, communication, speech, social, or educational skills for an individual/child, family, or foster caregiver<sup>20</sup>. This service is provided individually or in groups for up to 5 hours a week. Family psychosocial support is assigned to overcome family difficulties, acquire parenting skills, and expand the family's capabilities for functioning in daily life. Ukraine has a limited range of instruments for supporting families with children who have been diagnosed with disabilities. For example, the social service "Temporary respite for parents or their substitutes who care for children with disabilities" is provided<sup>21</sup>. This service is provided at the local level. There is currently no general unified data on its adequacy to existing needs, so it would be appropriate to track such data at the state level for further consideration and improvement. Additionally, at the beginning of 2023, the launch of psychosocial assistance took place as part of a pilot project for building resilience<sup>22</sup>. However, project scaling is still ongoing, and it is too early to draw conclusions. Currently, it is important to develop other additional instruments in family support, which may include access to rehabilitation centers, expanding the network of day centers/departments for children with disabilities, information support regarding rights and treatment, etc. Addressing the needs of families will help ensure a better quality of life for children with disabilities and their parents, especially in remote areas.

**Several countries operate early intervention programs aimed at providing comprehensive assistance to children with identified disorders.** Germany has implemented an early detection and early intervention program designed for children with disabilities under 6 years of age<sup>23</sup>. Specialists from different disciplines work together in interdisciplinary early intervention centres and social paediatric centres. Such support includes medical services for early detection (diagnosis) and early intervention (various treatment methods), therapeutic, psychological, medical, special educational, and psychosocial services. Early intervention services are free for parents and are provided regardless of income and available assets. France has a similar early intervention program for children aged 0 to 12 with developmental deviations indicating nervous system disorders<sup>24</sup>. This service covers the costs of diagnosis and services with occupational therapists, psychomotor therapists, or psychologists for one year. In Croatia, early development support is provided to children up to 3 years old, with the possibility of extension to 7 years in certain cases<sup>25</sup>. In Ukraine, early intervention services are provided at the community level for families raising a child up to 4 years old with certain disorders accompanied by developmental delays. Currently, only 43 such centres have been opened throughout the country (for 1,470 territorial communities). It is important to consider the possibility of extending the period for a child to receive services beyond four years as prescribed by a commission, since some disorders may be detected and require intervention at a later age.

<sup>19</sup> Law on Day Care Rehabilitation Homes, [https://www.nevo.co.il/law\\_html/law00/72880.htm](https://www.nevo.co.il/law_html/law00/72880.htm)

<sup>20</sup> Rights and Services for Persons with Disabilities in the Social Welfare System in Croatia, <https://gov.hr/en/psychosocial-support/730>

<sup>21</sup> Order No. 13 dated January 19, 2021, "On Approval of the State Standard for the Social Service of Respite Care for Parents or Guardians Caring for Children with Disabilities", <https://zakon.rada.gov.ua/laws/show/z0534-21#Text>

<sup>22</sup> Resolution No. 1049 dated October 3, 2023, "On the Implementation of an Experimental Project Introducing a Comprehensive Social Service for Building Resilience", <https://zakon.rada.gov.ua/laws/show/1049-2023-%D0%BF#Text>

<sup>23</sup> Ninth Book of the Social Code - Rehabilitation and Participation of Persons with Disabilities, [https://www.gesetze-im-internet.de/sqb\\_9\\_2018/\\_46.html](https://www.gesetze-im-internet.de/sqb_9_2018/_46.html)

<sup>24</sup> Rights and Services for Persons with Disabilities in the Social Welfare System in Croatia, <https://gov.hr/hr/rana-razvojna-podrska/732>

<sup>25</sup> Rights and Services for Persons with Disabilities in the Social Welfare System in Croatia, <https://gov.hr/hr/rana-razvojna-podrska/732>

## National Policy Framework for Supporting People with Disabilities

**Strategies and program documents concerning the needs of persons with disabilities and children with disabilities have an established hierarchy and are interconnected.** According to the Cabinet of Ministers of Ukraine Regulations, the process of forming and implementing state policy considers the need to: achieve goals defined by the Cabinet of Ministers Activity Program and other program documents; solve socially important problems; achieve Sustainable Development Goals; fulfill Ukraine's international obligations, particularly those provided for in the EU-Ukraine Association Agreement. Among the goals, tasks, and indicators of strategic documents referenced by the Cabinet of Ministers Regulations that relate to people with disabilities are the following:

- *The Government Activity Program* focuses on adapting public transportation vehicles, making buildings accessible for persons with disabilities, providing sports facilities, overcoming poverty and discrimination, and ensuring rehabilitation and employment<sup>26</sup>.
- *Sustainable Development Goals and indicators outlined in the national report* are aimed at considering the needs of persons with disabilities when using public transport and related infrastructure facilities<sup>27 28</sup>.
- *The EU Association Agreement and corresponding action plan* provides for implementation of the UN Convention on the Rights of Persons with Disabilities provisions, ensuring special conditions for public procurement of goods and services, introducing incentive mechanisms for employers to employ people with disabilities, and improving the quality of railway transportation services<sup>29</sup>.
- *The National Strategy for Reforming the System of Institutional Care and Education of Children for 2017-2026 and the action plan for implementing its first stage* aims to change the existing system of institutional care and parenting, which does not meet the real needs of children and families with children. It is also aimed at creating conditions for full upbringing and development of children in families<sup>30</sup>.
- *The National Strategy for Creating a Barrier-Free Space in Ukraine for the period until 2030* focuses on creating a barrier-free environment for all population groups, ensuring equal opportunities for everyone to realize their rights and receive services on par with others by integrating physical, informational, digital, social and civil, economic, and educational accessibility into all spheres of public policy<sup>31</sup>.

**There is a problem of duplication and lack of clear and measurable indicators, which does not allow to assess the impact of strategies on meeting the needs of persons with disabilities.** The National Action Plan for implementing the Convention on the Rights of Persons with Disabilities does not reflect how its implementation will affect meeting the needs of persons and children with disabilities. In most cases, its performance indicators are limited to the number of developed

<sup>26</sup>Program of Activities of the Cabinet of Ministers of Ukraine, June 2020, <https://www.kmu.gov.ua/storage/app/uploads/public/5ee/39a/831/5ee39a8311f68625529299.pdf>

<sup>27</sup>Decree of the President of Ukraine No. 722/2019, <https://www.president.gov.ua/documents/7222019-29825>

<sup>28</sup>Sustainable Development Goals: Ukraine, <https://www.kmu.gov.ua/storage/app/sites/1/natsionalna-dopovid-csr-Ukrainy.pdf>

<sup>29</sup>Resolution of the Cabinet of Ministers of Ukraine No. 1106 dated October 25, 2017, Action Plan for the Implementation of the Association Agreement, <https://zakon.rada.gov.ua/laws/files/text/85/f473622n63.docx>

<sup>30</sup>Resolution of the Cabinet of Ministers of Ukraine No. 526 -p dated August 9, 2017, National Strategy for Reforming the System of Institutional Care and Upbringing of Children for 2017-2026 and Action Plan for the Implementation of its First Stage, <https://zakon.rada.gov.ua/laws/show/526-2017-%D1%80#n23>

<sup>31</sup>Resolution of the Cabinet of Ministers of Ukraine No. 366 -p dated April 14, 2021, National Strategy for Creating a Barrier-Free Space in Ukraine for the period up to 2030, <https://zakon.rada.gov.ua/laws/show/366-2021-%D1%80#Text>



regulatory acts or the number of activities conducted. This approach does not allow tracking the practical impact of fulfilling Convention obligations.

**For information:** For comparison, the National Action Plan for implementing UN Security Council Resolution 1325 "Women, Peace, Security" for the period up to 2025 includes a separate monitoring plan and a list of strategic goals. Their achievement is provided for by regulatory and legal acts that directly or indirectly related to the "Women, Peace, Security" agenda. For example, "Strategic Goal 3. Ensuring the process of post-conflict recovery, development and implementation of the transitional justice system based on principles of equal rights and opportunities for women and men" contains an indicator of the number of people who suffered from conflict and received social-psychological assistance, including: girls and women with disabilities; boys and men with disabilities<sup>32</sup>.

**When reforming the support system for persons with disabilities, Ukraine should be guided by the approved National Classifier of Functioning, Disability and Health<sup>33</sup>.** The classifier corresponds to the International Classification of Functioning, Disability and Health (ICF) model, which is an international standard for describing and measuring health and disability<sup>34</sup>. Its use will contribute to bringing assessment methodologies closer together and simplify international data comparison. This will allow the Ukrainian government to track the effectiveness of social programs for people with disabilities and help adapt them according to citizens' needs.

## Approaches and Barriers in Assessing the Effectiveness of Support for People with Disabilities

**The EU uses an indicator system applying the Global Activity Limitation Indicator (GALI) to analyze the effectiveness and targeting of assistance<sup>35</sup>.** These indicators provide information about various aspects of life for persons with disabilities and reflect their socio-economic situation. For example, reducing the percentage of poverty risk through social transfers demonstrates the impact of government programs on overcoming financial difficulties, while the level of material and social deprivation indicates the challenges these people face in daily life. The GALI system is valuable for socio-economic monitoring. Its integration with ICF-based methodologies would provide a more comprehensive approach to meeting the needs of persons with disabilities in Ukraine.

**In Canada, the framework of indicators allows measuring progress in achieving goals for supporting people with disabilities.** Relevant goals may cover the effectiveness of program implementation regarding access for people with disabilities to employment, information and communication technologies, and transport.

For example, the performance indicator structure for employment aspirations for persons with disabilities is divided into three types:

1. **Core indicators:** measure high-level progress and trends, indicate achievement of specific outcomes.

<sup>32</sup>Annex 2 to the National Action Plan, <https://zakon.rada.gov.ua/laws/file/text/102/f501034n276.docx>

<sup>33</sup>Order of the Ministry of Economy "On Approval of the National Classifier NK 030:2022" dated April 9, 2022, No. 810-22, [https://moz.gov.ua/uploads/8/44015-nk\\_030\\_2022\\_klasifikator\\_funkcionuvanna\\_obmezenna\\_zittedial\\_nosti.pdf](https://moz.gov.ua/uploads/8/44015-nk_030_2022_klasifikator_funkcionuvanna_obmezenna_zittedial_nosti.pdf)

<sup>34</sup>International Classification of Functioning, Disability, and Health (ICF), <https://www.who.int/standards/classifications/international-classification-of-functioning-disability-and-health>

<sup>35</sup>EU Social Indicator Data, <https://ec.europa.eu/social/main.jsp?catId=818&langId=en>



**Example:** Employment rate of persons with disabilities; percentage of persons with disabilities employed full-time; percentage of self-employed persons with disabilities; disability pay gap.

2. **Sub-indicators:** support measurement of core indicators by presenting various aspects.

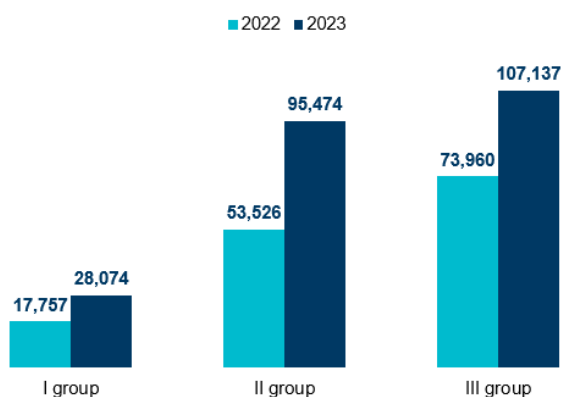
**Example:** employment rate by age groups.

