hope and homes
for children

Ending institutional care in Latin America and the Caribbean

Questions and answers

Introduction

UNICEF estimates that there are over 189,000[1] children living in institutional care across Latin America and the Caribbean. Many more are at risk of being separated from their families.

Poverty, social exclusion, migration, and violence within families and communities are some of the factors leading to children being separated from their families. Without sufficient support to families or alternative care options available, children are being confined to institutional care where their rights, development, family ties and opportunities are compromised.

A movement is building towards deinstitutionalisation and family-based care for children. Here we answer some frequently asked questions to get to the heart of the change that needs to be made for the care and protection of children.

[1] Petrowski, N., Cappa, C. y Gross P. (2017) Estimating the number of children in formal alternative care: Challenges and results.
Child abuse & neglect, 70, 388-398.
https://data.unicef.org/resources/estimating-number-children-formal-alternative-care-challenges-results-2/

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1. What is institutional care?

Institutional care facilities are often large, long-term residential facilities that display a number of distinctive features that are harmful for children across three core areas: care provision, family and social relationships and systemic impact.

Institutions, children's homes, orphanages, shelters, centres of protection are some of the names used across Latin America and the Caribbean. Whatever name is used, 'institutions' can be defined by a set of shared core characteristics and the ways in which they govern the daily lives and shape the personal development and future life chances of children.

One of the most frequently cited characteristics is size: the number of places for children available in a facility. Size is not the defining feature, but the larger the setting, the fewer the chances to guarantee individualised care for children in a family-like environment and the higher the chances of certain harmful dynamics appearing.

In common with institutions around the world, institutions in Latin America and the Caribbean are characterised by a one-size-fits-all approach. They typically do not provide individualised care. The service provision is depersonalised and strict routines are followed to enable a small number of staff to deliver basic services. Children living in institutions are often isolated from the community, far from their place of origin and unable to maintain a relationship with their parents and extended families. Siblings are often separated and children are segregated on the basis of age, gender and disability. Institutional care, instead of being a temporary measure, is usually unregulated and extends much more than it is needed meaning that children stay for prolonged periods of time.

What does institutionalisation look like in everyday life for children? For many, it means not having personal belongings or clothes, or a private space, or even preferences like what to eat or what to wear. There are almost no personal occasions of celebration, birthdays might go unnoticed, or there might be monthly group celebrations at the institution. Children often have no caring adult to bond with and to talk about their daily hopes and concerns. It means being unaccompanied at special events, like school plays or sport activities, if these take place out of the institution. This reinforces children's feelings of loneliness and lack of support. Children are usually denied the possibility to be part of household activities with their carers and therefore lack skills of daily life, such as making a sandwich to eat if they are feeling hungry, or doing the shopping.

2. Why do you think it's necessary to eliminate institutional care?

Ending institutional care of children is a human rights priority. Institutionalisation violates children's rights to development, protection, survival and identity.

Every country in Latin America and the Caribbean has ratified the UN Convention on the Rights of the Child (UNCRC) and recognises their obligations to fulfil children's rights. The Preamble of the UN Convention on the Rights of the Child (UNCRC) is clear in recognising that children should grow up in a loving family environment and not be separated from their parents against their will unless it is in their best interests.

In 2009 the United Nations General Assembly approved a set of principles specifically focusing on the rights of children who are unable to live with their parents (UN Guidelines for the Alternative Care of Children). These Guidelines set a clear overall objective to phase out institutions as a care option.

Institutional care can have a devastating impact on children's lives. In order to develop, children need one-to-one care, love and attention. With the right support – families can provide this and decades of research shows that institutional care simply cannot replace this.

If they are denied the chance to develop a healthy attachment to a primary caregiver, children growing up in institutions can suffer severe impairments. The harmful effects of this environment can last a lifetime. Without the protection of a family, children in institutions are highly vulnerable to abuse and neglect and are among the most marginalised in society.

