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Child care system reforms in Eastern and Central Europe and Central Asia: Why there is a need to focus on children below three years

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Abstract
UNICEF is supporting governments in Eastern and Central Europe and Central Asia to develop national child protection systems that effectively prevent and respond to violence, family separation and detention, including among most vulnerable groups. In particular, UNICEF supports child care reforms aiming at enforcing the right of children to live in a family environment. Ten years of complex reforms in the social sector were not translated into results for children as the rate of children placed in formal care has not declined during the last decade. In order to share a joint vision that every child must grow up in a nurturing family environment, UNICEF and the Office of the High Commissioner for Human Rights launched at the European Parliament in July 2011 a call to action to give priority to end the placement of children under three in institutions and prevent the separation of children from their families. At the end of 2012, 20 governments made commitments to adopt national operational plans for preventing the placement of children below three years in formal care. One year later, results can start to be identified and measured. Due primarily to the prompt and effective efforts of the governments of Bulgaria, Croatia, Kazakhstan, Serbia and Turkey, it is estimated that the number of children below three years in institutional care decreased by 10 per cent in Central and Eastern Europe and Central Asia by the end of 2013. This was achieved through diversified approaches described here.

A long-lasting violation of the right of children to live in a family

The Convention on the Rights of the Child (CRC) states the priority that “the child, for the full and harmonious development of his or her personality, should grow up in a family environment”1 and the guiding principle that “State parties shall ensure that a child shall not be separated from his or her parents against their will except when (...) such separation is necessary for the best interests of the child”2. At the same time, the region of Central and Eastern Europe and the Commonwealth of Independent States (CEE/CIS) is known to have some of the highest numbers in the world3 of children growing up separated from their families. The total number of children who grow up in formal care in the region is estimated at 1.3 million, out of which 650,000 live in residential care. Of these children, some 200,000 have disabilities, and 30,000 are under the age of three.4

1 UNCRC, Preamble.
2 Article 9 of the CRC
3 UNICEF (2009), “At Home or in a Home”, p. 9
4 TransMONEE database 2012
The high rates of separation in this region are to a large extent due to the legacy of systems inherited from the socialist regimes. Before transition, the paradigm of state-run systems of protection based on residential care dominated. Mind-sets based on the common belief that the state could easily substitute family life prevailed in policies and practice. Even if patterns differ slightly from one country to another, generally child care institutions in the region are catering for children with disabilities, with chronic diseases or behavioural problems, children from ethnic minorities, whose families became socially or economically vulnerable (single mothers, mothers who give birth to children out of wedlock, parents with mental illness etc.), and children with parents who are abusing alcohol, are dependent on drugs or are in prison. Stigma, discrimination and gender dynamics are also thought to be very influential in decisions about institutional placements. For example, high levels of poverty among single mothers or strong cultural norms of 'motherhood', combined with an absence of an efficient support system when a mother cannot meet the social expectations that are resting upon her, have been identified as root causes for baby abandonment and relinquishment.

Overall, even if in some countries there are high levels of deprivation of parental rights that lead to the placing of children in the care system\(^5\), it is only a very small proportion of children that are placed in residential care because of violence in the family\(^6\). This means that very few children are actually separated from their parents because it is in their best interests: most children in formal care are there for reasons of poverty and absence of social protection mechanisms and services for families and children.

Revelations of bad living conditions for children in residential care across the region in the 1990s, as well as changes in the child care paradigm calling for a shift from collective care and control to responses to individual needs and respect of rights, forced many actors to react and call for a reform of child care systems in the region.

**Reform of child care systems were undertaken in all countries of the region**

Supporting the reform of child care systems became a major priority for UNICEF in CEE/CIS from 2000 onwards and we have been involved in supporting reform processes in 22 countries of the region. The objectives of the reform were to give priority to supporting families and to move towards a progressive transition from institutional to community-based care. Beyond bringing changes to the child care system, it also required changing the mind-set of professionals and putting an end to the stigmatization of children with disabilities. Strategies and inputs to achieve results have been defined by governments, sometimes being a component of larger welfare and social protection system reform, sometimes with a focus on transforming or closing residential care institutions.