3. **Supplementary Indicators:** relate to specific components of the core indicators, help understand the multidimensional nature of the problem.

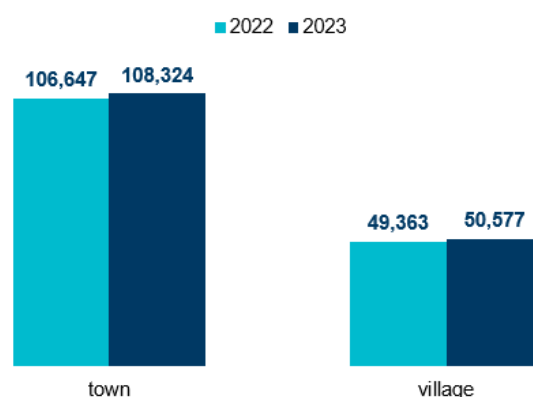
**Example:** Percentage of newly hired persons with disabilities; proportion of persons with disabilities dismissed from positions; percentage of employed people with disabilities who are overqualified for their position<sup>36</sup>.

Canada's experience may be relevant in developing new indicators for budget programs that will reflect the achievement of goals and the level of financing for policy implementation measures for persons with disabilities. A corresponding indicator system can be used to assess the effectiveness of social support for people with disabilities in Ukraine, as well as to develop monitoring reports that will reflect the effectiveness of the Ministry of Social Policy's activities.

**Figure 1. The number of persons recognized as persons with disabilities for the first time in 2022 and 2023**



**Figure 2. The number of children with disabilities as of the end of 2022 and 2023**



Source: Public Health Centre of the Ministry of Health of Ukraine

**An obstacle to building a targeted and effective support system for persons with disabilities is the lack of adequate statistical data.** Collection of statistical information regarding people who became disabled in Ukraine is conducted by the Ministry of Health of Ukraine (hereinafter - Ministry of Health). According to the current legislation, data collection is conducted once a year using statistical report form No. 14, titled "Report on Causes of Disability, Indications for Medical, Vocational, and Social Rehabilitation," approved by the Ministry of Health Order No. 378 dated July 10, 2007. This form provides the annual calculation of the number of individuals who have acquired disability for the first time within that year. However, form No. 14 does not provide for collecting information about the total number of persons with disabilities. Therefore, the Ministry of Health

<sup>36</sup> Canadian Performance Indicator Framework, <https://www.canada.ca/en/employment-social-development/programs/accessible-canada/reports/accessibility-data-measurement-indicator-framework/employment.html>

cannot provide information on the total number of persons with disabilities in Ukraine due to its absence<sup>37</sup>. The number of children with disabilities, however, is calculated at the end of the year using form No. 19.

**The Ministry of Social Policy keeps records of payment recipients for persons with disabilities categorized into separate groups.** However, there are cases when calculating payment recipients where people with disabilities are grouped together with other people who do not have disabilities. Such payments include "Care allowance for single low-income persons who, according to medical commission conclusions, require constant external care and receive age pensions, disability pensions, or service pensions". Therefore, those who care for people with disabilities and those who care for people aged 80 are calculated together rather than separately. Another example of imperfect statistical data collection is the accounting of children with disabilities who receive assistance with care benefit. The Ministry of Social Policy lacks comprehensive statistical information about the number of children with disabilities in separate categories, particularly those injured or damaged by explosive devices, or illnesses related to the Chernobyl disaster. Accordingly, the volume of expenditures for these categories is not tracked. The lack of an adequate statistical information collection system does not allow the ministry to fully analyze gaps in the support system for various categories of people (children) with disabilities and reflect problems and ways to solve them in strategic and budget documents. Proper information exchange between the Ministry of Health, Ministry of Social Policy, and other agencies is absent. This does not allow compiling an overall picture of the number of people (children) with disabilities and therefore improving the assistance system.

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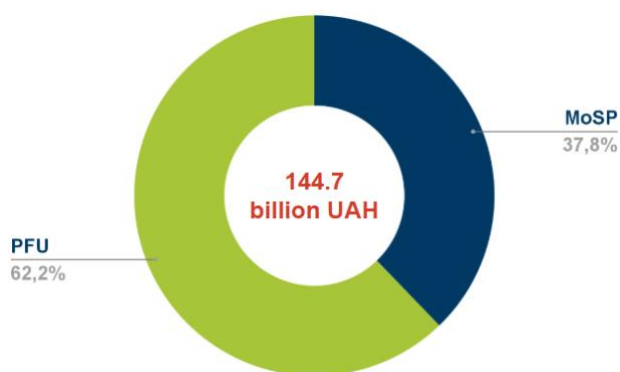
<sup>37</sup> Information provided by the Ministry of Health in response to a KSE Institute request

# CHALLENGES IN FUNDING THE NEEDS OF PERSONS WITH DISABILITIES

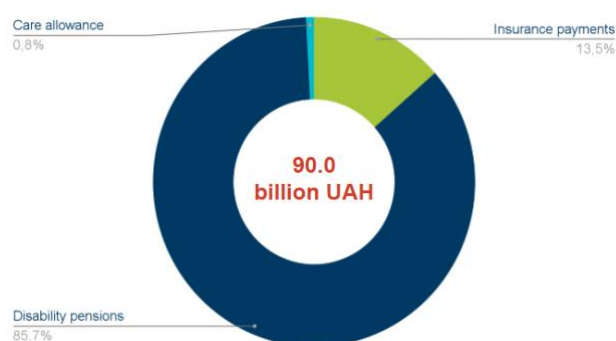
## Distribution of Expenditures for the Needs of Persons with Disabilities

**Over half (53%) of all expenditures directed toward the social protection of persons with disabilities from the state budget is directed toward disability pensions.** Total expenditures by the Ministry of Social Policy and the Pension Fund of Ukraine directed toward financing the needs of persons with disabilities in 2023 amount to 144.7 billion UAH. 90 billion UAH (62%) thereof come from the Pension Fund's budget. The Pension Fund finances disability pensions (77.1 billion UAH) and insurance payments to persons with disabilities who suffered workplace injuries (12.2 billion UAH). A small share of expenditures from the Pension Fund (74 million UAH) is allocated for care-related payments<sup>38</sup>. According to the KSE Institute survey results, 9% of all respondents mentioned receiving disability pension. Notably, persons with disabilities are more reliant on state pensions as a source of income in old age compared to those without disabilities (73% versus 58% among respondents aged 18-59).

**Figure 3. Distribution of expenditures for the needs of persons with disabilities between the Ministry of Social Policy and the Pension Fund of Ukraine for 2023**



**Figure 4. Pension Fund expenditures allocated to persons with disabilities for 2023**



Source: Ministry of Social Policy, KSE

**Most of the Ministry of Social Policy expenditures, covering social protection of persons with disabilities, are not directed through the specialized budget program "Social Protection of Persons with Disabilities".** Among five Ministry of Social Policy budget programs through which expenditures for supporting people with disabilities are financed, the largest share - 92.9% (or 50.8 billion UAH out of 54.7 billion UAH in 2023) - is directed through the budget program "Social Protection of Citizens Facing Difficult Life Circumstances." This is due to the fact that "disability" is

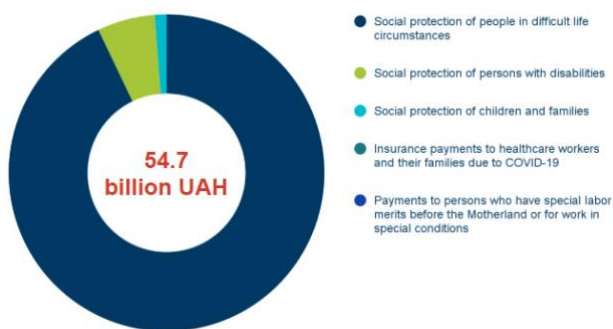
<sup>38</sup>KSE calculations

one of 16 factors that define difficult life circumstances. Care payments for people with disabilities are financed through this budget program. Besides the main budget program "Social Protection of Persons with Disabilities," a small share of expenditures (3% or 0.7 billion UAH) is directed through other budget programs:

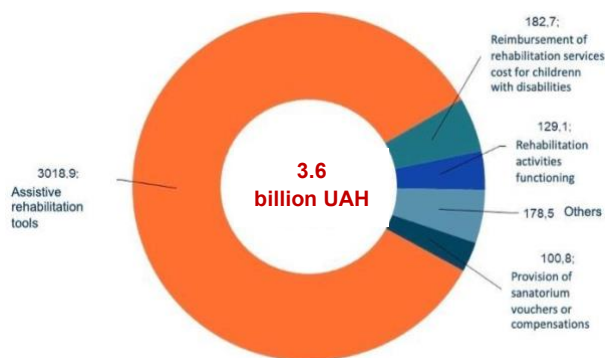
- "Social protection of children and families", which covers state social assistance for orphaned children and children deprived of parental care, including people with disabilities, who reside in family-type children's homes or foster families;
- "Insurance payments to healthcare workers and their families due to COVID-19", which covers insurance payments to medical workers of healthcare institutions who were assigned a disability group within one calendar year due to acute respiratory disease COVID-19;
- "Payments to persons who have special labour merits before the Motherland or for work in special conditions."

**The specialized budget program "Social protection of persons with disabilities" covers a wide range of directions, from rehabilitation to limb prosthetics.** Through the Social Protection Fund for Persons with Disabilities, the Ministry of Social Policy implements the profile budget program "Social Protection of Persons with Disabilities". In 2023, planned expenditures for the implementation of this budget program amounted to 3.6 billion UAH.

**Figure 5. Structure of expenditures of the Ministry of Social Policy for the support of persons with disabilities in the context of budget programs for 2023**



**Figure 6. Distribution of planned expenditures by directions of the budget program "Social Protection of Persons with Disabilities" in 2023**



Source: Ministry of Social Policy, KSE

## Financing Rehabilitation of Persons with Disabilities

**Expenditures for providing assistive rehabilitation devices (ARD) are the largest portion of expenses under the main budget program covering the needs of people with disabilities.** In 2023, 3.02 billion UAH was allocated for providing ARD, which constituted 84% of all planned expenditures under the budget program. However, actual expenditures for 2023 amounted to 2.97 billion UAH, which was 5% (39.4 million UAH) less than planned. Of this amount, 37.3 million UAH was not distributed due to the absence of applications from people with disabilities. The funds were designated for several purposes in the rehabilitation sphere: conducting post-warranty repairs of rehabilitation devices (13.6 million UAH or 37%), paying compensations for independently purchased rehabilitation devices, orientation and communication aids, orthoses, batteries, etc. (19.5 million UAH or 52%), manufacturing assistive rehabilitation devices (4.13 million UAH or 11%)<sup>39</sup>.

