

Effective Strategies for the Implementation of the UN Guidelines for the Alternative Care of Children

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Hope and Homes for Children



Our vision

Our vision is a world in which children no longer suffer institutional care.





Our mission

Our mission is to be the catalyst for the global eradication of institutional care of children.

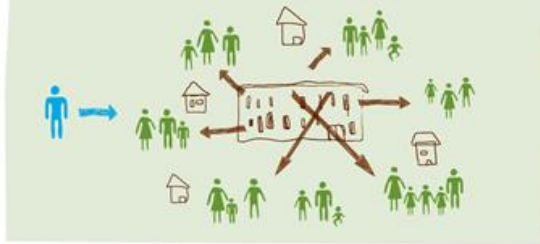
UN Convention on the Rights of the Child

“Recognising that the child, for the full and harmonious development of his or her personality, should grow up in a family environment, in an atmosphere of happiness, love and understanding.”



The Model of Change

Closing institutions and preventing abandonment



Building capacity to provide family-based care



Influencing policy and legislation to shape national childcare reform



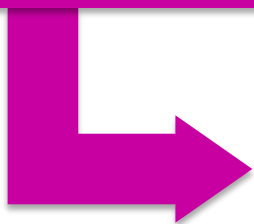
European Regional Outcomes

- Increased political commitment to de-institutionalisation and child protection reform
- Decreased number of children in institutional care
- Decreased number of young children in institutional care
- Increased range of family based alternative care available
- Availability of additional funding for transition from the EU
- Agreed guidelines on deinstitutionalisation and use of EU funds
- Local and regional expertise and scalable good practice
- Increased focus on early intervention and prevention of separation



