



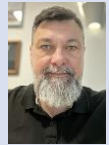
## Supporting Child Protection and Care Reform in EU Enlargement Countries INGO's Experience, Insights, and Findings

### Report on the Hope and Homes for Children and Lumos joint presentation DG NEAR Brown Bag Lunch 'Child Protection and Care Reform in Enlargement Countries' 22/11/2023

Hope and Homes for Children and Lumos had the pleasure to jointly present our reflections, technical insights and practical recommendations on how the EU support for the reform of the child care and protection systems and the transition from institutional to family and community-based care for children in the context of EU accession process in the internal European Commission session '*Child Protection and Care Reform in Enlargement Countries*'. This report summarises the highlights of our session, and contains links to relevant reading materials and key EU and global instruments in regards to the reform of the child care and protection systems.

**Introduction**, by Otto Sestak, Head of Learning And Engagement, Hope And Homes For Children

*Otto has extensive experience in leading capacity building systemic change and social workforce development in Europe, Asia, Africa and Latin America. He has conducted programmes to support and advise the development of systemic care reform and led the delivery of national operations for the completion of child protection system reform and the complete transition from institutions to family- and community-based care in Romania.*



#### [The harm of child institutionalisation](#)

An estimated **5.4 million children worldwide**,<sup>1</sup> and **345,000 in the EU**,<sup>2</sup> **still live in institutions**. The majority of these children are not 'orphans'; approximately 80% have at least one living parent.<sup>3</sup> In recent years, the EU has committed to supporting the transition from institution-based to quality family- and community-based care for children without parental care and children with disabilities (Annex I). However, there is a lack of universally agreed-upon, EU-wide definition for the term "institution". On the contrary, there are numerous definitions of what an 'institution' for children is. The term covers a range of residential care facilities, which in different contexts may be called 'institutions', 'orphanages', 'child care centres', 'baby homes', 'children's homes', 'children's villages', 'rescue centres', among others. An institution is characterized by features such as depersonalization, lack of individualized **support, with limited contact with birth families or caregivers**. Over 100 years of evidence from across the world demonstrates the significant harm caused to children in institutions, deprived of loving parental care, who may go on to suffer lifelong consequences. **Children's rights are systemically violated in institutions. They do not receive individualised care that responds to their actual needs, and are daily subjected to neglect, violence, and abuse.** A child care system reliant on residential institutions as the main or sole source of care for children at risk does not have the necessary and suitable mechanisms for intervention, and results in unnecessary separate children from families. Child institutionalisation is therefore symptomatic of a child protection system that is not working, and its elimination necessitates for a country to undertake **the process of reforming its child care system**.<sup>4</sup>

#### [The reform of the child care and protection systems:](#)

Care reform is the **comprehensive transformation of a country's care system for children** to better meet the needs of children and families, including the transition from institutional to family and community-based care. The care reform process must identify the forces placing families at risk and leading to children being separated from their families and placed in institutions, **including recognising structural determinants: social, economic and environmental forces**. Some of



the common factors that lead to institutionalisation include lack of access and availability of services, lack of alternative care available for children who cannot remain with their birth families, discrimination, unequal distribution of justice, misplaced good intentions, and reluctance to change. **The role of stigma and discrimination in creating and compounding inequalities must be prioritised to ensure that the most marginalised and vulnerable communities are at the forefront of the reform efforts. Families and community strengthening are more cost-effective in the long-run, and generate sustainable growth.** Care reform enables governments to redirect funding and strengthen other public services to better meet the needs of their populations. It also strengthens families and enables authorities to understand and address fundamental issues affecting wider communities at local, regional and national levels.<sup>5</sup>

**Child protection and care reform in Bulgaria**, by Galina Bisset, Technical Adviser, Hope and Homes for Children and Bisser Spirov, Senior Technical Advisor, Lumos, Bulgaria

*Galina has over 20 years of experience in designing and developing child protection systems, social services for children and families in the context of the deinstitutionalisation process and has developed and conducted training programs in a variety of contexts and regions.*