**Reporting of the Ministry of Social Policy indicates a decrease in the number of individuals requiring assistive rehabilitation devices, while problems exist in their provision and quality.**

Despite objective factors of the increasing numbers of persons with disabilities due to war, the Report on Implementation of the "Social Protection of Persons with Disabilities" Budget Program states that in 2023, *the number of people needing ARD decreased*. 146 thousand people were registered in 2022. In 2023, there were 33 thousand fewer, meaning 113 thousand people. Of these, 98 thousand people or 87% were provided with ARD. The share of children among all persons with disabilities in need of assistive rehabilitation devices is 13% or 15 thousand children. Among them, 13.7 thousand or 91% were provided with such rehabilitation devices. The analytical report of the "National Assembly of People with Disabilities of Ukraine" points to several causes of the existing issues in assistive rehabilitation tools provision, in particular: insufficient funding, excessive bureaucracy, and lack of information about the possibility of obtaining assistive devices. Additionally, only 61% of respondents are satisfied with the quality of assistive rehabilitation tools. Key reasons for dissatisfaction include low quality; manufacturing assistive rehabilitation devices without measurements and without considering the functional capabilities of people and children with disabilities; the need to pay significant additional amounts for extra devices necessary for full use<sup>40</sup>.

**There is a problem of low provision of rehabilitation services for children with disabilities, as well as significant differences in the cost of services financed from state and local budgets.**

Reimbursement of rehabilitation service costs for children with disabilities is the second largest area by allocated funds. It amounts to 182.7 million UAH. The number of children with disabilities in need of rehabilitation is 48,712 people. The share of children with disabilities who underwent rehabilitation among the total number of those who actually need it is only 18.8%, meaning only every fifth child. Average expenditures for rehabilitation services for one child with disability amount to 19.6 thousand UAH. At the same time, average expenditures at the local level may differ from the state level. For example, in Kyiv, average expenditures for rehabilitation of one child with disability in 2023 amounted to 12.7 thousand UAH and covered 1,800 people, of whom 794 were girls and 1,006 were boys.<sup>41</sup> Given that rehabilitation services are financed by both state and local budgets, it is unclear whether there are cases of duplication among children receiving them, and what justifies the difference in cost.

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<sup>39</sup>2023 Report on the Implementation of the Budget Program Passport "Social Protection of Persons with Disabilities"

<sup>40</sup>Analytical Report on the Provision of Rehabilitation Services to Adults and Children with Disabilities, [https://naiu.org.ua/wp-content/uploads/2023/07/2023\\_NAIU\\_AnalyticalReport-Rehabilitation\\_v02-1.pdf](https://naiu.org.ua/wp-content/uploads/2023/07/2023_NAIU_AnalyticalReport-Rehabilitation_v02-1.pdf)

<sup>41</sup>2023 Budget Program Passport "Provision of Rehabilitation Services to Persons with Disabilities and Children with Disabilities" in Kyiv

## Problems with Providing Sanatorium-Resort Treatment

**Provision of sanatorium-resort treatment services for persons with disabilities during full-scale war is insufficient.** In 2023, 101 million UAH was planned for the provision of sanatorium vouchers or compensation for their cost. However, only 43 million UAH, or 43%, was actually spent. The "Social Protection of Persons with Disabilities" budget program report indicates that the underutilization of funds resulted from martial law restrictions, limited operation of sanatorium facilities, migration of persons with disabilities within and outside Ukraine, restricted movement across Ukraine, and actual applications from persons with disabilities for sanatorium-resort treatment and/or receiving various types of compensation. The report also noted that 100% of the funds allocated for preferential sanatorium-resort treatment (1.3 million UAH) for individuals deprived of personal freedom due to armed aggression against Ukraine remained unused. This is explained by the absence of applications from social protection agencies regarding provision of preferential sanatorium-resort treatment and payment of compensation for the cost of independent sanatorium-resort treatment for persons who were established to have been deprived of personal freedom due to armed aggression against Ukraine. Consequently, only 2% of the planned 38% of persons with spinal disabilities received sanatorium vouchers, while those with other disabilities received 2.8% vouchers instead of 3.4%. Before the full-scale invasion, the share of spinal disability recipients provided with vouchers was 32.8%, while those with other disabilities was 5.6%. The pre-invasion ratio of planned to actual expenditures for sanatorium-resort treatment was 95%. The 2021 budget program passport implementation report "Measures for Social, Labor and Professional Rehabilitation of People with Disabilities" states that 107 million UAH was financed out of 112 million UAH<sup>42</sup>. Regarding service recipients, the number of persons with disabilities provided with sanatorium-resort vouchers was: in 2023 - 3,553 people, in 2022 - 6,336 people, in 2021 - 15,037 people, in 2020 - 8,037 people, in 2019 - 19,437 people, 2018 - 19,191 people.

**The compensation amount for sanatorium-resort treatment vouchers is significantly lower than the actual voucher cost, making this instrument irrelevant and ineffective.** Average actual expenses for sanatorium-resort treatment are approximately 33,900 UAH per person with a spinal disability and 11,400 UAH for persons with other disability profiles. Average expenditures for sanatorium-resort treatment for one person who was established to have been deprived of personal freedom due to armed aggression against Ukraine amount to 15 thousand UAH. Meanwhile, the actual amounts of compensation are as follows:

- For one person with disability from childhood or general illness in disability groups I and II: 549.5 UAH;
- Instead of an unused sanatorium-resort voucher for one person with a disability from childhood or general disease in disability group III: 366.6 UAH;
- For self-funded sanatorium-resort treatment for one person with a disability from childhood or general illness in disability groups I and II: 550 UAH;
- For self-funded sanatorium-resort treatment for one person with a disability from childhood or general illness in disability group III: 367 UAH<sup>43</sup>.

These compensation amounts are insufficient and largely symbolic, as they are incommensurate with the actual cost of vouchers. Monetary compensation for vouchers or for self-funded treatment

<sup>42</sup>2021 Report on the Implementation of the Budget Program Passport "Leadership and Governance in the Field of Social Policy", <https://www.msp.gov.ua/files/budjet/%D0%97%D0%B2%D1%96%D1%82%D0%B8%20-%202021.rtf>

<sup>43</sup>Report on the Implementation of the Budget Program Passport "Social Protection of Persons with Disabilities" in 2023



is calculated and paid in the following amounts (rounded up to one hryvnia): for persons with disabilities of groups I and II - 75%; group III - 50% of the average voucher cost. This average cost is calculated based on 35% (rounded up to one hryvnia) of the subsistence minimum set annually by law as of January 1 for persons who have lost the ability to work<sup>44</sup>. Due to being tied to the subsistence minimum, the compensation amount does not correspond to the actual cost of the sanatorium-resort voucher.

## Access to Automobile Transportation

**The service for teaching people with disabilities to drive is not in demand, and the mechanism for its provision and financing in Ukraine is ineffective.** Teaching people with disabilities to drive is one of the top areas where planned budget expenditures in the “Social Protection of Persons with Disabilities” program for 2023 have not been met. Mobility is a critical condition for the social inclusion of persons and children with disabilities. In 2023, only 15% of the planned budget expenditures were spent on this service, meaning 26,600 UAH was used out of the allocated 173,600 UAH. This is explained by the absence of applications from people with disabilities regarding driving lessons in most social protection agencies. All submitted applications for payment of driving lesson costs for people with disabilities were satisfied in full<sup>45</sup>. The reasons for low interest in driving lessons among people with disabilities require further research. This may indicate either low awareness about the availability of this service, or lack of funds to purchase or adapt a car for the needs of people with disabilities. In Israel, financial assistance is provided for vehicle adaptation, including discounts on vehicle registration fees, refunds, and disability parking permits<sup>46 47 48</sup>. Additionally, Israel offers a monthly mobility allowance regardless of vehicle ownership, as well as tax credits for vehicle purchases<sup>49</sup>. Credit repayment is deferred while the vehicle is in permanent use by the person with disability, the owed amount decreases during this time, and in some cases the credit ultimately becomes a full grant. In the United Kingdom, the Family Fund provides assistance with car rental payments for parents raising a child with a disability under the age of three<sup>50</sup>. Ukraine has a procedure for providing cars to people with disabilities. However, since 2014, people with disabilities stopped being provided with cars due to lack of financing, and they can only receive them as humanitarian aid<sup>51</sup>. An alternative source of mobility support is the “social taxi” service, but its availability is limited by the financial constraints of local communities and social centres. Furthermore, use of the service is often restricted to a limited number of trips per month (sometimes only twice per month). Exceptions are made if additional trips are necessary for medical appointments. This social service operates on specific days of the week and at specific hours.

<sup>44</sup> Resolution No. 150 dated February 7, 2007, “On Approval of the Procedure for Paying Monetary Compensation to Certain Categories of Persons with Disabilities in Place of a Sanatorium Voucher and for the Cost of Independent Sanatorium Treatment”, <https://zakon.rada.gov.ua/laws/show/150-2007-%D0%BF#n21>

<sup>45</sup> Report on the Implementation of the Budget Program Passport “Social Protection of Persons with Disabilities” in 2023

<sup>46</sup> Government of Israel, Vehicle adaptation and driving accessories committee, <https://www.gov.il/he/service/vehicle-adaptation-and-driving-accessories-committee>

<sup>47</sup> Ministry of Transport and Road Safety, [https://www.gov.il/he/service/exemptions\\_from\\_vehicle\\_license\\_fee](https://www.gov.il/he/service/exemptions_from_vehicle_license_fee)

<sup>48</sup> Israel, National Insurance Institute of Israel, Standing loan, [https://www.gov.il/he/service/disability\\_parking\\_badge](https://www.gov.il/he/service/disability_parking_badge)

<sup>49</sup> Israel, National Insurance Institute of Israel, Standing loan for purchasing a first vehicle or replacing a vehicle

<sup>50</sup> UK, Family Fund, Family Fund Mobility Support, <https://www.familyfund.org.uk/grants/schemes/ffms/>

<sup>51</sup> Results of the Audit Chamber’s Analysis of the Mandatory State Pension and Social Insurance System and Social Protection of the Population, <https://rp.gov.ua/PressCenter/News/?id=1331>



## Compliance of Budget Programs with Program-Target Method Requirements

The “Social Protection of Persons with Disabilities” budget program is more targeted and has a better-developed indicator system than most other analysed programs of the Ministry of Social Policy. This can be traced through the diversification of service recipients, which is reflected in the budget program's performance indicators. For example, the "Social Protection of Persons with Disabilities" budget program identifies combat participants, children with disabilities, internally displaced persons, and other categories among public service recipients. Some efficiency indicators demonstrate differences not only in average costs but also depending on the category of person receiving sanatorium and spa treatment. Such distribution helps achieve targeted use of funds. The shortcomings of the budget program include that a number of its indicators are generalized. For instance, “cost” indicators differentiate the maximum allowable costs for rehabilitation services for various categories of children with disabilities based on “limitations of degrees I, II, III”. However, “output” indicators lack details on how many children receive corresponding services by each limitation degree. The “quality” indicators do not measure the level of children’s satisfaction from receiving these services and the service coverage level. The only available indicators are: “overall share of children with disabilities who underwent rehabilitation in the total number of those in need of rehabilitation” and “growth of the corresponding share of children with disabilities who underwent rehabilitation in the total number of those in need of rehabilitation.”

**Overall, budget programs characteristics of do not reveal the impact of budget expenditures on the needs of different population categories.** The analysis identified diversified categories of service recipients among persons with disabilities. However, in budget program indicators, these categories are either grouped together or mixed with other public service recipients (e.g., elderly people), who do not belong to persons with disabilities. This blending makes it impossible to identify gaps or their absence in providing assistance. The problem stems from the lack of a well-established statistical/administrative reporting system. There is also an issue with the intersectionality of categories. For instance, women with disabilities and children with disabilities are separate categories requiring support under the Convention on the Rights of Persons with Disabilities. However, while children with disabilities are defined in budget program indicators, women with disabilities as a category of public service recipients are not mentioned among budget program characteristics. Also, “quality” indicators do not reflect achievement of gender equality goals that cover measures to meet the needs of people with disabilities, as required for forming budget program performance indicators.