Major progress was achieved in improving policy and legislative frameworks, introducing new services and changing the way services were standardized. Changes were implemented in financial flows and budgets for providing financial space for new services to be taken up in the public budget. Changes also occurred in the governance

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\(^5\) For more information on causes of placement, see library on [www.ceecis.org/ccc](http://www.ceecis.org/ccc) and among other following publications:
- UNICEF (2005) The situation of child abandonment in Romania, p. 29

\(^6\) UNICEF (2012) Children under the age of three in formal care in Eastern Europe and Central Asia, p. 64
and quality assurance of the system to ensure better coordination, decision-making and quality assurance processes and mechanisms. A new modus operandi was promoted whereby 'gatekeeping' (the decision-making process and the provision of effective responses for children who have been separated or are at risk of separation from parental care) was identified as a core function of the state, with other service provision being carried out by private and public providers alike as long as there were clear rules of the game (e.g. standards, licencing mechanisms, inspections). The strongest policies take root in evidence and this work also required improved - and more disaggregated - data on most vulnerable children and on children placed in formal care to inform policy making.

A number of countries are implementing policies directed at families, recognizing that they are the best nurturing and protective environment for a child. Progress has been made in defining the most suitable models of support, namely establishing parental leave entitlements, family benefits, and child-care support services complemented by other types of family welfare services.

**Progress at system level was not translated into changes in the lives of children**

Despite the remarkable social and economic changes and reforms that have swept through the region, most countries still heavily rely on the policy and practice of institutionalization. The worrisome finding, when analysing statistical data from the TransMonEE Database, which contains government data from 21 countries in the CEE/CIS region, is that although major progress has been achieved in the reform of child-care systems, these have not yet been translated into the capacity of social protection systems to prevent family separation. This is illustrated by the fact that the aggregated rate of children under the age of 18 in formal care has remained relatively stable since the year 2000; it has even increased in some countries due to demographic decline in child population.

In several countries, children with disabilities represent as many as 60 per cent of all children in institutions. In some of the countries, disadvantaged ethnic minorities such as the Roma are significantly over-represented in child institutional care. At least 31,000 children below three years of age are in institutional care, only two to five per cent of these being orphans. Every hour, approximately two young children, mainly babies, are separated from their parents and sent into institutional care in Central and Eastern Europe and Central Asia. That is more than fifteen thousand children every year.

This situation demonstrates the fact that vulnerable families are not being provided with the support they need by social protection systems (combining cash transfers, services and social work) in order to cope with the impact of the current economic crisis. What research is showing is that families which most need support are those facing the biggest obstacles when seeking government aid, and in many instances they are not even eligible for assistance. There are many reasons for this: some are related to unnecessary bureaucratic red tape, while others are more subtle, such as discrimination. To be unemployed or employed in the informal sector, to have migrated abroad and therefore lack a permanent address, can result not only in a low income but also in huge challenges to access government services intended to alleviate such social difficulties. It
must be noted as well that, in some countries, strong lobbies with direct interest support the status quo on institutional care.

Many countries continue to benefit from external support for maintaining their institutions for children. This tends to thwart efforts to develop new forms of care and protection of vulnerable children. In order to address such obstacles, UNICEF has joined the European Expert Group on the Transition from Institutional to Community-based Care (the EEG) with the aim of influencing the allocation of EU funds in the social sector. Acting as an advisory body, the ambition of the EEG is to promote person-centred, individualised, quality and empowering models of services and formal and informal care that fully respect the human rights of all people with care or support needs and their families. The EEG members are prominent stakeholders representing people with such needs including children, people with disabilities, people experiencing mental health problems, and people experiencing homelessness; as well as service providers, public authorities and international organizations such as the Office of the High Commissioner for Human Rights and UNICEF.

**A focus on a specific group in order to get results for all children**

As complex reforms in the social sector were not achieving expected results for children, there was a need to review some of our core strategies and refocus on the accountability of government policies to have a clear impact on enforcing the right of children to live in a family environment.

It became urgent to further share a joint vision that every child must grow up in a nurturing family environment, in order to ensure that all children get the best possible start in life. The vision was shared at the European Parliament in July 2011, when UNICEF and the Office of the High Commissioner for Human Rights launched a call to action to give priority to end the placement of children under three in institutions and prevent the separation of children from their families.

It is our assumption that preventing baby abandonment and relinquishment would also have an impact on children with disabilities through a substantial reduction in the number of these children being placed in institutional care. Investments to prevent children under the age of three from entering care can also significantly reduce the overall number of children in care in the future and release budgetary resources for investments in new modern services.

Change will occur if political commitment to address the issue is there. Therefore UNICEF believes the best way to address the issue of separation is to refocus attention on the family as the starting point, and calls for a more comprehensive set of integrated interventions aimed at improving the capacity of social protection systems to identify the most vulnerable families, to reach them and provide them with appropriate support in order to prevent separation.

UNICEF and its partners also make a special case for the development of policies directed at families who have children with disabilities. These families often face a lifelong struggle to access services that would enable each member of the family to live a decent life. The need for additional investments required to support these families is
widely recognized, and only systematic policy-driven changes, aiming at less dependence on formal care and increased reliance on services designed to keeping children within their families and communities, can lead to genuine care and protection of children within a family environment.