*Bisser has been working in the field of childcare in Bulgaria since 1993. He was deeply involved in the process of reforming Bulgaria's Child Protection system as Expert and National Consultant. From January 2020 until May 2023, he supported the implementation of EU support to social protection and deinstitutionalisation for persons with disabilities in Jordan.*



#### [Child protection and care reform in Bulgaria:](#)

**Bulgaria inherited a heavily institutionalised system of care for children.** It was the sole state response to unwanted, abandoned, neglected, abused, or so-called 'behaviourally troubled children'—a one-size-fits-all approach. In the pre- EU accession phase, several European Commission monitoring reports assessing progress referred to the overuse of institutional care and the need to reduce the number of children in institutions while developing alternative services. The last EU Monitoring Report was highly critical: *'Basic conditions in institutions caring for the elderly, the physically and mentally handicapped, and children are appalling. The legal basis for their institutionalisation, along with the slow and sometimes poorly planned process towards real de-institutionalisation, is unsatisfactory and still gives cause for considerable concern. Continued increased efforts are still needed.'*<sup>6</sup> **In 2007, a BBC reportage in an institution in Mogilino gained international attention and highlighted significant issues within Bulgaria's child care system, and accelerated the calls for the reform of the child care and protection systems.**<sup>7</sup> The newly established government in 2009 acknowledged the imperative for a comprehensive reform of the child care and protection systems, and in 2010, the National Strategy 'Vision for Deinstitutionalising the Children in the Republic of Bulgaria'<sup>8</sup>, **aimed at closing all institutions for children by 2025.** The Strategy's accompanying first Action Plan<sup>9</sup> marked a milestone as, for the first time, **EU funding was employed in a coordinated and strategic manner to execute systemic child care reform.** The Action Plan encompassed key projects for implementation with funding from the European structural funds, including the European Regional Development Fund, the European Social Fund, and the Programme for the Development of Rural Regions. In the first EU funding period (2007–2013), Bulgaria aimed to close targeted institutions, achieving success by 2015 despite political challenges and shortcomings, such as a lack of significant reduction of the number of children entering care and the lack of specialised foster care for children with disabilities. In the second EU funding period (2014–2020) Bulgaria closed all but 4 of its institutions for children.

**[Case 1: Closure Of 25 institutions of children and young people with disabilities:](#)** Lumos played a pivotal role in the success of the national EU project that resulted in the closure of all 25 institutions by 2015. The support from the European Union

was invaluable, particularly due to the availability of transition funds that facilitated the operation of the two systems during the transition period. The plan involved developing small family homes and supported accommodation for young adults with disabilities, along with community-based services, such as daycare centres and centres for social rehabilitation, with a specific focus on children under 3. The process faced difficulties due to stringent spending rules. Notably, the efficiency principle mandated the simultaneous transfer of all children with disabilities to small group homes (SGHs), which received project funds on a per capita basis. This led to arbitrary removals of children. Additionally, the staff in the small group homes faced significant challenges in managing severe affective behavior crises that many children experienced during their prolonged adaptation periods. This was exacerbated when children were not properly grouped, and placements were made to reach the full capacity of each SGH, further complicating the transition process.

**Case 2: Closure of 32 institutions for babies:** Hope and Homes for Children has been instrumental in supporting national EU-funded projects that resulted in the closure of 16 baby institutions. In collaboration with the Bulgarian government, HHC partnered to close an additional 10 baby institutions and contributed to the closure of 2 other institutions. While the multi-year projects have positively engaged governments, fostering continuity during political changes, challenges arose in the public tender process. Failures in tenders for essential activities caused delays, prolonging the stay of children in institutions. The pursuit of the lowest price in tenders raised concerns about compromising the quality of care for children. Additionally, appeals in the tender process impeded the start of activities and opened avenues for corruption, providing the opponents to deinstitutionalisation with a disruptive mechanism. A specific challenge involves the Ministry of Health's (MoH) initiative to build 20 Specialised Small Group Homes for permanent medical care during the 2014-2020 programming period. These SGHs were essential for closing the last 4 baby institutions by 2020. However, failures in public tenders and inflation indexing procedures resulted in significant delays. Presently, only 7 SGHs are likely to be completed. The MoH has abandoned the project, deeming it unfulfillable, leaving children in two institutions stuck there indefinitely, experiencing the detrimental effects of long-term institutionalisation.