**Performance indicators of the analysed local budget programs are more targeted than state budget programs indicators.** Specifically, they have gender distribution - men and women, boys and girls, and also reflect differences in expenditures depending on gender. Additionally, there is disaggregation of recipients by age, disability group and subgroup.

**Despite the importance of having clear budget programs indicators, their quantity and quality may differ significantly. The Ministry of Social Policy order outlining the list of performance indicators for local budget programs has only recommendatory character depending on the city/oblast.** For comparison, we analysed indicators of the program “Providing Rehabilitation Services for Persons with Disabilities and Children with Disabilities” across the Departments of Social Protection of Lviv and Dnipropetrovsk Oblast State Administrations, as well as Kyiv City State Administration. Although the programme indicators of all three authorities are guided by the “Typical List of Budget Programs and Performance Indicators for Local Budgets in the Field of Social

Protection and Support,” their indicators differ from one another<sup>52</sup>. These indicators can vary even within a single city or oblast. For example, while Lviv Oblast categorizes rehabilitation service recipients by gender, the Lviv City Council only differentiates between children and adults with disabilities<sup>53</sup>. The absence of unified approaches can have a negative impact and hinder further effective comparative analysis.

As an example, ***the Department of Social Policy of the executive body of the Kyiv City Council*** has its own unique approach. Although not specified in the Typical List, it separates the number of institutions and expenditure amounts for adults with disabilities (2 institutions/18.2 million UAH) and children with disabilities (1 institution/22.9 million UAH). Additionally, it categorizes persons with disabilities and children with disabilities by gender. Among the shortcomings, it can be noted that average rehabilitation costs per person, although divided into persons with disabilities and children with disabilities, are not distributed by gender. Similarly, indicators for rehabilitation services coverage for persons with disabilities and children with disabilities are not disaggregated by gender. There is no indicator regarding the share of employed people with disabilities in the total number of graduates<sup>54</sup>.

***The Department of Social Protection of Lviv Oblast State Administration*** does not separately divide institutions for adults and children with disabilities. However, among staff employees it separately identifies women (33 out of 38 employees). Among the number of people who received services, there is a division into girls and boys, but it is unknown whether the adult population is covered by the service. Average annual rehabilitation costs per person are not distributed by either age or gender. The result from program implementation is defined through the dynamics of service user numbers compared to the previous year, which does not correspond to the Typical List<sup>55</sup>.

***The Department of Social Protection of Dnipro Oblast*** corresponds to the indicators specified in the "Typical List of Budget Programs and Performance Indicators for Local Budgets in the Field of Social Protection and Support." However, it lacks indicators related to the number and share of employed people with disabilities from the total number of graduates<sup>56</sup>.

**Using the example of rehabilitation costs for persons with disabilities, it is possible to trace the difference in approaches to forming performance indicators for state and local budget programs.** In the city of Kyiv, average annual rehabilitation costs per person with disability amount to 10,022 UAH, while for a child with disability, it is 12,711 UAH<sup>57</sup>. According to the 2023 budget request for “Social Protection of Persons with Disabilities” program, the planned average cost for rehabilitation services for a child with disability comprised 19,100 UAH, i.e. 6,400 UAH higher than the actual spending in Kyiv. The reason for the cost discrepancy is unknown.

Calculations in this direction in Lviv and Dnipro oblasts have a different approach, but also differ from each other:

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<sup>52</sup>Order No. 688 dated May 14, 2018, "On Approval of the Standard List of Budget Programs and Performance Indicators for Their Implementation for Local Budgets in the Field of 'Social Protection and Welfare'", <https://zakon.rada.gov.ua/laws/show/z0685-18#top>

<sup>53</sup>Order No. 1445r dated October 31, 2023, "On Amendments to the Budget Program Passports for 2023", [https://city-adm.lviv.ua/public-information/budget/passport/upravlinnia/upravlinnia-sotsialnoho-zakhystu/pasporty-za-2023-rik/27029/download?cf\\_id=36](https://city-adm.lviv.ua/public-information/budget/passport/upravlinnia/upravlinnia-sotsialnoho-zakhystu/pasporty-za-2023-rik/27029/download?cf_id=36)

<sup>54</sup>2023 Budget Program Passport "Provision of Rehabilitation Services to Persons with Disabilities and Children with Disabilities" in Kyiv

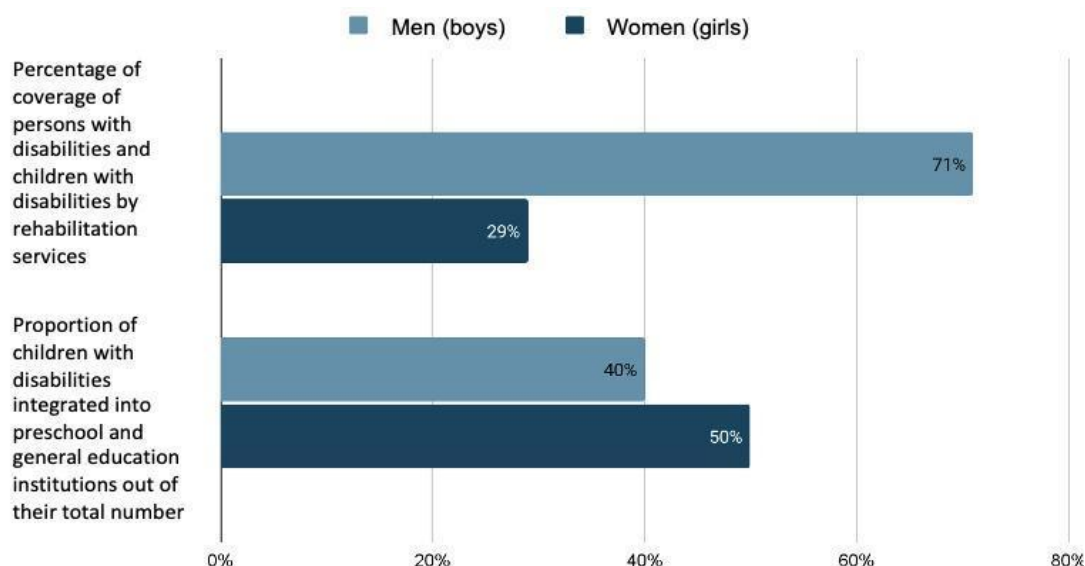
<sup>55</sup>2023 Local Budget Program Passport "Provision of Rehabilitation Services to Persons with Disabilities and Children with Disabilities", <https://docs.google.com/spreadsheets/d/1vNOyQJ5lWBWbq9A83tiopnhUln0OP9HL/edit?gid=2078307551#gid=2078307551>

<sup>56</sup>2023 Local Budget Program Passport "Provision of Rehabilitation Services to Persons with Disabilities and Children with Disabilities", <https://adm.dp.gov.ua/storage/app/media/2023-PASPORTY/Departament%20sotsialnoho%20zakhystu%20naselennia/20.12.2023/0813105.pdf>

<sup>57</sup>2023 Budget Program Passport "Provision of Rehabilitation Services to Persons with Disabilities and Children with Disabilities" in Kyiv

- In Lviv oblast, average annual rehabilitation costs for person amount to 108,552.35 UAH <sup>58</sup>.
- In Dnipro oblast, average rehabilitation costs per person with disability and child with disability amount to 105,516 UAH. Moreover, costs per man (boy) amount to 104,882 UAH, while per woman (girl) it's 107,100 UAH <sup>59</sup>.

**Figure 7. Comparison of performance indicators for evaluating the effectiveness of fund use by gender in Dnipro oblast in 2023**



Source: KSE

## Features of Care Services Financing for People with Disabilities

**The 2023 budget program "Social Protection of Citizens in Difficult Life Circumstances" covered financing of care services.** The budget program provides for financing such services as "Hospital Care," "Assisted Living," and "Assisted Living Without the Possibility of Independent Cooking". "The Budget Program Performance Report" provides information on the number of recipients and the cost of providing corresponding social services. However, there is no information that would reflect the distribution of service recipients by age, gender, the share of people who need the service and receive it, as well as the level of satisfaction with the quality of corresponding services. Additionally, there are no indicators that would demonstrate provision of another important care service, namely "Home Care".

**The actual cost of home care services may depend on the size of the settlement, as well as the type of provider – private or public.** Based on analysis of 34 service providers from different settlements, we determined that care services are most expensive in oblast centres, where on average one hour cost 87 UAH in 2023. In other cities, the hourly rate was 75 UAH, while in villages and small towns, it was 64 UAH (Fig. 8).

<sup>58</sup>2023 Local Budget Program Passport "Provision of Rehabilitation Services to Persons with Disabilities and Children with Disabilities", <https://docs.google.com/spreadsheets/d/1vNOyQJ5lWBWbq9A83tiopnhUln0OP9HL/edit?gid=2078307551#gid=2078307551>

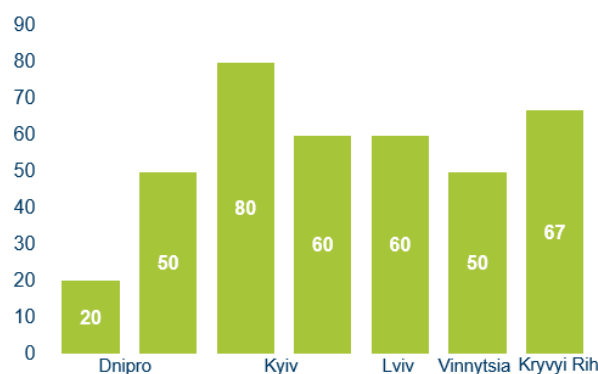
<sup>59</sup>2023 Local Budget Program Passport "Provision of Rehabilitation Services to Persons with Disabilities and Children with Disabilities", <https://adm.dp.gov.ua/storage/app/media/2023-PASPORTY/Departament%20sotsialnoho%20zakhystu%20naselennia/20.12.2023/0813105.pdf>

**Private institutions can be an alternative service provider, but their operations have specific features.** Based on analysis of private institutions in Kyiv, Sumy, Dnipro, Lviv, Vinnytsia, and Kryvyi Rih, there is a significant gap in service provision tariffs - from 20 to 80 UAH (Fig. 9), without a detailed list of service components. In contrast, public institutions typically provide a detailed cost structure for social services. Private entrepreneurs may also not be interested in providing care services in cities and settlements with small populations, which will affect the possible level of profit. Moreover, there is no system for effective monitoring of service quality. This problem is common for both private and municipal/state service providers. However, private institutions may provide services completely outside state control and monitoring mechanisms. On one hand, this facilitates process administration, but on the other hand, it makes service provision processes non-transparent.

**Figure 8. Cost comparison of the “Home care” service based on the size of the settlement, UAH/day in 2023**



**Figure 9. Comparison of the cost of an hour of service in private institutions depending on the settlement, UAH/hour in 2023**



Source: KSE

## Care Allowance Payments for People with Disabilities

**In addition to the possibility of receiving care services, persons with disabilities have the right to receive payments in the form of care allowances.** Total care payments amount to 17.5 billion UAH or 23.7% of all types of payments for people with disabilities. Out of 76 payments for people with disabilities (including disability pensions, insurance payments), the analysis identified 23 care payments, of which 8 are care allowance payments with supplements. According to a KSE Institute survey, people with disabilities have significantly higher demand for monetary assistance as a form of social support compared to the rest of the population - 44% versus 28%. Results of other studies also indicate that some categories of recipients noted that payments are not the type of assistance their household actually needs, but the government prefers providing assistance in the form of additional income<sup>60</sup>.