We now have a duty to base child protection and care policies on evidence and best practice. The context, needs and evidence have changed a lot in recent decades, yet the very same response or model of institutional care is still being widely used which does not solve the multiple problems we're facing today. We have more knowledge at our fingertips about the scale and causes of institutionalisation. We have demonstrated suitable and sustainable solutions that have been developed to address it. We also have international, regional and national frameworks and enablers. Now is the time to act.

3. What is wrong with institutional care?

Institutional care has seriously harmful effects on children, families, communities and wider society.

Children and families

Researchers from around the world have documented structural and functional changes in the brains of children who grow up in this environment.

We know that the synaptic connections which develop crucial brain functions in a baby are triggered by the kind of stimulation provided by a parent lovingly interacting with them. The vast majority of these connections are established during the first two years of life and form the basic architecture of the child's brain, in large part, as a consequence of this kind of loving nurture. Research shows that institutions, even the apparently well-run ones, can never provide this. Institutional care is harmful to children's physical, cognitive and emotional development.

The kind of neglect that is associated with institutional care leads to a build-up of toxic stress, which in turn significantly inhibits the development of the brain. This situation is particularly damaging for **children under the age of three:** the earlier a child is placed in an institution the more profound the damage on the developing brain will be. Institutionalisation during the early years is devastating. Children can grow up lacking birth registration or even a name – deprived of their own identity. Furthermore, children's health and survival is threatened by widespread neglect in institutions. Poor health and sickness often result from poor provision of healthcare, hygiene and overcrowded conditions.

Children in institutions are vulnerable to exceptionally high rates of emotional, physical and sexual abuse, including cases of extreme violence such as torture and rape. The reality of this was tragically highlighted when 41 teenage girls died in a fire at an over-crowded institution in San José Pinula, Guatemala in 2017.

The reality of institutional care was tragically highlighted on March 8th 2017, when 41 teenage girls died in a fire at an over-crowded children's institution in San José Pinula, Guatemala.

15 of the survivors were left with severe lasting physical and psychological injuries. The girls were locked inside a small room at the Hogar Seguro Virgen de la Asunción (institution) as punishment for organising a protest the day before against cramped conditions and abuse by staff. The facility housed as many as 1,000 children in a building designed to house 500.

The young girls at Hogar Seguro were not safe. They protested against the abuse they suffered, with fatal consequences. The tragedy reverberated across the region and around the world. The Guatemalan authorities have taken legal actions to hold to account those responsible. Local agencies and civil society partners have demanded justice for children and families, and accountability and change.

People across Latin America and the Caribbean saw that this was not an isolated incident and children will continue to suffer as long as the institutional care system remains intact.

Families, communities and wider society

Failure to tackle this problem means a heavy cost for young people, families and communities. When children leave institutional care as young adults they are often poorly prepared to live a fulfilling, productive and harmonious life in the community. They often have no support networks as little was done to support family and community connections while they lived in institutional care. They continue to be more vulnerable to abuse and exploitation throughout their adult life.

Children who grow up in institutional care are poorly prepared for independent life and often struggle as young care-leavers. They are more likely to have lower educational qualifications, be young parents, be homeless, and have higher levels of unemployment, offending behaviour and criminality, and mental health problems.

According to some studies, up to one in three children who leave institutional care become homeless and one in five ends up with a criminal record. As adults they are far more likely to have their children be separated from them and confined to an institution, contributing to the intergenerational perpetuation of the problem.

Institutional care is discriminatory and tends to reinforce social disadvantage, with some groups of children commonly overrepresented in institutions including children with disabilities, indigenous children and ethnic minorities, migrant children, and families in situations of social vulnerability.

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4. If institutions are so damaging, why are they so widespread?

There is a general lack of understanding of the impact of institutional care and there are many barriers to change that, though not insurmountable, are very real.

In the context of Latin America and the Caribbean, progress is being made with most governments reforming their legislation to create new and stronger child protection architectures and promoting family strengthening and family-based care programmes.