**Key recommendations for EU support to child care reform in ongoing and future accession processes:**

EU funding, directed towards care reform serves as a compelling incentive for governments. Multi-year projects bind governments even amidst political changes. Essential prerequisites for allocating EU funds include:

- A clearly articulated National Strategy delineating the trajectory and long-term objectives of care reform;
- A transparent, costed action plan;
- A coordination unit operating at the highest political and executive level.

Deinstitutionalisation of children is a multifaceted process necessitating dynamic and coordinated efforts:

- To minimise the adverse impact on children's development resulting from prolonged stays in institutions;
- To ensure their safety during the transition to family or family-like care;
- To improve the quality of life in their new alternative environment.

Given these specific requirements, and to optimally serve the best interest of children, interventions must not be delayed, deferred, or cancelled. Flexibility and an individual approach are imperative, as children quickly grow and their needs change. Stringent EU regulations and internal spending regulations place the onus on national governments and local authorities to promptly address unforeseen funding gaps. To prevent this, we address the following recommendations:

- **Adjust the ratio between advance payments and verified costs** to 50:50 or 80:20. The pre-payment should be at least 40% to effectively launch large-scale (national) projects impacting thousands of children. The current ratio of 20:80 is challenging for government institutions, including municipalities, and generally impossible for NGOs;



- **Waive the requirement for bank guarantees**, as NGOs find this difficult to provide, and this measure is based on an inadequate interpretation of organisational capacity;
- **Ensure 100% EU funding for deinstitutionalisation projects** and waive the requirement for national co-financing or funding from municipal budgets. The current structure hinders attracting local authorities, providing opponents with arguments that it is "too expensive for the state";
- **Regulate a short period of verification and payments**. Currently, verification can extend up to 6 months, which is unacceptable for deinstitutionalisation projects impacting the lives and care of children. Delayed verification can be used to undermine implementing organizations and generate corruption;
- **Speed up the approval of changes in project activities and budgets to respond to changing circumstances**, given the fast growth and development of children, where safety and quality of life are paramount;
- In the specific case of deinstitutionalisation, when working through a direct beneficiary (e.g., ministry, government agency, or municipality), **allow projects to use mini grants** (projects within the project) to attract the expert resources of NGOs;
- **Ensure funds and projects** dedicated to deinstitutionalisation efforts do not solely measure success based on number of children relocated from institutions but also **based on the development and deployment of comprehensive preparation and support mechanisms** ensuring a safe and effective transition for each child.

**The path towards child protection and care reform in Ukraine**, by Halyna Postoliuk, Country Director, Hope and Homes for Children

*Since 2001, Halyna has acted as the Ukraine Country Director for Hope and Homes for Children. She has extensive experience in child protection reform, deinstitutionalisation (DI), and alternative family care. Halyna holds a PhD in Studies on Problems in Social Work and additional experiences include negotiating, collaborating and building partnerships with key Ukrainian stakeholders (local and national Government, NGOs and child protection agencies), and working for the Ministry of Family, Children and Youth Affairs in the Kyiv Regional State Administration.*