**According to international experience, local authorities may provide monetary compensation to parents of children with disabilities for independent purchase of social services and necessary goods.** In the United Kingdom, local councils provide assistance to parents of children with disabilities in the form of financial compensation for short breaks (respite for parents/caregivers),

<sup>60</sup> “Cash and beyond” Analysis of extra costs associated with disabilities and disability-specific Social Protection in Ukraine, in the aftermath of the Russian invasion, December 2022 ([https://www.hi-us.org/sn\\_uploads/document/Cash---Beyond-Final-Report--Ukraine.pdf](https://www.hi-us.org/sn_uploads/document/Cash---Beyond-Final-Report--Ukraine.pdf))

home care, payment for some assistive devices, financial assistance such as money for transportation costs to hospital appointments<sup>61</sup>. This benefit is paid directly to parents of children with disabilities, allowing them to arrange necessary services themselves. Parents are also eligible for a housing allowance for children with disabilities. The Family Fund subsidy can assist with expenses like furniture, household items, clothing, toys, family breaks, and weekends<sup>62</sup>. In Ukraine, it would be advisable to consider compensation for care services for short-term rest for parents and guardians of children with disabilities.

**In Ukraine, the system of providing care allowance payments to persons with disabilities is fragmented, meaning there is no common basis for its functioning.** In many cases, payments are assigned under different conditions, creating inequality and difficulties for recipients. For example, calculation of payments for people with disabilities due to mental disorders differs from other categories and takes into account the family's average monthly total income for the previous 6 months, not just the percentage of subsistence minimum for people who lost working capacity. Payment amounts for single war-affected people are the same for people with disabilities of groups II and III, but distribution between groups does not consider the actual level of functional loss and need for care. Also, each person with disability requires appropriate care. People with disabilities from childhood receive the largest amount of assistance among people with disabilities of groups II and III.

**A person with disability can claim for 5 types of payments, but receiving each payment depends on status and category.** For example, a person with disability from childhood with Group I has the right to state social assistance and care allowance. A person with disability of Group II, if he/she is: a person with disability due to war, person with disability due to World War II, single, low-income, or requires care per medical recommendation, and if he/she has an insurance history to qualify for care allowance, insurance payments, as well as pension payments. Without insurance history, one may only receive care allowance. Additionally, all persons with disabilities from childhood receive 100% of the subsistence minimum for incapacitated persons (state social assistance). In 2023, the corresponding amount was 2,093 UAH<sup>63</sup> (Appendix 2).

**The difference in care allowance for persons with disability of the same group and category can reach 11 times.** Most privileged in terms of payments are persons with disabilities from childhood. The amount of care allowance with care benefit for this category will be 7,131 UAH. Meanwhile, care allowance for persons with disabilities due to war, who receive age pension, disability or service pension, amounts to only 627 UAH. For example, home care on an hourly basis can cost 450 UAH/hour<sup>64</sup>.

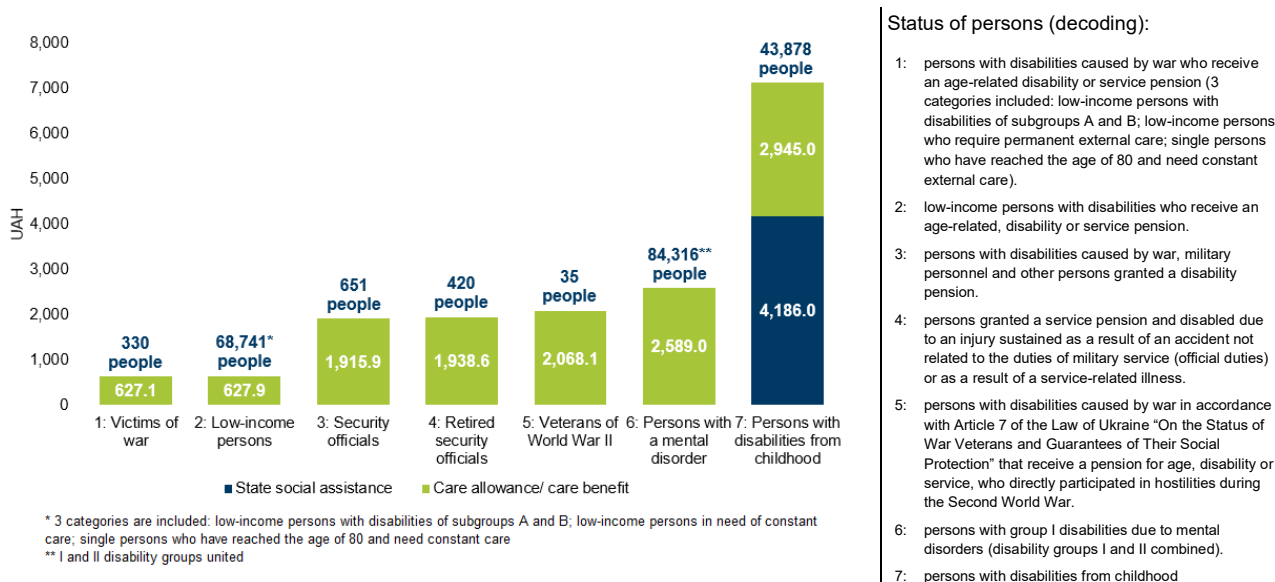
**Figure 10. Care allowance for persons with disabilities, persons with disabilities from childhood of group I, subgroup A and group I due to mental disorder for 2023, UAH**

<sup>61</sup> Childcare and Child Rearing in the United Kingdom, <https://www.gov.uk/help-for-disabled-child>

<sup>62</sup> Family Fund Website, United Kingdom, <https://www.familyfund.org.uk/grants/schemes/ffms/>

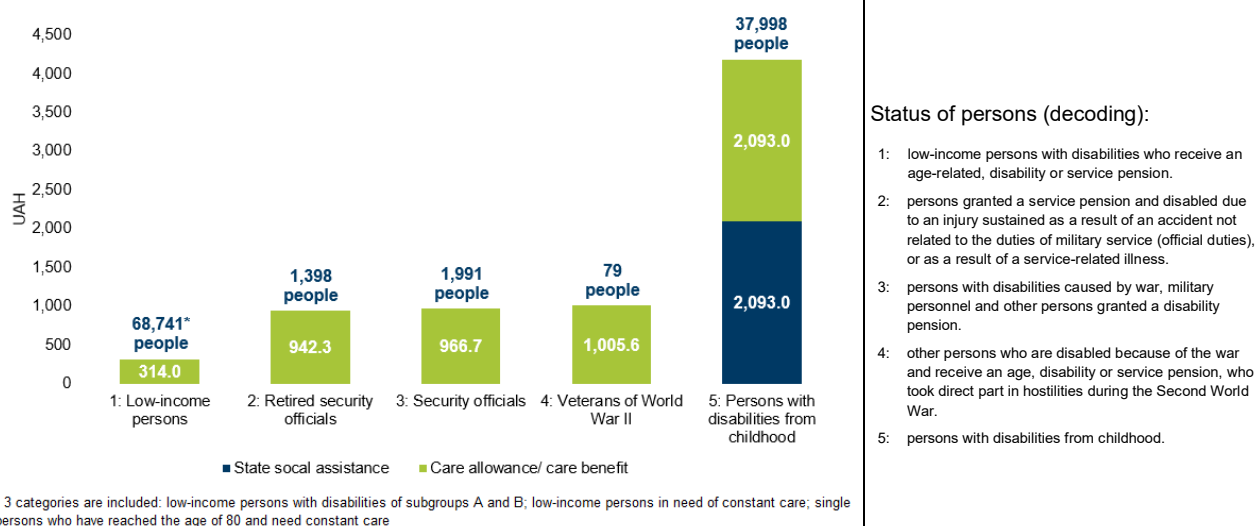
<sup>63</sup> Law of Ukraine "On the State Budget of Ukraine for 2023", <https://zakon.rada.gov.ua/laws/show/2710-20#Text>

<sup>64</sup> Example of national practice <https://nadia.com.ua/uslugi-i-ceni/>



Source: Ministry of Social Policy, KSE

Figure 11. Care allowance for persons with disabilities of group I subgroup B for 2023, UAH



Source: Ministry of Social Policy, KSE

**Care allowance amounts depend on various factors, including age, disability group or status.** For example, the allowance amount for 2023 with care supplement for people with disabilities from childhood for group I subgroup A was 7,131 UAH (Fig. 10), group I subgroup B - 4,186 UAH (Fig. 11), group II - 3,244.2 UAH, group III - 2,825.6 UAH (Fig. 12). For comparison, in 2023 the minimum wage was 6,700 UAH<sup>65</sup>, while the average wage was 14,000 UAH<sup>66</sup>. For children under 6 years old of subgroup A with a disability related to the Chernobyl disaster, the allowance with supplement amounts to 6,741.7 UAH (Fig. 13). For children in the same group but with disabilities from injury or explosive ordnance, the care allowance with benefit is 9,013.7 UAH. However, if a child under 6 of subgroup A does not have the above-mentioned statuses, the care allowance will be the lowest and amount to 6,009.1 UAH.

<sup>65</sup> Law of Ukraine "On the State Budget of Ukraine for 2023", <https://zakon.rada.gov.ua/laws/show/2710-20#Text>

<sup>66</sup> Average Wage Indicator for 2023, <https://www.pfu.gov.ua/2158510-pokaznyk-serednoyi-zarobitnoyi-platy-za-2023-rik/>



**State social assistance with care allowance for persons with disabilities can differ in size by 13 times.** Low-income persons with disabilities have the lowest level of support. At the same time, the specific number of recipients in this category is unknown due to lack of accounting. The amount of care allowance is insufficient, which creates a risk of economic vulnerability for a family with a person with a disability.

**Single persons with disabilities from childhood receive the largest amount of assistance among persons with disabilities of Groups II and III.** Payment amounts for single war-affected people are the same for people with disabilities of groups II and III, but distribution between groups does not consider the actual level of functional loss and need for care. A more detailed assessment of care needs for individuals in disability group III is required, as this group includes persons with specific impairments such as loss of a hand or four finger phalanges, loss of an eye or subatrophy of an eye, a removed stomach, with thigh or shin stump. The calculation of payments for individuals with mental disorders differs from other categories, as it considers the family's average monthly income over the previous six months, rather than solely a percentage of the subsistence minimum for those who have lost work capacity.

**The amount of care payments for children with disabilities depends on age, not on the recipient category.** The care payment amount for a child with disability from 6 to 18 years old is 19.8% higher than for a child under 6 years old. This percentage ratio applies to both payments for children with disabilities of subgroup A and care payments for other children with disabilities. Regarding care allowance for people with disabilities from childhood, the payment amount depends on the disability group and its subgroup<sup>67</sup>. The difference in payment amounts depending on age can be explained by the difference in subsistence minimum amounts for different age groups of children. The volume of needs for children aged 6 to 18 years is greater than the volume of needs for children under age 6 years old.