However, the depth and reach of these reforms is uneven and there are still many challenges ahead. This is partly because of a lack of resources but also because some of the institutional care is provided privately, with little government oversight. As a result, the system is decentralised: there are many different actors who need to be sensitised to the harm caused by institutional care.

In many countries in the region, there isn't official data on the number of children without parental care or the institutions that host them. The lack of centralised information about national protection systems makes it very difficult to assess the situation, identify problems and make better decisions for children.

Extreme poverty and violence are significant factors underlying institionalisation in Latin America and the Caribbean. Many families struggle to provide food, housing, medicine and access to education for their children. The high levels of domestic violence, alcoholism and drug abuse that are frequently associated with poverty are also a threat to a child's safety and lead to children being removed from the family or running away, often to live on the streets. Institutions provide a perception of safety and access to basic services for children. Consequently, they are often used as an easy and 'one-size fits all' solution to much deeper societal problems.

Establishing an institution can also be a common reaction to perceived or real crisis situations such as war, natural disasters, and health crises. In these circumstances, many children do lose their parents, but most who end up in institutions are actually displaced and separated from their families and communities rather than orphaned.

Unfortunately, numbers of orphans are often over-reported in the media. Due to the sudden availability of emergency assistance funds and the immediate perceived benefits of 'keeping children safe', institutions can quickly proliferate – which in reality diverts attention from family tracing and reunification. For example, following the 2010 earthquake in Haiti and the ensuing humanitarian emergency and internal displacement, private philanthropy encouraged the mushrooming of unregistered and unregulated institutions.

This creates a permanent structure of institutions, which is subsequently very hard to dismantle. In the long term, the availability of institutional care facilities in a country leads to poor families using them to access health-care or education for some of their children, and the decision-making authorities perceiving institutions as a solution when determining protection measures for children.

5. But don't we need institutions to care for children who have lost their parents?

The simple answer to this is no. In fact, globally, most children confined to institutions are not orphans but have one or even both parents alive who could care for them with the right support.

Research from around the world demonstrates that typically between 80% and 96% of children confined to institutional care have at least one living parent. Nearly all children confined to institutions have parents or extended family alive. In most cases, parents or relatives can be helped and empowered to care for them.

The absence of a range of family strengthening and alternative services creates a vacuum and so children are needlessly placed in institutional care. In many countries, institutions are simply the only available option for children who cannot remain with their own families.

If the resources invested in institutional care were instead spent on interventions that supported children in their own families or in alternative family and community based care, there would be no need for institutions at all.

6. How can parents who abandoned their own children be trusted to take care of them? Aren't institutions safer?

If family strengthening services are in place, most parents in difficulty can be supported to provide the loving and caring environment their children need to develop to their full potential.

These services aim to prevent the separation of children from their parents in the first place by helping them to overcome the challenges they face. This might include livelihoods' support, counselling and psychological support, positive parenting skills, early childhood development services and crisis intervention.

Whilst abuse and neglect in the family is often more visible and can be reported and addressed, violence in institutional care is a hidden problem. Institutions are often perceived as safer and more controlled environments, but children in institutions are vulnerable to exceptionally high rates of emotional, physical and sexual abuse.

A U.N. study has documented that violence in residential institutions is six times more frequent than in foster homes, and that children in institutions are four times more likely to be the victims of sexual abuse than children who have access to alternative care in a family setting.

While attention is often focussed on the unregulated placement of children into families where they are compelled to work in domestic services, it is wrong to conflate this with quality, regulated family-based services such as foster care. Safe and sustainable family-based placements that fulfil children's rights can be provided when proper processes are in place to recruit, train and support alternative families with adequate regulation and supervision – as has been shown in countries like Mexico, Brazil, Argentina and Costa Rica.

Violence in institutional care is a hidden problem

7. So what is a better alternative for children without parental care?

There are cases, of course, when children may lose their parents or need to be separated from them because of neglect and abuse. For children who have lost their parents or whose parents – even with support – are unable to properly look after them, quality alternative family and community based care options should be available.