**Current state of play of child protection and care reform in Ukraine:**

The vast majority of Ukrainian children and families have been affected by the war, leading to an increased risk of children being separated from their parents. **Unfortunately, there has been no significant progress in the implementation of the National deinstitutionalisation Strategy reform, which was approved in 2017.**<sup>10</sup> There have been several attempts to reform the care system in Ukraine. **These have led to some progress, but the focus has been on specific components, instead of holistic systemic changes. The escalation of Russian invasion against Ukraine heavily impacted the child care and protection system in Ukraine.** Thousands of medical and social facilities, schools and kindergartens have been destroyed. Family-centred and other community-based services, which were inadequate before the war and furthering reliance on institutional care, can now only meet a fraction of the needs of the most vulnerable families. The most vulnerable children have not been prioritised, resulting in the persistence of institutions. There is a noticeable lack of coordination, leading to increased risks. Reform needs to include policy, legislation, and financing, guided by piloting innovative models at the local level, in line with best practices at the international level. **In its Opinion on Ukraine's application for EU membership, the European Commission recognises that the high rate of child institutionalisation in Ukraine is a 'serious concern and needs to be tackled as a matter of urgency.'**<sup>11</sup> To ensure all Ukrainian children have access to family and community-based care, the EU committed to providing technical and financial support to Ukraine, including by allocating 10 million euros to 'support the design of a modern childcare strategy.' Crucially, the Coordination Center for Family Upbringing and Child Care Development has officially been inaugurated by UNICEF, with strong support from the President of the European Commission Ursula von der Leyen. The primary objective of this centre is to drive comprehensive reform within Ukraine's child care system, with a strong emphasis on promoting family-based care and safeguarding children.<sup>12</sup>



### Key recommendations for EU support to child care reform in Ukraine:

- **Support the Government of Ukraine in the development of a national care reform strategy and action plan which prioritise children with disability and children of early age** who are in institutions and are at risk of family separation, displaced children with an allocated budget and clear milestones and benchmarks, as part of Ukraine's EU accession deliverables;
- **Ensure multi-year financing of projects** to implement the care reform strategy within Ukraine Facility and other financial instruments;
- **Include the key child protection and care systems reform milestones into the annual action matrixes** or equivalent mechanism used for measuring progress of Ukraine on the way to association;
- **Provide technical support to build the capacity of the state** authorities to set up a functioning independent monitoring system to measure the progress and harmonise existing policies and legislation with EU standards;
- **Ensure the meaningful involvement** of civil society organisations, practitioners, and people with lived experience.

### **The path towards child protection and care reform in Moldova**, by Marcel Straton, MEAL, Advocacy and Communications Specialist, Lumos, Moldova

*Marcel Straton has been with Lumos since May 2019 as a Communication and Advocacy Specialist based in Moldova. He strives to be part of and influence the change – in attitudes, behaviours, mentality, and views on the issue of institutionalisation of children.*



### Current state of play of child protection and care reform in Moldova:

Moldova has registered exceptional achievements in the implementation of the reform of the care system that resulted in a sharp decrease in the country's institutional rate, improvement of the legal and regulatory framework for the sector, creation, and development of new services. **However, the war in Ukraine and subsequent refugee crisis have impacted the social protection system**, threatening its ability to provide adequate services and care to vulnerable children. In addition, an increasing number of families are becoming at risk of poverty and social exclusion, which is a leading factor for institutionalisation of children, affecting in particular children with disabilities. Currently, most children in residential care are either children with severe disabilities and complex emotional needs or children aged 0-6. The 2022-2026 National Child Protection Programme and Action Plan provide the necessary base for completing the care reform of children. The main reason for this not happening is the lack of sufficient funding and limited local expertise. The start of the Moldova's accession process to the EU is an incredible opportunity to ensure that Moldova complete the reform of the child care and protection systems and shift to community-based care for children, especially for children with disabilities. While the legislation generally ensures that persons in vulnerable situations benefit from protection, social assistance, and community social services, a lack of capacity and resources remains a challenge.

### Key recommendations for EU support to child care reform in Moldova:

- **Support the social protection sector**, including prevention services, a moratorium on new entries of children in residential care, family support, parenting education services, cross-sectorial cooperation, a network of social services, early childhood interventions, and inclusive early education (e.g., through the EU Support Package for the Republic of Moldova);
- **Strengthen the capacity of and meaningfully engage the civil society sector** by including child and disability rights NGOs in monitoring mechanisms, formal and informal consultations with the EU Delegation, and funding for long-term system change and social innovation projects;

- **Enhance the capacity of Moldovan government structures** through high-level advisory services, systemic changes in administration structures, reviewing government funding requests, facilitating efficient communication between the government and civil society, and fostering cooperation for improved child protection and prevention of primary risks;
- **Ensure the effectiveness and positive impact of the Restart reform** by assessing and measuring its impact on social protection, implementing ongoing monitoring, ensuring transparency, meaningful NGO involvement, and investing in the recruitment and development of the social workforce;
- **Strengthen data collection mechanisms** in the social protection and child care reform areas.