## Restrictions on Assigning Care Allowance for People with Disabilities

**The legislation establishes strict restrictions for assigning care allowance for persons with disabilities and children with disabilities.** Care supplement is assigned to persons with disabilities from childhood of group I and single persons with disabilities from childhood of groups II and III, who, according to the conclusion of the medical-consultative commission (MCC), require constant external care.<sup>68</sup> Therefore, if a person with disability has a relative living with them, then the relative's income is either directed toward caring for the person with disability, or instead of employment they must provide care. Regarding care allowance for a child with disability under 18, it is assigned to one of the parents who does not work, study (except through distance learning), serve in the military, hold an elected position, and who is actively providing care for the child<sup>69</sup>. This approach discourages parents from working and is unfair to those who do work and still provide care for a child with a disability. An exception is made for children with disabilities in subgroup A and for single mothers (or fathers) caring for a child with a disability under 18. Such persons are assigned care supplement for a child with disability regardless of the fact of work, study, or service. Therefore, not everyone who cares for people with disabilities automatically receives care supplement, and the existing mechanism does not support parents who try to be economically active. The assistance amount with

<sup>67</sup> "Another child with disability" is the official definition of children with disabilities who do not belong to subgroup A. Division into groups I, II, III of disability for children with disabilities is absent. According to the Law of Ukraine of November 16, 2000 No. 2109 "On State Social Assistance to Persons with Disabilities from Childhood and Children with Disabilities," <https://zakon.rada.gov.ua/laws/show/2109-14#Text>

<sup>68</sup> Law of Ukraine "On State Social Assistance for Persons Who Do Not Have the Right to a Pension and Persons with Disabilities", <https://zakon.rada.gov.ua/laws/show/1727-15#Text>

<sup>69</sup> Art. 3 of the Law of Ukraine "On State Social Assistance for Persons with Disabilities from Childhood and Children with Disabilities"

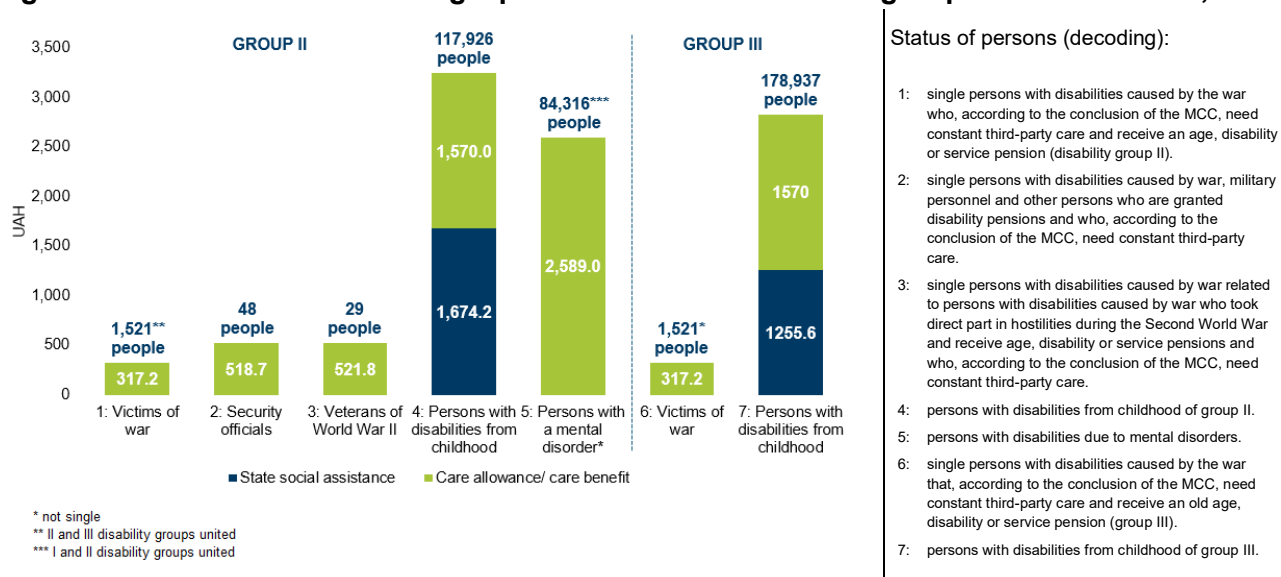


care supplement for another child with disability under 6 years old reaches 6,009.1 UAH (including care supplement - 4,544 UAH), while the minimum wage in 2023 was 6,700 UAH. Thus, the assistance amount with care allowance is insufficient to cover primary needs.

### Care allowance amounts with care benefits are insufficient to cover the cost of care services.

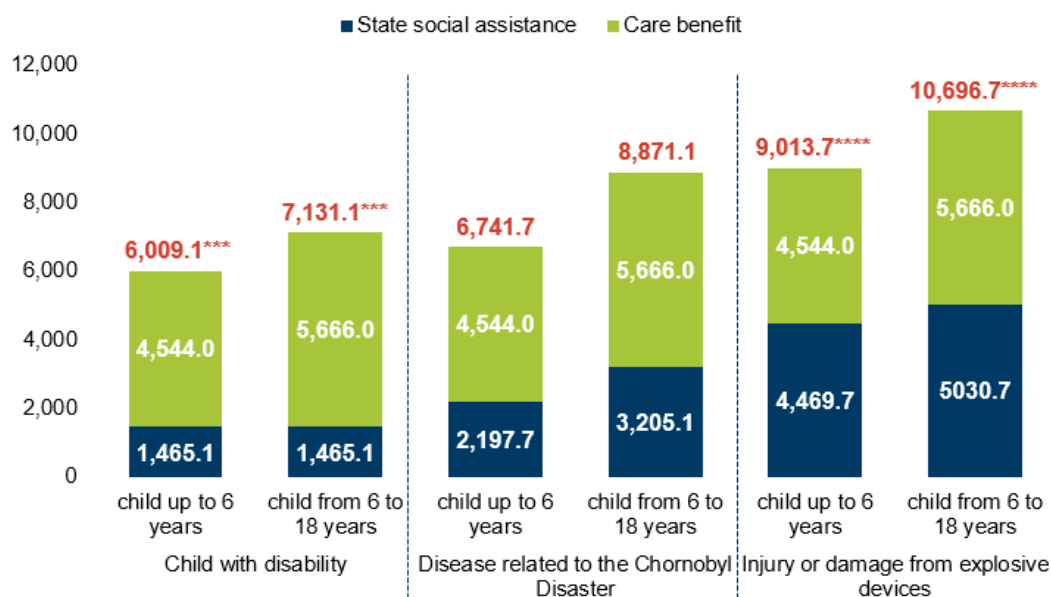
Allowance with care supplement (2,826 UAH) can cover care services, provided they are delivered once a week, only for people with disabilities of group III. For other categories, the cost of care services is significantly higher than the actual care-related payment. The cost of care service also depends on the type of care (Fig. 14). For instance, the daily rate for hospital care is 463 UAH/day. It is almost 1,5 times less than the daily rate of home care 679 UAH/day. Consequently, low-income families are often compelled to opt for stationary care rather than home-based care due to cost considerations. Another dimension of payment for care is economic. Care payments are insufficient to cover the family's living needs if its members are forced to provide care for a person with disability instead of employment.

**Figure 12. Care allowance for single persons with disabilities of groups II and III in 2023, UAH**



Source: Ministry of Social Policy, KSE

**Figure 13. State social assistance with care benefit for children with disabilities of subgroup A in 2023, UAH**



\* separate accounting by status is not kept

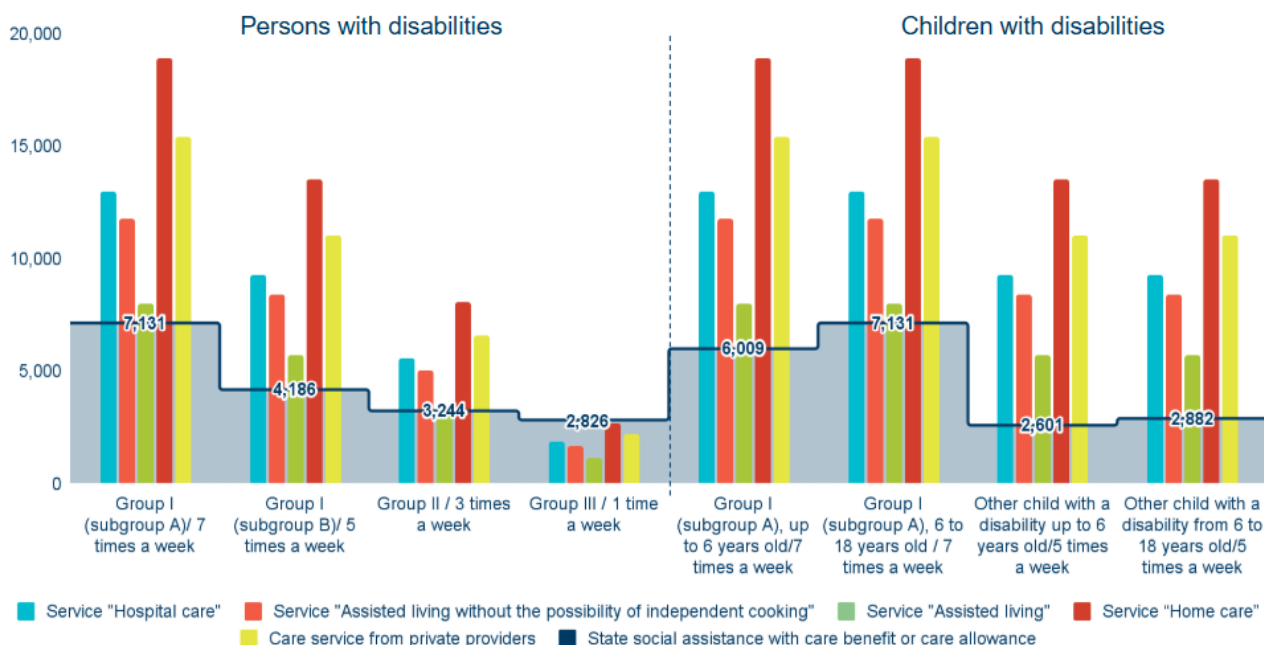
\*\* Article 3 of the Law of Ukraine "On State Social Assistance to Persons with Disabilities from Childhood and Children with Disabilities"

\*\*\* +50% to the payment (State social assistance without care benefit) of the amount received by one child with a disability (Article 30 of the Law of Ukraine "On the Status and Social Protection of People Affected by the Chernobyl Disaster")

\*\*\*\* +50% to payments (State social assistance with care benefit) of the amount received by one child with a disability (Article 2 of the Law of Ukraine "On State Social Assistance to Persons with Disabilities from Childhood and Children with Disabilities")

Source: Ministry of Social Policy, KSE

**Figure 14. Comparison of total cost of services and benefits per person and child with disability, UAH/month in 2023**



Source: KSE

**It is worth considering the possibility of reviewing the amount of monetary assistance for families with two or more children with disabilities, as they experience significant financial and emotional burden.** Parents raising children with disabilities also report job loss due to war and/or inability to find a new one due to round-the-clock childcare. Without family support they experience enormous

pressure on themselves, which can lead to loss of their own health or disability<sup>70</sup>. Additionally, it is worth adapting the practice of providing monetary assistance for children whose parents are insured persons, in order to incentivize the working-age population to seek official employment.

