

No			INDICATOR	DESCRIPTION	MEASUREMENT SCALE	COUNTRY													
						AM	BG	HR	EE	GE	KZ	XK	LV	LT	MD	PL	RO	RS	UA
1.	'Philosophy' of the system of services for people with mental disabilities	1.1.	Medical/social	The relative importance of the medical as compared to the social model in working with people with mental disabilities	0-3 with 0='the medical approach is the dominant one', 3='the social approach is the dominant one'	0		0	3	1	1		0	2			1	0	1
		1.2.	Institutional/community based	The relative importance of the institutional versus community based services	0-3 with 0='institutions are the backbone of the system', 4='community based services are the backbone of the system'	0		0	3	2	1		0	3			1	0	1
		1.3.	Residential/non-residential	The relative importance of residential compared to community based care	0-3 with 0='most of the services are residential', 3='most of the services are non-residential'	0		0	2	1	1		3	3			1	0	0

		1.4.	Standards	Standards for services for people with mental disabilities	0-3 with 0='no standards related to service delivery', 1='discussions for the introduction of standards', 2='some pilot standards introduced and applied', 3='large number of well-established standards used in the daily practice of service delivery'	1		1	3	2	2						2	2	1
		1.5.	Institutional	Stage of institutional care reform	0-3 with 0='no reform', 1='on-going policy debates about a reform of residential institutions', 2='deinstitutionalization has started', 3='deinstitutionalization reform has gained momentum'	1		1	2	2	2						1	1	1
2.	Policies related to the system of services for people with mental disabilities	2.1.	Legislation		0-3 with 0='poor or non-existent', 3='well developed'	1		3	3	2	1						2	2	2
2.2.		Policy design	Designing policies for deinstitutionalization and introducing community-based	0-3 with 0='poor or non-existent', 3='well developed'	0		3	2	2	1							0	1	1
2.3.		Policy implementation	Implementing policies for deinstitutionalization and introducing community-based	0-3 with 0='poor or non-existent', 3='well developed'	0		0	2	2	1								0	0

		2.4.	Policy evaluation and adjustment	Evaluating and adjusting policies for deinstitutionalization and	0-3 with 0='poor or non-existent', 3='well developed'	0		0	2	1	1		0	1			0	0	1
		2.5.	Public awareness and	Are there policies	0-3 with 0='poor or non-existent', 3='well	1		0	2	1	1		0	0			0	1	0
		2.6.	Training of professional	Are there programs for training of professional staff	0-3 with 0='poor or non-existent', 3='well	1		1	2	1	1		1	1			0	2	1
		2.7.	Overall funding adequacy	To what extent the overall finding for services for people with mental disabilities is	0-3 with 0='poor or non-existent', 3='well developed'	0		1	2	1	1		1	1			0	1	1
		2.8.	Funding for non-residential	To what extent funding for non residential care is	0-3 with 0='poor or non-existent', 3='well	0		0	2	2	2		1	1			0	1	0
		2.9.	Needs based funding	Whether needs-based funding is introduced including but not limited to 1) bottom up planning, 2) vouchers, 3) flexibility in funding individual	0-3 with 0='poor or non-existent', 3='well developed'	0		0	2	3	1		0	1			1	0	0
		2.10.	Case management	Existence of case management practices	0-3 with 0='poor or non-existent', 3='well	1		0	3	1	0		0	1			1	1	0
3.	The role of NGOs	3.1.	Monitoring	Whether NGOs have a role in monitoring of policies related to people with mental	0-3 with 0='no role', 3='key role'	2		0	2	2	2		1	1			2	3	1
		3.2.	Advocacy	Whether NGOs have a role in advocating for policies related to people with mental	0-3 with 0='no role', 3='key role'	1		0	2	3	2		3	2			2	3	2
		3.3.	Service provision	Whether NGOs have a role in service provision for people with mental disabilities	0-3 with 0='no role', 3='key role'	1		1	2	3	1		3	2			1	2	1
		3.4.	Budgetary monitoring	Whether NGOs have a role in budgetary monitoring of policies related to people with mental disabilities	0-3 with 0='no role', 3='key role'	1		0	1	3	1		0	0			1	1	0