Quality alternative care is characterised by stable, nurturing and loving relationships between children and their carers.

Informal family or kinship care provided by members of the extended family or a non-related family identified by the community can be an important solution for children who cannot remain with their parents.

Family-based alternative care can also be formal and regulated by the State. This includes different solutions, such as kinship care, foster care, group foster care, and guardianship.

Small-scale residential care designed to replicate a family environment (family-like alternative care) can also be an option as a last resort and for limited periods of time or where children's specific needs require it – for instance, to provide therapeutic care or treatment for children who have suffered trauma or severe abuse or neglect, or to enable large sibling groups to remain together. In this case children live in small group homes integrated in the community with one or more specialist carers, under conditions that resemble a family environment as much as possible.

For most children, all forms of alternative family care will be a temporary measure either while support is provided to enable them to return to their own family or, if not possible, while a more permanent solution such as domestic adoption is found. According to international norms, inter-country adoption should be treated as a last resort when all other avenues have been exhausted.

Family strengthening and family and community based quality alternative solutions will differ from country to country. However, if established and run properly, they will deliver much better outcomes for children and make institutional care unnecessary. The objective is to build an institution-free child protection and care system, to ensure that every child grows up in a safe and loving environment.

8. What about children with disabilities?

All children have the same rights, without exception. Children with disabilities are particularly vulnerable to the negative effects of institutions, as this type of care does not respond to their specific needs and enable them to develop their full potential.

It is a legal obligation and a shared responsibility to ensure that children with disabilities enjoy equal respect for family life and have access to alternative family care when required.

First and foremost, all efforts should be made to allow children with disabilities to grow up with their biological families. To prevent abandonment, neglect, segregation and the hiding of children with disabilities, States should provide early and comprehensive information, services and support to children with disabilities and their families. Experience shows that a range of measures (e.g. education, psychological and material support, equipment to enable life in the community, etc.) can be very effective in ensuring children with disabilities are able to grow up in their families and communities. States should also engage in public campaigns to combat stigma and discrimination against children with disabilities.

When the immediate or enlarged family is unable to care for the child, it is a responsibility of the State to undertake every effort to provide alternative care within the wider family, and failing that, within the community in a family setting.

9. What about the children who already live in institutions? Shouldn't we keep trying to improve the institutions and children's lives there?

Successful experiences of deinstitutionalisation all over the world have demonstrated that it's possible to move children out of institutions and find suitable alternative care solutions for every single child. Experiences in Uruguay, Mexico, Panama, Argentina, Guatemala and other countries across Latin America and the Caribbean have shown this is possible too. In fact, a fundamental principle for any institutional closure is that no child should be moved to another institution. With the right support, all children can be reintegrated with their family or transitioned into alternative care such as foster care or independent living.

Actively instigating closures of institutions is an important part of transforming the way that we care for children. It is important that closure of an institution is not done in isolation and that it is connected to a broader plan for preventing family separation, strengthening families and alternative care.

If investment in institutional care is not redirected to family and community based care and parallel systems are set up without explicit plans for the elimination of institutional care, then institutional care remains the predominant response to children without parental care and its use may even continue to grow. Parallel systems of institutional and alternative care may be needed during the transition period, but this should only be for a short and planned period of time.

Continuing to improve institutional care is ultimately ineffective and inefficient, and resources can be better invested in transitioning to family and community based care. It must be remembered that even the best resourced institutional care cannot provide the same individual love, care and attention that a family-based alternative can.

Those buildings that currently house children in institutional care can be transformed into family and community-based services. The infrastructure can be repurposed, staff can be retrained, new skills can be developed, and new services can be offered to meet the needs of the community.

Most importantly, as institutional care services are closed no children should be left behind. Every effort must be made to provide the best possible alternative care solution for each child, irrespective of their age or abilities.