**According to international experience, besides the presence of disability, other factors such as income level, receipt of other forms of support, or specific needs may be considered when assigning and determining the amount of monetary payments and social services.** In Croatia, the inclusive supplement is provided to individuals with disabilities to overcome barriers to their participation in society. The amount of assistance is determined based on the level of support needed and factors such as income, housing benefits, caregiving support, transportation allowances, and medical subsidies. This helps ensure equal access to education, employment, and social services. If a person with disability requires constant assistance, they can receive up to 600% of the base amount, which is 120 EUR. However, the presence of other forms of support, such as housing benefits, may reduce the allowance to 400% or 360%<sup>71</sup>. One of the key aspects of improving support provision for people with disabilities in Ukraine is considering their individual needs and choosing the optimal type of assistance. The practice of determining the most necessary payments or services may prove to be an effective tool for achieving this goal. By analyzing the needs of each person with disability and discussing possible support options with them, an individually tailored approach to assistance assignment can be ensured. This will allow avoiding provision of unnecessary or ineffective services, focusing efforts on those aspects that are most important for the specific person.

In Israel, disability pensions are assigned to individuals who have lost at least 50% of working capacity in daily life or who do not work or have income less than 60% of average wage<sup>72</sup>. A disability pension recipient for whom incapacity of at least 75% is established is exempt from paying insurance pension contributions. People with disability levels from 20% to 100% due to occupational disease (workplace injury) receive monthly payments<sup>73</sup>. In Israel, attendance allowance (care) is assigned for people with disabilities only among those who are insured and require significant assistance from another person in daily activities<sup>74</sup>. Monetary disability assistance is provided<sup>75</sup> for children of insured residents living in the country. After leaving the country, child assistance is provided for 3 months or can be extended up to 24 months in case of treatment. The assistance amount varies from 50% to 235% of the full sum, which is 3,479 shekels (approximately 22,275 UAH)<sup>76</sup>. Families with two or more children with disabilities receive an additional 50% per child. This assistance is administered by the National Insurance Service.

**In European practice, social payments are designed to cover several types of assistance and are intended to compensate for the loss of autonomy of persons with disabilities in both daily and public life.** Compensation for loss of working capacity (disability) in France is provided to cover costs for assistance, technical means, housing or vehicle adaptation, and special payments<sup>77</sup>. For its assignment, a person's functional ability to perform activities without any assistance in a standard environment is assessed. Assistance is provided without a means test, but its amount depends on the annual income; available for children and adults. In France, children with disabilities under the age of 20 receive an

<sup>70</sup> Experiences of families raising children with disabilities in Ukraine Disability Rights International [https://www.driadvocacy.org/sites/default/files/2023-10/Executive-summary\\_UKR.pdf](https://www.driadvocacy.org/sites/default/files/2023-10/Executive-summary_UKR.pdf)

<sup>71</sup> Government of Croatia. (n.d.). Right to an inclusive supplement. <https://gov.hr/en/right-to-an-inclusive-supplement/2559>

<sup>72</sup> National Insurance Website, Israel, <https://www.btl.gov.il/English%20Homepage/Benefits/Disability%20Insurance/Pages/Whoisentitledtoamonthlydisabilitypension.aspx>

<sup>73</sup> National Insurance Website, Israel, [https://www.btl.gov.il/benefits/Work\\_Injury/Work\\_injury\\_benefit/Pages/%D7%A9%D7%99%D7%A2%D7%95%D7%A8%20%D7%95%D7%9E%D7%A7%D7%95%D7%9D%20%D7%AA%D7%A9%D7%9C%D7%95%D7%9D%20%D7%A7%D7%A6%D7%91%D7%AA%20%D7%94%D7%A0%D7%9B%D7%95%D7%AA%20%D7%95%D7%9E%D7%A2%D7%A0%D7%A7%20%D7%94%D7%A0%D7%9B%D7%95%D7%AA%20%D7%9E%D7%A2%D7%91%D7%95%D7%93%D7%94.aspx](https://www.btl.gov.il/benefits/Work_Injury/Work_injury_benefit/Pages/%D7%A9%D7%99%D7%A2%D7%95%D7%A8%20%D7%95%D7%9E%D7%A7%D7%95%D7%9D%20%D7%AA%D7%A9%D7%9C%D7%95%D7%9D%20%D7%A7%D7%A6%D7%91%D7%AA%20%D7%94%D7%A0%D7%9B%D7%95%D7%AA%20%D7%95%D7%9E%D7%A2%D7%A0%D7%A7%20%D7%94%D7%A0%D7%9B%D7%95%D7%AA%20%D7%9E%D7%A2%D7%91%D7%95%D7%93%D7%94.aspx)

<sup>74</sup> National Insurance Website, Israel, <https://www.btl.gov.il/English%20Homepage/Benefits/sharam/Pages/default.aspx>

<sup>75</sup> National Insurance Website, Israel, [https://www.btl.gov.il/benefits/Disabled\\_Child/Pages/%d7%aa%d7%a0%d7%90%d7%99%20%d7%96%d7%9b%d7%90%d7%95%d7%aa.aspx](https://www.btl.gov.il/benefits/Disabled_Child/Pages/%d7%aa%d7%a0%d7%90%d7%99%20%d7%96%d7%9b%d7%90%d7%95%d7%aa.aspx)

<sup>76</sup> National Insurance Website, Israel

<sup>77</sup> Official Information Website of France for People with Disabilities and Their Caregivers

additional allowance alongside the basic child support<sup>78</sup>. It allows covering their daily needs, support during medical treatment, and childcare. This allowance can cover disability-related costs, such as technical means or housing adaptations, auxiliary medical or transport expenses. The United Kingdom provides a Personal Independence Payment (PIP) for persons with disabilities, designed to compensate for additional living costs in case of long-term incapacity or disability<sup>79</sup>. This assistance targets those who face challenges with daily activities or mobility due to their condition and consists of two parts: daily, which includes assistance with daily affairs, and mobility, which provides assistance with movement. The assistance is paid regardless of employment status, savings, or other benefit entitlements. For assistance assignment, a commission assesses how difficult it is for a person with disability to perform daily tasks and be mobile.

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<sup>78</sup> Official Information Website of France for People with Disabilities and Their Caregivers

<sup>79</sup> Personal Independence Payment (PIP), <https://www.gov.uk/pip>

# CONCLUSIONS

- 1. Allocation of assistance based on disability group or specific status does not contribute to building an appropriate support system for people with disabilities.** Disability group can include a wide range of different functional and biological human limitations, so measuring the level of assistance solely by disability group can lead to imbalance in providing aid. As a result, resource expenditures for supporting certain categories of people may be ineffective, while other categories may not receive the necessary level of assistance. For example, the care allowance for persons with disabilities due to war who receive age pension, disability or service pension amounts to only 627 UAH, which is 10.7 times less than the minimum wage. The assistance system for people with disabilities in Ukraine lacks unified standards, leading to inequality in social support, while payment amounts depend on their status.
- 2. Disability categories for children according to Ukrainian legislation differ from disability categories for persons with disabilities and persons with disabilities from childhood.** Unlike them, there are only 2 disability categories for children: "child with disability of subgroup A" and "child with disability" (with no further division into additional groups). At the same time, assistance payments with care allowance for children with disabilities of subgroup A exceed by 2-2.5 times (depending on age) payments directed toward other children with disabilities.
- 3. There is no unified framework of legislative and strategic approach regarding support for people with disabilities.** Problems of persons with disabilities are a multifaceted phenomenon, therefore it is impossible to guarantee that one single strategy can form unified assistance policy for these categories of people. Needs of people with disabilities may differ depending on gender, age, degree of disability, place of residence, and many other characteristics. They can be formed depending on economic vulnerability, experience of violence, social exclusion, and many other factors. Additionally, strategies are created not according to analysis of policies aimed at meeting the needs of people with disabilities, but to fulfil other higher-level documents. There is no clear system of indicators that would reflect the impact of state policy implementation on meeting needs and improving living conditions of people with disabilities. As a result, the connection between strategic policy planning and budget planning is lost.
- 4. There is no proper exchange of statistical data between the Ministry of Health and the Ministry of Social Policy, which hinders conducting comprehensive analysis of problems of people with disabilities and children with disabilities.** Statistical indicators are often generalized and mixed, which does not allow tracking the exact number of recipients of one or another assistance. Information about different categories of payment recipients is not collected. There is also no data in budget program passports that is disaggregated by gender, age, place of residence, and other characteristics. This does not allow analysing and evaluating how differently support in the form of allowances and benefits affects persons (children) with disabilities. It also does not allow conducting analysis of how effective expenditures were and whether they cover the need in full. Children who became disabled due to injuries or damage from explosive devices receive increased assistance with care allowance of 50% more than another child with disability. However, there is no separate statistical record of the number of children with disabilities due to explosive devices.

5. **There is a problem with evaluating the targeting of assistance and effectiveness of fund use.** The combination of all budget program characteristics that would demonstrate how achieving a specific goal affects the level of meeting population needs is scattered in various budget programs. It is not systematic. Budget indicators require verification and, in most cases, do not reflect the real state of overcoming difficult life circumstances or the level of support. Projected indicators of local-level budget programs are more targeted than state-level budget program indicators. Specifically, they have distribution by men and women, boys and girls, and also indicate differences in expenditures depending on gender. Additionally, there is disaggregation of recipients by age, disability group and subgroup.
6. **Payments for persons with disabilities are distributed among different budget programs designed to meet the needs of different population groups.** However, the quantity and quality indicators in these programs are generalized, making it difficult to determine how many people with disabilities and children with disabilities who need special assistance received appropriate support, as well as how much funding was allocated to them exactly.
7. **Services should become the primary source of support for persons with disabilities, but currently, public payments are a clearer and more understandable tool.** These payments are distributed mainly from the state budget, have defined amount and stability in receipt. Meanwhile, the list and quality of social service provision may differ in different communities. However, payments alone are only a partial solution to problems with supporting people with disabilities. The focus should be on social services, as they are more targeted in nature and oriented toward practical need satisfaction. Moreover, developing a social service provision system can be a stimulus for the economy through creating new jobs.
8. **Families with children with disabilities require enhanced protection.** Children with disabilities are under special state care, which provides them with a number of support instruments. However, family members, particularly fathers and mothers of these children, often lack social protection or conversely, are restricted in rights under certain circumstances. For instance, to receive care payments, they face the requirement not to work and not to study. Therefore, fathers and mothers of children with disabilities can be considered as a separate vulnerable category.
9. **Care allowance amounts are insufficient, creating a risk of economic vulnerability for families with a person with disability.** Care allowance payments with supplements are mainly significantly smaller (by 2-3 times) than the cost of corresponding services from state or private providers. Moreover, payment amounts for people with disabilities of the same group and subgroup can differ by 13 times depending on their status.
10. **Some types of support for persons with disabilities are ineffective and need to be revised or abolished.** Such types of support include sanatorium-resort treatment, compensation instead of unused sanatorium-resort vouchers, and vehicle provision. Currently, these instruments generally do not improve the situation of people with disabilities, or their effectiveness is unproven.
11. **Available mobility provision instruments are limited and need to be diversified.** Driving lessons are insufficient to cover mobility needs, which affects further socialization and employment. Moreover, there is a problem with low interest in receiving this service among

people with disabilities, including due to insufficient awareness or ability to purchase a separate car.