## FURTHER READING

- [EEG \(2022\) Guidance on independent living and inclusion in the community](#)
- [EEG \(2019\) EU funds Checklist to promote independent living and deinstitutionalisation](#)
- [EEG \(2014\) Toolkit on the Use of European Union Funds for the Transition from Institutional to Community-based Care](#)
- [European Commission \(2009\), Report of the Ad Hoc expert group on the transition from institutional to community-based care](#)
- [Hope and Homes for Children \(2022\) Families. Not institutions](#)
- [United Nations \(2019\) Global Study on Children Deprived of Liberty](#)
- [EDF \(2023\) Towards a comprehensive national strategy for deinstitutionalisation/care transformation for Ukrainian children. Results and recommendations from a five-day DI strategic planning workshop held in April and May 2023](#)
- [UNICEF, International Social Service \(2020\) Assessment Of The Child Protection And Alternative Care System In Ukraine](#)
- [Jacoby, W., Lataianu, G., & Lataianu, C. M. \(2009\). Success in slow motion: The Europeanization of Romanian child protection policy. \*The Review of International Organizations\*, 4, 111-133.](#)
- [Ivanova, V., & Bogdanov, G. \(2013\). The deinstitutionalization of children in Bulgaria–The role of the EU. \*Social Policy & Administration\*, 47\(2\), 199-217.](#)
- [European Commission \(2009\), Report of the Ad Hoc expert group on the transition from institutional to community-based care](#)
- [van IJzendoorn, M.H., Bakermans-Kranenburg, M.J. et al \(2020\) Institutionalisation and deinstitutionalisation of children 1: a systematic and integrative review of evidence regarding effects on development. \*The Lancet Psychiatry\*, 7\(8\)](#)
- [UN Committee on the Rights of the Child \(2021\) Day of General Discussion Children’s Rights and Alternative Care, Outcome Report](#)

## ANNEX I: EU COMMITMENTS TOWARDS CHILD PROTECTION AND CARE REFORM

The harm of child institutionalisation and the EU commitment to implementing the reform of the child care and protection systems are embedded in the following relevant funding regulations:

- Within the EU borders, the enabling condition 4.3 of the [Common Provision Regulation \(CPR\) 2021-2027](#)<sup>13</sup> requires Member States to develop a national strategic framework for poverty reduction and social inclusion, including *"measures for the shift from institutional to community-based care."*
- In the EU external action, the [Neighbourhood, Development and International Cooperation Instrument \(NDICI\)](#)<sup>14</sup> seeks to support, in its geographic and thematic programming, *"the promotion of the transition from institutional to community-based care for children, as well as the promotion of new initiatives to build stronger child protection systems in third countries."*



- The [Instrument for Pre-Accession Assistance \(IPA III\)](#),<sup>15</sup> used by the EU to implement reforms in the EU accession countries, highlights that: *"Interventions in this area shall aim at modernising social protection systems to provide effective, efficient and adequate protection throughout all stages of a person's life, promoting the transition from institutional to family and community based care fostering social inclusion, promoting equal opportunities and addressing inequalities and poverty (Annex II).*
- Care reform and deinstitutionalisation are also mentioned in all the [2023 Enlargement Reports](#).<sup>16</sup>

The EU's commitment to child care reform has been enshrined in key EU policy frameworks and initiatives:

- In the [EU Strategy on the Rights of the Child 2021-2024](#),<sup>17</sup> *"The European Commission invites Member States to promote national strategies and programmes to speed up deinstitutionalisation and the transition towards quality, family- and community-based care services including with an adequate focus on preparing children to leave care, including for unaccompanied migrant children."*
- In the [EU Strategy on the Rights of Persons with Disabilities 2021-2030](#),<sup>18</sup> *"The Commission calls on Member States to implement good practices of deinstitutionalisation in the area of mental health and in respect of all persons with disabilities, including children to strengthen the transition from institutional care to services providing support in the community."*
- The [EU Action Plan on Human Rights and Democracy 2020-2024](#)<sup>19</sup> includes the commitment of the EU to *"support the development of quality alternative care and the transition from institution based to quality family and community-based care for children without parental care."*
- The [European Child Guarantee](#)<sup>20</sup> is a vital opportunity to achieve the transition from institutional to family and community-based care for children in the EU, as it tackles interrelated factors leading to child institutionalisation, and children in alternative care are prioritised as a target group.
- The [Youth Action Plan in the EU External Action](#)<sup>21</sup> is also critical for the support to child care reform in the EU external action, as it highlights that EU institutional youth engagement is set to be achieved through *"enhanced institutional capacity and expertise of EU staff on how to work with and for young people and on child protection through training, guidelines and sharing of good practices"*.

## ANNEX II: GLOBAL HUMAN RIGHTS FRAMEWORK

Global human rights frameworks have recognised the harm of institutions, and the need to transform the child protection and care systems to better meet the needs of children and families.

- The [UN Convention on the Rights of the Child \(UNCRC\)](#)<sup>22</sup> sees the family as the *"natural environment for the growth and well-being for all its members and particularly children"* (preamble) and recognises the right of the child not to be separated unless it is necessary for their best interests (Art. 9) and the duty of the state to assist the parents in the performance of their child-rearing responsibilities (Art. 18). States have an obligation to provide material support for the family (27), and children with disabilities and those responsible are entitled to special care (23).
- The [UN Convention on the Rights of Persons with Disabilities \(UNCRPD\)](#)<sup>23</sup> defines the family as *"the natural and fundamental group unit of society"* and affirms the right of persons with disabilities to live in the community (Art. 19). Under art. 23 of the UNCRPD, *"States Parties shall ensure that children with disabilities have equal rights with respect to family life"* and *"In no case shall a child be separated from parents on the basis of a disability of either the child or one or both of the parents"*.
- In the [2019 UN Resolution on the Rights of the Child](#), the United Nations General Assembly<sup>24</sup> *"expresses deep concern on the potential harm of institutionalization and institutional care to children's growth and development"* and urges Member States to progressively replace *"institutionalization with quality alternative care, including,*



*inter alia, family and community-based care and, where relevant, redirecting resources to family and community-based care services, with adequate training and support for caregivers and robust screening and oversight mechanisms."*

- The [UNCRPD General Comment No. 1](#) defines institutionalisation as deprivation of liberty.<sup>25</sup>
- According to the [UN Guidelines For The Alternative Care Of Children](#), "Financial and material poverty, or conditions directly and uniquely imputable to such poverty, should never be the only justification for the removal of a child from parental care, for receiving a child into alternative care, or for preventing his/her reintegration, but should be seen as a signal for the need to provide appropriate support to the family."<sup>26</sup>
- The [UN Global Study on Children Deprived of Liberty](#) affirms that "institutions, by their very nature, are unable to operate without depriving children of their liberty" and "are often characterized by living arrangements that are inherently harmful to children."<sup>27</sup>
- According to the [UN Guidelines on deinstitutionalization, including in emergencies](#), institutionalisation constitutes detention and deprivation of liberty based on impairment.<sup>28</sup>
- The [2019 report of the UN Special Rapporteur on the Rights of Persons with Disabilities](#) highlights that "Deprivation of liberty on the basis of impairment is not a 'necessary evil' but a consequence of the failure of States to ensure their human rights obligations towards persons with disabilities."<sup>29</sup>

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## End Notes

<sup>1</sup> [UN Global Study on Children Deprived of Liberty \(2019\)](#)