Case study - Romania

2000: over 100,000
children in more than
640 institutions



2007: over 25,000
children in 236
institutions

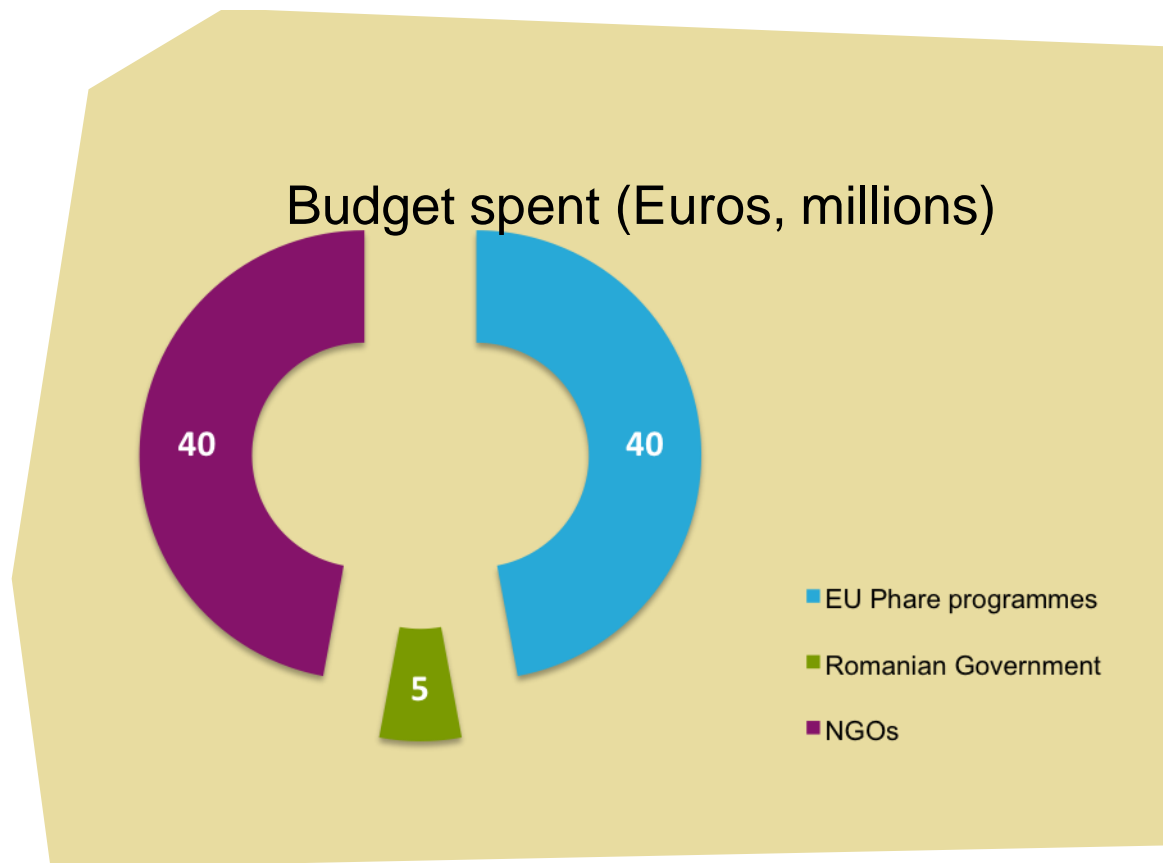


Year 2011: over 9,000
children in 190
institutions remaining



Case study - Romania

290 institutions were closed in Romania between 2000 and 2011



Case study - Romania

From 100,000 children in a CP system entirely reliant on institutional care Romania has a diversified CP system with:

67,000 children in care, out of which:

- 9,000 in institutions
- 18,000 in family-based residential care
- 19,000 in foster care
- 21,000 in other family placements (kinship and simple placement)



Romania – What Next?

- National Agency for Children
- 47 DGASPC
- 41 County Councils
- 6 Sectors in Bucharest
- 2011 total spending was €900 mil
- €225 mil in child protection (25%)
- 54,000 employed staff

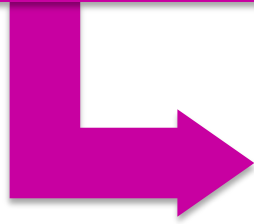
Remaining issues:

- Too many children separated unnecessarily
- Young people leaving care having significant issues integrating and becoming self sufficient
- Too many children in the care system



Romania – Investing in Children

Scenario 1 – maintaining the status quo



Scenario 2 – transitioning 9,000 children out of the remaining institutions



Scenario 3 – full fledged reform driven by deinstitutionalisation



Romania – Financial Modeling

- The Downsizing scenario (Scenario 2) and the Deinstitutionalization and prevention scenario (Scenario 3) prove that the elimination of old-type residential care is possible and children can be transferred to family-like and community-based care;
- Recurrent costs in reform-minded Scenarios 2 and especially 3 are significantly lower than in the "no policy-change" Scenario 1 (the Baseline Scenario);
- Capital costs incurred by the elimination of old-type residential care and construction/ purchase of FTH are lower than recurrent cost savings, when compared with the "no policy-change" Scenario 1;

