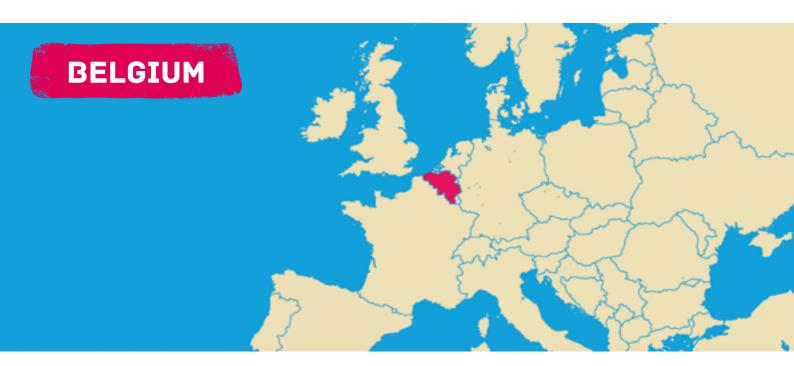


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STRENGTHENING FAMILIES. ENDING INSTITUTIONAL CARE.



2018 COUNTRY FACT SHEET

The majority of children deprived of parental care in Belgium are placed in institutional care. Children with disabilities are among those who are the most discriminated against as the overall plan for persons with disabilities, according to the UNCRPD concluding observations from 2014, is missing. There is no deinstitutionalisation (DI) strategy for children living in institutions¹. Deinstitutionalisation in Belgium is considered as an austerity measure, and stable employment of professionals working within institutions is a priority for the state. Due to the influx of unaccompanied migrant and refugee children, more institutions have been now opened or extended.

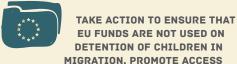
Belgium is organised into three communities: the French community, the Flemish community and the German community. As a result, there is no centralised data on institutional care; in many instances, it is either unavailable or difficult to obtain. Support for children with disabilities is also treated differently in various regions of Belgium.

There are 5,583 children in institutional care in the French community and approximately 2,031 of these children have disability. 372 children are between the age of 0-3; this figure, however, excludes 300 babies and children that live in hospitals. There are 7,917 children in institutional care in Flanders of whom 7,286 are children with disabilities and 466 are children below the age of five.

In the Flemish Community, the preference given to foster care as the first option was established by decree in 2012. This involves quality foster care and a unique form of financing. The focus is on the diversity of available foster care (short-term emergency care, limited care in support of fragile family circumstances, more intensive care intended to lead to a return home and to more stable long-term placement), possibly in conjunction with other forms of assistance in order to make the care more accessible and find more foster families. Efforts are under way to make counsellors more knowledgeable about foster care. In late 2015, foster care grew by 6 per cent over the previous year. According to a qualitative survey >>

¹ There is only a mental health reform called project 107

KEY RECOMMENDATION TO THE EU



TO THE MAINSTREAM SERVICES AND QUALITY FAMILY- AND COMMUNITY-BASED CARE FOR CHILDREN IN MIGRATION INSTEAD AND FLEXIBILITY IN ASSIGNING ASSISTANCE INCLUDING SPECIALIZED GUARDIANS

institutions in Flanders sheltering these children during weekends. To avoid institutionalisation, children can request personal assistance budget but the waiting period is almost five years whereas placement in the institution can only take up to nine months.

Not only institutions are not getting closed in Belgium; more of them are getting opened due to the increase in the number of unaccompanied migrant and refugee children arriving to Belgium. In a span of a few months in 2016, three new institutions have been opened or extended to accommodate unaccompanied migrant and refugee children. In 2017, there were 769 unaccompanied minors and 4,745 migrant children in Belgium⁴. In 2016, 4,960 children applied for asylum in Belgium, of which 1,076 were unaccompanied. NGOs have seen a higher influx of mainly unaccompanied children under the age of 12 in recent months⁵.

In 2017, the authorities started construction of a new closed centre near Brussels Airport, specifically for migrants' families with children.

This triggered the campaign of over 100 NGOs against child detention in Belgium "We do not lock up a child. Period." There is also a lack of foster care options in Wallonia Brussels for these children.

The fact that institutionalisation is still associated with the low-cost alternatives presents the biggest challenge for DI reforms in Belgium. Given the large number of people working in residential care in Belgium, this sector is viewed as a priority for the state due to steady employment and because of this, DI is often considered as an austerity measure.

Although Belgium could substantially benefit from the use of European Structural and Investment Fund (ESIF) to support the transition costs from one type of care to another, Belgium has not prioritised the use of ESIF for deinstitutionalisation reforms. European Social Fund, in particular, is being used for tackling unemployment. Institutional care in Belgium is funded by the national budget whilst deinstitutionalisation reforms focus mainly on the decrease of places in the institutional care settings.

2 UN Committee on the Rights of the Child, Combined fifth and sixth periodic report submitted by Belgium, 20 July 2017, CRC/C/BEL/5-6.

- 3 Ibid
- 4 http://www.asylumineurope.org/reports/country/belgium/statistics
- 5 https://www.kinderrechtencoalitie.be/wp-content/uploads/2018/12/Alternatief-rapport-Kinderrechtencoalitie-2018-English.pdf







NATIONAL PARTNERS OF THE OPENING DOORS IN BELGIUM

In Belgium the campaign is supported by La Porte Ouverte, the European Network on Independent Living (ENIL) and Equal Rights for Each Person with Disability (GRIP).

The Opening Doors for Europe's Children campaign supports national efforts to develop child protection systems that strengthen families and ensure high-quality family and community-based alternative care for children, by leveraging EU funding and policy and building capacity in civil society.

>> of young people in foster care in 2017, they are generally very satisfied with this form of assistance. These children did, however, say that their knowledge of their rights and duties was inadequate.²

The French Community is continuing its support for foster families by simplifying administrative procedures, reducing delays in the reimbursement of expenses and providing cash advances, shortening the selection process, publishing explanatory brochures for the public and publishing a handbook for foster families. A comprehensive awareness-raising and recruitment campaign for foster families is also under way.³

There are eight boarding schools for children with disabilities in Flanders. Children with disabilities are often enrolled in the boarding schools during the week and then transferred to the other institutions at the weekend. According to the data available, there are four

KEY RECOMMENDATION TO THE MEMBER STATE



TAKE ACTION TO EVALUATE AND HARMONIZE POLICIES AND PRACTICES IN THE FIELD OF YOUTH

CARE AT ALL LEVELS (FAMILY SUPPORT, NATURE OF CARE, CHILD-FAMILY RELATIONSHIP, TRANSPARENCY OF DOCUMENTS) AND FOCUS ON EXPANDING FAMILY-BASED CARE BY INCREASING THE NUMBER OF FOSTER FAMILIES AND THE PROVISION OF GUIDANCE