<sup>2</sup> [Lerch, Véronique and Anna Nordenmark Severinsson \(2019\) Feasibility Study for a Child Guarantee: Target Group Discussion Paper on Children in Alternative Care.](#)

<sup>3</sup> [van IJendoorn, M. H., Bakermans-Kranenburg, M. J., Duschinsky, R., Fox, N. A., Goldman, P. S., Gunnar, M. R., ... & Sonuga-Barke, E. J. \(2020\). Institutionalisation and deinstitutionalisation of children 1: a systematic and integrative review of evidence regarding effects on development. \*The Lancet Psychiatry\*, 7\(8\), 703-720.](#)

<sup>4</sup> [Hope and Homes for Children \(2022\) Families. Not institutions](#)

<sup>5</sup> [Hope and Homes for Children \(2022\) Families. Not institutions](#)

<sup>6</sup> [Directorate-General for Neighbourhood and Enlargement Negotiations \(2006\) Bulgaria Monitoring Report](#)

<sup>7</sup> [Ivanova, V., & Bogdanov, G. \(2013\). The deinstitutionalization of children in Bulgaria–The role of the EU. \*Social Policy & Administration\*, 47\(2\), 199-217.](#)

<sup>8</sup> [Republic of Bulgaria, Ministry of Labor and Social Policy \(2010\) National Strategy "Vision for Deinstitutionalisation of Children in the Republic of Bulgaria"](#)

<sup>9</sup> [Republic of Bulgaria, Ministry of Labor and Social Policy \(2010\) Action Plan for the implementation of the National Strategy "Vision for the Deinstitutionalisation of the Children in Bulgaria"](#)

<sup>10</sup> [Hope and Homes for Children, Lumos, SOS Children's Villages, Save the Children, Eurochild, Disability Rights International, Validity Foundation and ENIL \(2021\) A worrisome U-turn on ending the institutionalisation of children in Ukraine](#)

<sup>11</sup> [European Commission \(2022\) Opinion on Ukraine's application for membership of the European Union](#)

<sup>12</sup> [UNICEF \(2023\) The best interests of the child as a priority for Ukraine](#)

<sup>13</sup> [EU \(2021\) Common Provisions Regulation](#)

<sup>14</sup> [EU \(2021\) Neighbourhood, Development and International Cooperation Instrument 2021-2017](#)





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- <sup>15</sup> [EU \(2021\) The Third Instrument for Pre-Accession Assistance 2021-2027](#)
- <sup>16</sup> [European Commission \(2023\) Enlargement Package](#)
- <sup>17</sup> [EU \(2021\) Strategy on the Rights of the Child 2021-2024](#)
- <sup>18</sup> [EU \(2021\) Strategy on the Rights of Persons with Disabilities 2021-2030](#)
- <sup>19</sup> [EU \(2020\) Action Plan on Human Rights and Democracy 2020-2024](#)
- <sup>20</sup> [EU \(2023\) Council Recommendation on establishing a European Child Guarantee](#)
- <sup>21</sup> [EU \(2022\) Youth Action Plan in EU External Action](#)
- <sup>22</sup> [United Nations \(1989\) Convention on the Rights of the Child, United Nations](#)
- <sup>23</sup> [United Nations \(2006\) Convention on the Rights of Persons with Disabilities](#)
- <sup>24</sup> [United Nations General Assembly \(2019\) Resolution on the Rights of the Child A/RES/74/133](#)
- <sup>25</sup> [UNCRC \(2014\) General comment No. 1 Article 12: Equal recognition before the law, para. 40](#)
- <sup>26</sup> [United Nations \(2010\) Guidelines for the Alternative Care of Children](#)
- <sup>27</sup> [United Nations \(2019\) Global Study on Children Deprived of Liberty](#)
- <sup>28</sup> [UNCRC \(2022\) Guidelines on deinstitutionalization, including in emergencies, para. 6](#)
- <sup>29</sup> [Human Rights Council \(2019\) Rights of Persons with Disabilities Report of the Special Rapporteur on the rights of persons with disabilities](#)