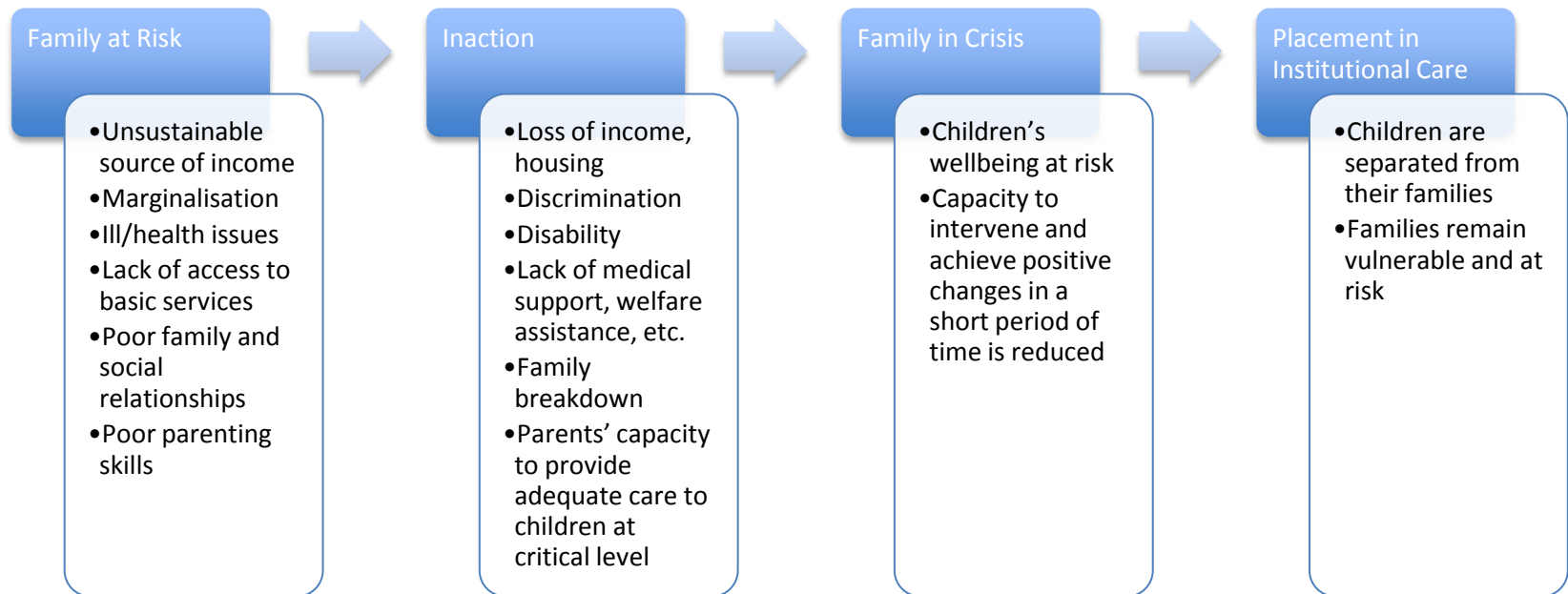


Romania – Financial Modeling

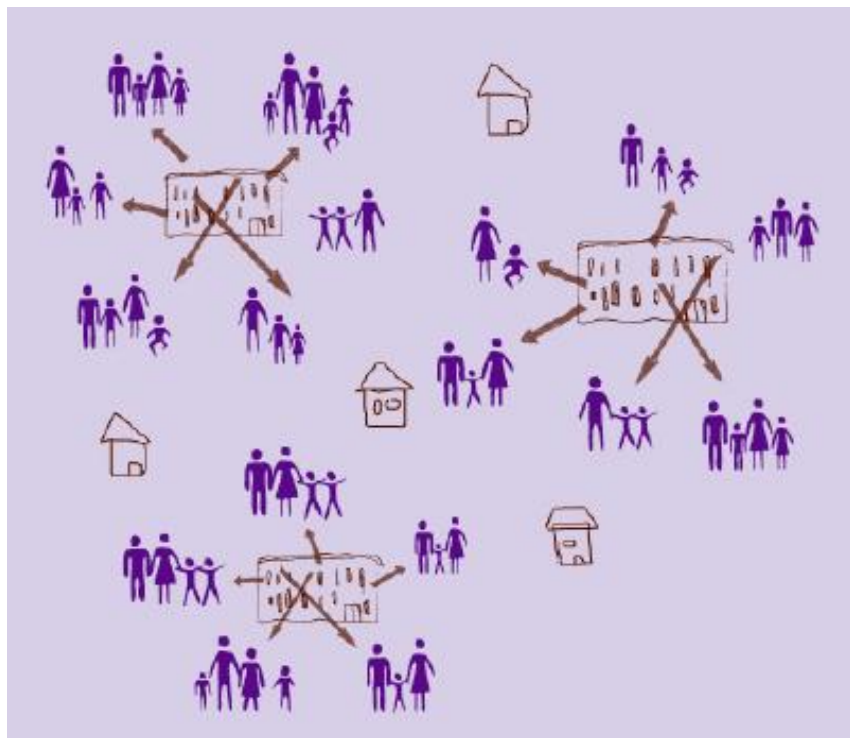
- The deinstitutionalization and prevention scenario - i.e. Scenario 3 - is the only one which simultaneously delivers:
 - an overall significant drop in children numbers;
 - eradication of old-type institutional care;
 - a sustainable reduction of admissions into the system;
 - a nominal drop in recurrent costs by 2020, as compared to 2011 and 2012;
 - significant and increasing recurrent expenditure savings;
 - affordable investment needs to allow the creation of family-like residential infrastructure (FTHs);
 - dramatically better outcomes for children in the system and for those prevented from family separation;



Reliance on Institutional Care Has Short & Long Term Consequences



De-institutionalisation an Engine for Child Protection System Reform

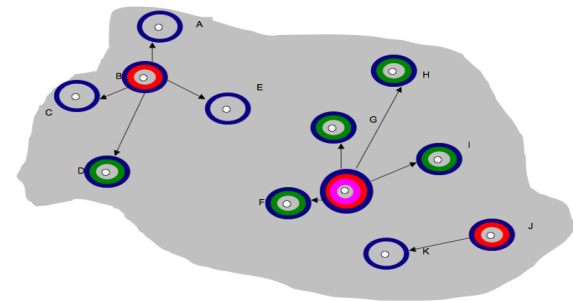
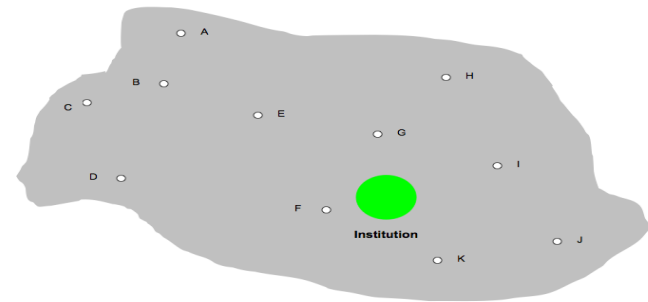


- Implemented to embed principles of **necessity** and **suitability** and serve the **best interest** of the child
- Defined as the process of **replacing** institutional care with a **range** of family strengthening and **prevention** services and **family based alternative care** services.