**12. Despite state support in professional training and requalification, the employment level of people with disabilities is unsatisfactory.** Only 2% of those who undergo training in corresponding centres are subsequently employed. This is explained by the lack of effective partnerships between training centres and employers, insufficient workplace adaptation, and limited employer awareness about the potential of workers with disabilities. Therefore, there is a need for more active involvement of employers in the process of employment of persons with disabilities. Low employment levels endanger the economic independence of these people and pose a risk for further socialization.



# RECOMMENDATIONS

## For the Cabinet of Ministers of Ukraine:

1. **Accelerate (complete) the process of implementing international standards in Ukrainian legislation regarding establishment of disabilities status for children and adolescents.** According to WHO standards, the International Classification of Functioning, Disability, and Health for Children and Youth (ICF-CY) is used internationally for children with disabilities. In Ukraine, Cabinet Directive No. 1008-r, paragraph 2, from December 27, 2017, "On approval of the action plan for implementing in Ukraine the International Classification of Functioning, Disability and Health and the International Classification of Functioning, Disability and Health for Children and Youth" states that the draft law on amendments to some legislative acts regarding the use of the ICF-CY was supposed to be submitted to the Cabinet of Ministers for consideration by the 3rd quarter of 2018.
2. **Establish an information collection and exchange system for effective and targeted policy for supporting people with disabilities.** The updated information collection system should contain a specific list of payments, social services and other assistance received by a person with disability, and information about them should be distributed by gender, age, place of residence, income availability and other characteristics. The corresponding system should also account for duplication and gaps in measures implemented at central and local levels. Statistics for separate groups of recipients must be introduced. For example, statistics on the number of children with disabilities due to explosive devices are not maintained at all. The information collection system should account for information not only from the social sphere, but also from medical and education spheres. It should comprehensively demonstrate what volume of assistance a person with disability receives across all directions. Collected data should be used to form new budget program indicators that will allow tracking fund use effectiveness.
3. **Conduct an audit of all strategies and develop a unified approach to forming policy for supporting persons with disabilities.** The updated vision should have a system of indicators that will reflect the result of solving a specific problem, not the number of measures conducted, or normative legal acts adopted. It should account for life expectancy of people with disabilities, their economic vulnerability, coverage and quality of received services. Strategic priorities should be reflected and combined with goals and tasks of budget programs.
4. **Develop state programs for mobility support or increase funding of corresponding social services locally.** Corresponding support may cover additional financing of such services as social taxi or providing transportation through minivans, purchasing (compensating) fuel costs for people with disabilities. Tax credits for vehicle purchase or rental payments for families with children with disabilities may be financed.

## For the Ministry of Social Policy of Ukraine:

5. **Assign assistance using individual assessment methodology.** Partially, individual assessment is already implemented in providing social services and certain payments. Scaling this methodology will allow more targeted resource distribution according to people's needs. The corresponding approach will allow choosing which support methods will be more

effective for one or another person/family. This will not only increase the level of meeting vulnerable categories' needs but also provide the possibility to change support types depending on resource capabilities of separate territorial communities. The assessment methodology should include clear quantitative and qualitative criteria that will demonstrate changes in welfare and overcoming difficult life circumstances.

**6. Increase the level of protection for families raising children with disabilities. This involves several key measures:**

- remove restrictions on simultaneously receiving care benefits for children with disabilities and the possibility to work and study;
- expand access to rehabilitation centres, day care centres/units, psychosocial assistance and information support regarding available treatment opportunities;
- expand access to the network of centres providing early intervention services to identify the needs of children with disabilities at an early stage;
- increase monetary assistance for families with two or more children with disabilities, as they experience significant financial and emotional burden. The assistance amount should be no less than the subsistence minimum for a child established by the Law of Ukraine on the state budget for the corresponding year - in 2023 for children under 6 years old it was 2,272 UAH, and for children aged 6 to 18 years - 2,833 UAH<sup>80</sup>;
- adapt the practice of providing monetary assistance for children whose parents are insured persons, to incentivize the working-age population to seek official employment.

**7. Cancel or revise ineffective types of support (such as sanatorium-resort treatments and its compensation) and redistribute funds to more relevant directions.** Such directions of social protection as social adaptation, transportation, rehabilitation of children with disabilities, and employment of people with disabilities require resource strengthening.

**8. Review the approach to financing care payments and services through:**

- Transforming care payments. Released funds should be directed toward financing social care services. It is also necessary to consider financing alternative models of care service provision that will be maximally economically effective (for example, day care for children of people with disabilities).
- Linking payment amounts to individual needs, not disability groups. Additionally, increasing payments to an amount that will allow paying for care services, by reducing the number of recipients who actually do not need care. Financing care services for people with disabilities should be ensured through monetization and transfer of funds to a bank card with a special account. Care payments should be no less than the subsistence minimum or minimum wage, because relatives providing care often cannot combine care and professional activity.

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<sup>80</sup> Law of Ukraine "On the State Budget for 2023"

- 9. Improve the mechanism for administering care services and allowance.** Introduce mandatory information exchange between systems regarding recipients of care services and payments. Providing/not providing care services – at hospital or at home - should depend on actual assessment of the service recipient's individual needs and the recipient's own choice of one of the possible service types. Care payment amounts should correspond to service costs and account for differences in service costs in settlements of different sizes.
- 10. Implement care payments or services for all people with disabilities, regardless of status, but with corresponding insurance experience and payment of unified contribution for mandatory state social insurance.** This will help ease the burden on families caring for persons with disabilities and ensure adequate care for these people. Currently, state social care assistance is assigned to people with disabilities due to war, military pensioners and those who are people with disabilities of group I, low-income people with disabilities of group I, single low-income people (except group I)<sup>81</sup>. A person with a disability can receive compensation for care in the event of an accident at work or an occupational disease<sup>82</sup>. It is also necessary to consider care for children with disabilities as possible professional activity, when care functions can extend to children with disabilities from other families. This will both increase the number of care service providers and improve the economic situation of families raising children with disabilities where parents cannot combine care with other types of work.

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<sup>81</sup>Law of Ukraine "On State Social Assistance for Persons Who Do Not Have the Right to a Pension and Persons with Disabilities", <https://zakon.rada.gov.ua/laws/show/1727-15#Text>

<sup>82</sup>Resolution No. 438 of April 28, 2023, "Certain Issues of Organizing the Provision of Social and Medical Services for Victims of Workplace Accidents and Occupational Diseases in Need of Such Services", <https://zakon.rada.gov.ua/laws/show/438-2023-%D0%BF#Text>

# APPENDICES

## Appendix 1. Criteria for determining disability depending on the group<sup>83</sup>

Group/subgroup	Criteria
<b>Group I</b>	<p>the degree of health loss, which causes limitation of one or more categories of an individual's vital activities at level III (severe):</p> <ul style="list-style-type: none"> <li>• inability to self-care or complete dependence on other persons;</li> <li>• inability to move or complete dependence on other persons;</li> <li>• inability to orient (disorientation);</li> <li>• inability to communicate;</li> <li>• inability to control one's behaviour;</li> <li>• significant limitations of learning ability;</li> <li>• inability to perform certain types of work.</li> </ul>
<b>Group I Subgroup A</b>	<p>the degree of health loss, causing complete inability to self-care and complete dependence on other persons (requiring constant external supervision, care, or assistance).</p>
<b>Group I Subgroup B</b>	<p>the degree of health loss, resulting in the inability to independently meet most essential physiological and household needs, even with the aid of technical devices and appropriate housing modifications</p>
<b>Group II</b>	<p>the degree of health loss, which causes limitations in one or more categories of an individual's vital activities at level II:</p> <ul style="list-style-type: none"> <li>• level II self-care limitation – ability to perform self-care with the use of assistive devices and/or with assistance from others</li> <li>• level II independent mobility limitation – ability to move independently with the use of assistive devices and/or with assistance from others</li> <li>• level II limitation in learning - inability to study or the ability to study only in special educational institutions or according to special programs at home;</li> <li>• level II work activity limitation – inability to perform certain types of work or capacity to work only in specially adapted conditions, using assistive devices and/or specially equipped workspaces, with assistance from others</li> <li>• level II orientation limitation - ability to orient oneself in time and space only with assistance from others;</li> <li>• level II limitation in communication - ability to communicate only with the use of assistive devices and/or with assistance from others;</li> <li>• level II behaviour control limitation - partial or full ability to control one's behaviour only with support from others.</li> </ul>
<b>Group III</b>	<p>the degree of health loss, which causes limitations in one or more categories of an individual's vital activities at level I (moderate):</p> <ul style="list-style-type: none"> <li>• level I self-care limitation - the ability to self-care with the use of assistive devices;</li> <li>• level I independent mobility limitation - the ability to move independently with increased time, limited movement, and reduced travel distance;</li> <li>• level I limitation in learning - the ability to study in educational institutions of the general type, subject to compliance with a special regime of the educational process and/or with the use of assistive devices, with assistance from other persons (excluding teaching staff);</li> <li>• level I work activity limitation - partial loss of opportunities for full-time work (loss of profession, significant reduction in qualification or professional scope by more than 25 percent, substantial difficulty in acquiring a profession or employment of persons who have never worked before and have lack of professional skills);</li> <li>• level I orientation limitation - the ability to orient in time and space with the use of assistive devices;</li> <li>• level I limitation in communication - the ability to communicate, characterized</li> </ul>

<sup>83</sup>Resolution of the Cabinet of Ministers of Ukraine No. 1317 of December 3, 2009, "Issues of Medical and Social Examination", <https://zakon.rada.gov.ua/laws/show/1317-2009-%D0%BF/page#Text>

Group/subgroup	Criteria
	<p>by a decrease in speed, decreased volume of information processing, and limitations in receiving and transmitting information;</p> <ul style="list-style-type: none"> <li>level I behaviour control limitation - the ability to partially control one's behaviour under specific conditions.</li> </ul>
<b>Child with a disability</b>	This category is assigned to persons under the age of 18. The grounds for assigning a child the category of "child with a disability" are a moderate to middle degree of health loss, dependence on third-party care, assistance or dispensary supervision, and the ability to self-care.
<b>Child with a disability of subgroup A</b>	This category includes persons under the age of 18 who have an exceptionally high degree of health loss and extreme dependence on constant outside care, assistance or dispensary supervision of others and who are actually incapable of self-care.

## Appendix 2. An overview of payments aimed at persons with disabilities

Category	Status	State social assistance	Care allowance	Care benefits	Pension payments	Insurance payments
Child with a disability of subgroup A		✓		✓*		
Child with a disability	One of the parents who does not work, for a single mother/father despite the fact of work	✓		✓*		
Person with a disability from childhood of group I		✓		✓		
Person with a disability from childhood of group II	Single person, needs care according to the medical conclusion	✓		✓		
Person with a disability from childhood of group III						
Person with a disability of group I	Persons with war-related disabilities; Persons disabled during World War II; Low-income persons	✓ no insurance experience	✓ or insurance payments		✓ have an insurance experience	✓ or care allowance
Person with a disability of group II	Persons with war-related disabilities; Persons disabled during World War II; Single, low-income persons in need of care according to a medical conclusion	✓ no insurance experience	✓ or insurance payments		✓ have an insurance experience	✓ or care allowance
Person with a disability of group III	Persons with war-related disabilities; Single, low-income persons in need of care according to a medical conclusion	✓ no insurance experience	✓ or insurance payments		✓ have an insurance experience	✓ or care allowance

\*Additionally, +50% to the assistance without a supplement for children affected by the Chernobyl disaster,  
+50% to the assistance with a supplement for children affected by explosive devices.