It is easy to build the case for why priority should be given to end the placement of children under three in institutions. The probability of losing parental care is two to four times higher for children below three years compared with children from other age groups. For example, in Serbia it has been found that 70 per cent of all children with disabilities who live in residential care came straight from maternity wards. Moving children out of institutional care proved to be quite challenging and preventing their entry into formal care remains the most efficient way to bring change in the set-up of the whole care system. Early childhood is the most important developmental phase in life: not surprisingly, the institutionalization of infants has been identified as a serious concern by researchers and experts as it has proven to have a very damaging effect on young children’s health and development. Many features of institutional care are a blatant abuse of children’s rights and pose a serious threat to their normal developmental processes. Children in institutional care are more likely to suffer from attachment disorders, developmental delay and impairment to brain development. According to research⁷, after the first three months, for every further three months spent within an institution the child’s physical development is delayed by one month.

In addition, children under the age of three are particularly at risk of abuse of their rights because they depend on others for the realization of these rights. Some young children placed in overcrowded, poorly resourced institutions are indeed denied basic human rights such as the right to food, to health or to a decent standard of living. Bureaucratic regimes within institutions frequently deny children their rights to play (and thus to learn), to maintain contact with their family and to see their personal history preserved. The prevalence of neglect and abuse, including physical and emotional abuse, of children under the age of three within institutions has been evidenced – even if under-reported – in all CEE/CIS countries. Children in institutions are often neglected, excluded from decision-making processes, and almost systematically deprived of effective care planning or review processes, such that their placement is not in their best interests.

Stigma and discrimination against certain groups of children or types of parents, prevailing in society and perpetuated by systems and services, influence the separation of young children from their parents. Children with disabilities are among the groups of children at highest risk of separation in the earliest phase of their lives. Children from ethnic minorities and infants born to HIV positive women or to women from groups most vulnerable to HIV are at high risk of being institutionalized. They are frequently considered as 'unfit mothers' and encouraged to leave their babies at birth in hospitals and infant homes. On the one hand, professional health practices and services are still favouring and encouraging the separation of these children from their parents, rather than helping to create a supporting environment that could empower parents to care for

their children at home. On the other hand, supportive welfare services for families and children with very specific needs remain underdeveloped in most countries.

**The Campaign to end placing children under three years in institutions**

The campaign aims at engaging governments in the region to put into place policies and services required to prevent the placing of young children in institutional care. It aims as well to mobilize and leverage regional and global partners, especially the European Union, in support of this goal. It builds on international and European human rights standards: the UN Convention on the Rights of People with Disabilities, the recommendations from the UN Committee on the Rights of the Child, the international Guidelines for the Alternative Care of Children, and the Council of Europe Recommendations, in particular on deinstitutionalization and community living for children with disabilities.

UNICEF CEE/CIS is supporting governments in the region, building a significant body of programme experience and lessons learned for accelerating results in the prevention of baby abandonment/relinquishment and ensuring that children grow up in a safe and supportive family environment. Lead countries have been identified that work on strategic and common results with a shared approach on policy and legal frameworks, resource allocation, systems strengthening and monitoring.

Under the patronage of the President of Bulgaria, Mr. Rosen Plevneliev, the ministerial conference ‘Ending the placement of children under three in institutions: Support nurturing families for all young children’, in Sofia, Bulgaria, in November 2012, helped to articulate a strong political commitment to continuing and accelerating work in the area of child care reform. The aim was to enable high-level policymakers from Eastern Europe and Central Asia to exchange knowledge and promote mutual learning among participating countries, stimulating governments to create and implement policies providing social protection for the most vulnerable families and ending the placement of children below three years of age in residential care.

The outcome of this conference demonstrated clearly the extent to which the importance of this issue is now recognized at the highest level. The conference made it possible to crystallize the commitments made by twenty governments to adopt national operational plans for preventing the placement of children below three years in formal care.8

**Turning the tap off**

One year after the Sofia conference, it is already possible to identify and measure its achievements.

Monitoring the commitments made by those twenty governments, we find that seventeen countries have adopted national operational plans for preventing the placement of children below three years in institutional care and that at least eight of these plans are assured of appropriate political support and funding to yield results within two years.

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Based on a review conducted at the end of 2013, the number of children below three years placed in formal care decreased by almost 3,000 in 2013, representing a fall of 10 per cent for the region as a whole. This will have to be confirmed in due course by official statistics but information collected at country level demonstrates that, despite the impact of the economic crisis on the most vulnerable families, several governments have kept up the momentum for improving their social protection policies and responses.