De-institutionalisation in 5 Steps

1. Engagement
2. Assessment
3. Design & Development
4. Transition
5. Monitoring



1. Engagement

1. Children
2. Parents
3. Professionals & Volunteers
4. Local Authorities
5. Government

- Circumstances of separation and parents attitudes towards institutional care
- Evaluate the service provision at community level & triggers leading to children's institutionalisation
- Overall attitudes and practices regarding separation and use of institutional care



2. Assessment

1. Children in institutions
2. Parents and extended family
3. Community volunteers
4. Available professionals
5. Institution staff & community resources

- Map out support required to transition out of institutional care – children and parents
- Map out support to develop/strengthen adequate community responses & gatekeeping
- Identify additional support required by professionals to ensure case management
- Identify requirements to develop new services and capacity to deliver those



3. Design and Development

1. Matching needs & circumstances with family support and alternative care needs
2. Decentralisation of services with regional coordination
3. Development of new services
4. Ensuring sustainability

- Capacity building for parents, kinship carers and foster care with special attention for children with special needs
- Capacity building to local volunteers (health, education, paralegal, community development)
- Capacity building to local authorities and key stakeholders to involved in gatekeeping
- Development of a professional workforce (child focused)



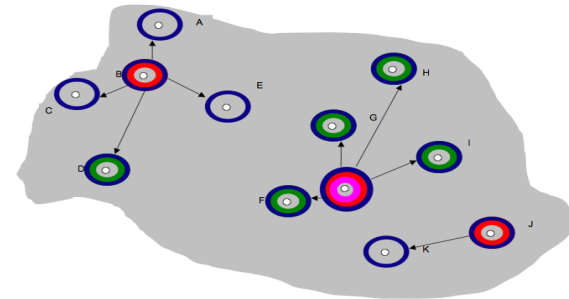
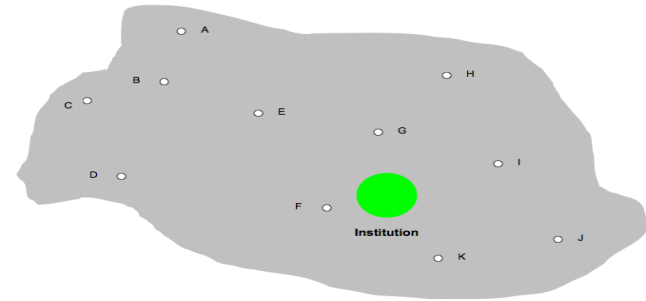
4. Transition

1. Preparing children
 2. Recruitment of alternative families
 3. Special attention to children with disabilities
 4. Special attention to young people
 5. Support for existing staff, volunteers and existing services
- Preparing families
 - Training for kinship and foster families
 - Retraining and re-deployment of staff in new services
 - Strengthening the professional workforce
 - Embedding professional supervision and professional development



5. Monitoring and Evaluation

1. Post-placement monitoring
2. Post-placement support
3. On-site training and mentoring
4. Management support
5. Refining mechanisms to coordinate services