10. Isn't all this very expensive?

It is actually a common myth that institutions are cheaper than family care. Existing research identified that the annual cost for one child in institutionalised residential care is sometimes over 100 times more expensive than care in family based alternatives. While robust evidence is lacking in Latin America and the Caribbean, the international evidence points to far greater cost-effectiveness of prevention and alternative care.

Institutional care is a poor investment in the long term because it fails children, their families and communities, and it locks children into costly care for far longer than necessary. Children who are unnecessarily removed from their parents, once in institutions, are very likely to spend their entire childhoods in care and when they become adults they lack skills and support they need to become independent. While children are in institutions their families and siblings are not receiving any support, their communities have no development opportunities. With the funding that is currently used to warehouse children in institutions, many more children and families can instead be helped to become self-reliant and contribute to the society.

Across the world, the consequences of institutional care on millions of children lead to poor educational and health outcomes, which in turn affect a child's ability to earn an income when they become adults. This is a significant driver of poverty and fosters increased dependency on already over-stretched families and communities.

Additional resources are needed during the stage of transition, until resources locked in running institutional care can be used to support children in families and their communities. There is a strong role to play for governments and institutional donors to provide this transitional funding through overseas aid.

Unnecessary

Institutional care draws in children for whom the separation is unnecessary – so there are high numbers of children in care needlessly

Excessive

Many children typically spend too long in care – sometimes remaining in institutions into adulthood

Creates long term dependency

Young people leaving care without skills or the capacity to become independent often remain dependent on support and indeed on the institutional care system, directly or indirectly, for their own children.

11. Countries in Latin America and the Caribbean face many challenges – what makes you think this should be a priority?

Investing in the gradual elimination of institutional care and the transition from institutions to families and communities is also helping to tackle child poverty.

Families affected by poverty are more vulnerable to separation. Child protection and care systems that depend on institutional care deal with the symptoms of separation and are divorced from the causes and effects of poverty in a household. In such circumstances, poverty persists and the reasons why children become separated are left unaddressed.

However, strategic investment in a child protection and care system that puts families at the centre can have a substantial impact on linking education, health, social care and other relevant services at grass roots level, with significant economic benefits.

This approach focusses on ensuring the general population's access to basic services, coupled with targeted support for the most vulnerable individuals and groups.

If we look closely at the key factors pushing children into institutional care (e.g. extreme poverty, violence, migration, disability, discrimination of ethnic minorities, lack of community services in rural areas, incidence of HIV/AIDS, etc.), they provide crucial information about the gaps in service provision within a country.

By focussing efforts on fulfilling human rights and social justice, this approach can provide an excellent entry point for broader reforms. This can significantly help in reducing poverty, strengthening social welfare systems and empowering local communities.

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12. What can I do to help?

States are ultimately responsible for children's rights but everyone has a part to play.

Progress is being made across Latin America and the Caribbean, such as public policies which provide stronger frameworks for action and piloting models for alternative care in some countries, sometimes resulting in the numbers of children in institutional care being reduced. There is much good work underway. However, there are still many challenges ahead and we need to collectively advance further to ensure the availability of family strengthening and prevention services and that appropriate alternative care is used only as a measure of last resort.

A vibrant civil society has a key role in encouraging and supporting Governments and donors to embark on comprehensive reforms.

Private and institutional donors also have a key role; by re-allocating development assistance they can support the transition from institutional to family and community based care. The majority of support for institutions is well-intentioned, with the hope of offering children a better future. But it is urgent that private funds stop going into institutions and be re-directed towards helping children and their families in the community. Donations can be reinvested to finance school fees and educational support, access to health care, the development of community-based services and resources for early intervention, youth engagement, adult learning and economic development, local volunteer services, or on a larger scale to develop new types of services such as foster care.

Everyone can help: raise awareness, help fund the transition of children into families and communities, help us spread the word **– children should grow up safe in loving families, not institutions.**

hope and homes
for children

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

For more information, please contact
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