Concrete progress documented to date stems largely from the prompt and effective initiatives undertaken by the Governments of Bulgaria, Croatia, Georgia, Kazakhstan, Serbia and Turkey, as detailed below. These developments have been achieved through a variety of strategies grounded in the specific situation of each country. Other countries, including Albania, Belarus, Kyrgyzstan, Moldova, Romania and Turkmenistan, have also initiated reforms which could, if pursued, lead to more positive results.

**How progress was achieved**
Successful strategies have systematically involved addressing more than one bottleneck, focusing on legislative reforms, budgetary allocations, development of standards, provision of capacity building and acceleration in the setting up of new services. The following examples give an idea of the range of measures taken.

Cash benefits for families of children with disabilities have been put into place and reinforced in most countries in the region. Geographical coverage of services and the capacity of the most vulnerable to access these services nonetheless remains an issue.

Croatia and Serbia have adopted legal provisions prohibiting the placement of children under the age of three in institutions. This has been done in parallel with efforts to develop alternative services, reform practices in the health sector, including reinforcing the work of home visiting nurses, and to further develop social welfare services for prevention. As demonstrated by the experience of Romania, which had adopted such a measure some years ago but with mixed results, this requires first developing the new services necessary for making such a policy viable in practice, and should not be seen as the initial step.

Bulgaria and Georgia have developed solid plans backed-up by political commitment and financial support to close infant homes and develop further family support schemes. In Bulgaria, this is part of an ambitious national plan for putting into place a wide range of new support aided by funding from the European Commission including the development of specialized foster care for children below three years. In Georgia, the closure of institutions needs to be consolidated with the development of appropriate services at municipal level.

Kazakhstan has mainly engaged in developing social work and outreach services such as home visiting nurses as well as bringing changes to gatekeeping decision-making mechanisms.
Several countries have invested in the development of specialised foster care for young children, such as Bulgaria, Croatia, Moldova, Serbia, Romania and Turkey. Some of these countries have further developed specialized training of foster families in charge of children under three years and children with disabilities; this has been generally combined with an increase in the cash allowances provided to these foster parents.

Special mention must be made of the progress achieved in Turkey. In parallel to the reinforcement of its support schemes for vulnerable families, the government has launched a major campaign for promoting foster care via TV and radio spots, brochures and more than 3,000 meetings conducted by volunteers in 81 provinces. In particular, prospective adoptive parents and families active in social support networks were systematically invited to participate in such information meetings. New practices were introduced with the enforcement of the regulations on foster parents; new models were introduced such as 'foster care by relatives or close neighbors', 'periodic foster care', 'temporary foster care' and 'specialized foster care'; training programmes for prospective foster parents have been developed; a new audit and monitoring system has been put into place. As a result of this campaign, 3,667 families applied to become foster families in 2013; the total number of children placed in foster care has increased from 1,492 in 2012 to 3,123 at the end of 2013, in 2,587 foster families (compared with 1,350 foster families at the end of 2012). At the same date, 468 children below three years were placed in foster care in Turkey (data for 2012 were not reflected in statistics).

Reasons to feel encouraged ... and to go back to work
Reducing the number of children below three years in institutional care in our region by 10 per cent in 14 months is good reason to believe that we made the right decision to embark on such a path. This is the first time we have an indication that we may be contributing to 'turning the tap off'.

But there is still a long way to go. It is not only about the 27,000 children below three years still placed and left in institutional care. It is about addressing some of the key obstacles remaining to provide vulnerable families with the necessary means to care for and protect their own children.

Regional positive trends should not hide more negative trends in some countries, moreover, and we see some indication of an increase of children below three years being deprived of parental care and placed in formal care in five countries of the region.

No substantial change could be identified in statistics regarding the situation of abandonment and relinquishment of children with disabilities. Insufficient efforts have been made to identify these children and allow them and their families to get better access to cash transfers, services and social work support. Behaviour change among professionals is still quite slow. The transition from institutional to community-based care is far from being realized in all countries, including the countries from this region which have acceded to the European Union, and geographical inequities in terms of access to services have not been reduced. Cash benefits still have a limited impact or are insufficient for buying required services.
One of the main challenge lies with the development of the capacity to identify the most vulnerable families, to reach them and provide them with appropriate support in order to prevent separation.

UNICEF will continue supporting governments in Europe and Central Asia to assist the most vulnerable families in order to prevent unnecessary family separation. Alone, we cannot succeed. Regional and international organizations, as well as bilateral donors, the media and civil society, have a critical role to play in promoting the social inclusion of all families with a particular attention paid to the most fragile ones, the prevention of infant abandonment and the placement of children under the age of three deprived of parental care in institutions. No efforts should be spared to achieve this goal.