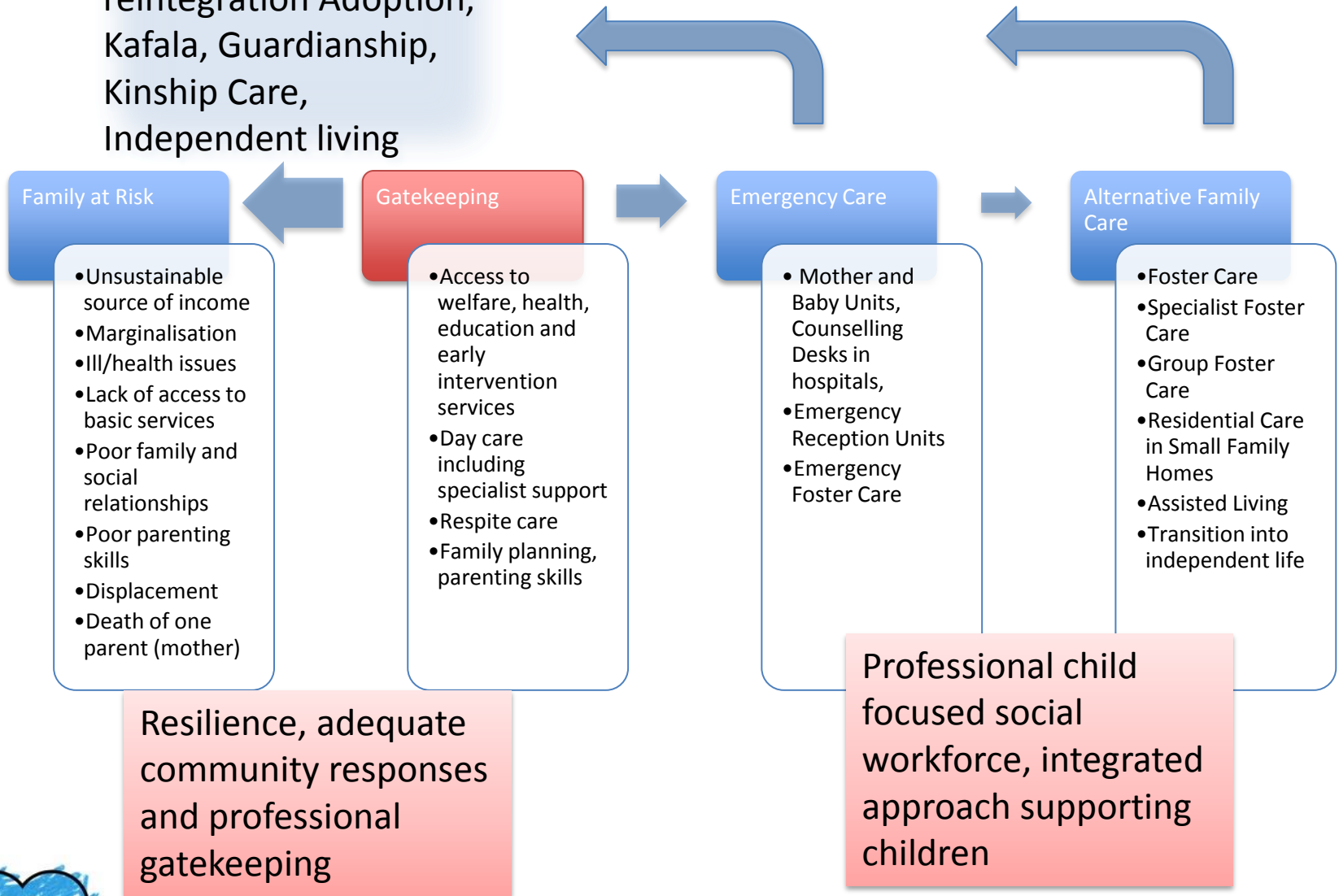


Advantages and Challenges

1. Child centred approach
 2. Evidence-based targeted approach – focuses resources and efforts
 3. It builds on existing resources and capabilities
 4. It helps re-distribute resources from institution level to community level
 5. It is scalable
 6. It is measurable
- It requires specialist skills
 - It is intensive and requires resources for the transition period
 - It targets first most fragile and deprived communities
 - It is implemented against resistance in many cases (the focus is on developing capabilities to serve children versus finding new roles for existing staff especially at institution level)
 - It requires investment in order to fill the gaps, to develop necessary professionals in addition to existing ones



Permanent families,
reintegration Adoption,
Kafala, Guardianship,
Kinship Care,
Independent living



Lessons – critical success factors

- 1. Political commitment** is present at local and national level in order to create lasting change
- 1. Funding** is available to cover transition & development costs. Such investment allows budgets allocated to institutions to be used after their closure to sustain prevention and high quality alternative care.
- 3. The know-how** exists in-country to implement reforms; a critical mass of social workforce committed to operating to implement the UN Guidelines
- 3. Civil society** plays an important role in the planning and delivery of reform and ensure children's voices are heard in decision-making.





Strengthening families. Ending institutional care.



Hope & Homes for Children

Thank you

www.hopeandhomes.org www.openingdoors.eu

Deinstitutionalisation and Quality Alternative Care –
Lessons learned and the way forward

DI Myth Buster

Common European Guidelines on the Transition from
Institutional to Community Based Care

The Financial Impact of the Public Child Protection
System Reform in Romania

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