

THE ILLUSION OF PROTECTION

AN ANALYTICAL REPORT BASED ON THE FINDINGS OF A COMPREHENSIVE STUDY OF THE CHILD PROTECTION SYSTEM IN UKRAINE

This report was developed by Hope and Homes for Children in collaboration with “pro.mova” company. Analysis of legislation of Ukraine and five EU countries was carried out by the Clifford Chance company within the pro-bono hours of Access to Justice Award 2013.

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Electronic version of the report, statistical database and legislative analysis are available online on the website

www.hopeandhomes.org.ua

in the section “Child Protection System Audit”.

Collected data served as a basis for developing the Map of Institutions, available on the website of the civil campaign “Opening Doors for Children” at

www.openingdoors.org.ua/map

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Preface

Over the past 18 years, Hope and Home for Children Ukraine has created opportunities for children to grow up in a family environment and fulfil their potential; we have also developed viable models and services for supporting families and children that can be extended beyond our projects to other regions of the country.

To eliminate institutional care in Ukraine, the efforts of our organisation and those of our colleagues are not enough; the same is true for simply demonstrating successful practices. What is needed is a change in the way our child protection system works. Therefore, it is important to answer the questions about what is wrong with the current system and why it doesn't work, what the causes are for preserving institutions and what the scale of this phenomenon is. An analysis of the capacity of government bodies and structures to ensure the rights of vulnerable children are protected is also needed.

We have tried to answer these questions through conducting a comprehensive study of the child protection system. The findings of which are presented in this report. This study is not exhaustive in elucidating the real situation in the functioning of residential facilities and their funding agencies or the interaction between different government bodies and social service providers involved in child protection. Despite the multitude of data collected we recognise that this is only the first step in filling the gaps and revealing evidence about Ukraine's institutional system.

We hope this material will help all stakeholders to recognise the incompatibility of institutions and the rights of children, as well as the fragmented nature of our existing child protection system. We hope it will also spark professional discussion to seek better solutions, to develop a strategy for change to ensure a high standard of care and education of children and lead to the implementation of de-institutionalisation.

Halyna Postoliuk,
Regional Director
Hope and Homes for Children

The audit of the child protection system, carried out by Hope and Homes for Children, has exposed a set of issues of a legislative, organisational and ideological nature that lead to the violation of the rights of children.

The data collected on the activities of residential facilities for children confirms that institutional care is ineffective and harmful both for the child and for the family and society at large.

To change the situation, we need to consolidate efforts of the state and civil society and start making definite steps towards de-institutionalisation. The strengthening of families through the introduction of effective support mechanisms at the community level is key in this process.

Mykola Kuleba,
The Commissioner of the President of Ukraine
for Children's Rights

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KEY TERMS

FOR THE PURPOSE OF THIS REPORT WE USE THE FOLLOWING TERMS:

ALTERNATIVE CARE

This term covers all types of care and placements of children not in the overnight care of at least one parent, for whatever reason and under whatever circumstances. Alternative care may take the form of informal or formal care. Forms of alternative care include kinship care, foster care, placement in a family-type children's home, other family-based types of placement, supervised living arrangements or placement in residential care facilities. If alternative care is suggested as a temporary option, measures should be taken to ensure the placement is a secure and caring environment until a permanent home is found for a child.

DE-INSTITUTIONALISATION (DI)

This is the process of replacing institutional care for children with a system that ensures appropriate care and growth of children in family and family-based or family-like settings. This process is not limited to moving children from residential facilities and into family care, it should also prevent the referral of children to institutions and offer new opportunities for supporting children and families within their communities.

INSTITUTIONAL CARE

Care provided to children in residential settings (usually designed for large numbers of children) that are not developed around the needs of a child or close to a family-like situation. Such facilities display all the characteristics typical of institutional culture (depersonalisation, rigidity of routine, block treatment, social distance, dependence, lack of accountability, etc.). If a child lives in an institution for more than three months, he will be classed as receiving long-term institutional care.

INSTITUTION

In the context of this report, an institution is a residential facility providing institutional care such as a baby (infant) home, children's home, children's care home, boarding school (internat), orphanage, education and rehabilitation centre, educational complex.

SMALL GROUP HOME

A type of residential care facility with family-like living arrangements, designed for no more than 12 children. Life and everyday routine in small group homes are organised as in a normal family. A team of educators work to ensure proper round-the-clock care. Each educator, responsible for two to three children, follows individual care plans,

which, depending on the child's situation, envisage the child's return to their biological family, placement in family-based forms of care, adoption or preparation for adult life. Children participate in arranging the daily routine; they help in the house and are involved in making important decisions concerning their lives. These facilities are established in local communities and offer temporary placements for children in an environment that is as family-like as possible.

BEST INTERESTS OF A CHILD

are actions or decisions made for the benefit of a child deprived of parental care or at risk of losing such care for various reasons, including health, developmental issues or special educational needs. Such acts or decisions are aimed at meeting the child's needs according to his or her age, sex, health, development, life experience, family, cultural or ethical background; they take into account the child's views if the child is capable of forming and expressing such views. In all actions or decisions, whether they are undertaken by the state or private institutions, courts, administrative or legislative bodies, the best interests of the child should be given paramount consideration.

COMMUNITY-BASED SERVICES

are services with direct access for clients at a community level. These include services for family strengthening and crisis prevention (counselling; development of parenting skills; employment of parents; access to education and primary healthcare; day care and development classes for children; early intervention for families with children with special needs); emergency assistance (emergency placement of children; mother and baby centres/units; psychological/psychotherapeutic support, etc.) and alternative care for children in family-like settings (guardianship; placement in a foster family or a family-like children's home or a small group home).

FAMILY SUPPORT SERVICES

include services aimed at assisting children and families, meeting their needs, preventing or responding to difficult life circumstances, building the capacity of parents to perform their parental duties, and ensuring optimal development of children. Delivery of such services in communities is mandatory and an integral component of de-institutionalisation to prevent the separation of children and families and to avoid children being placed in institutions.

BRIEF OVERVIEW OF THE REPORT

Every child and young person should live in a supportive, protective and caring environment that promotes his/her full potential.

UN GUIDELINES FOR THE ALTERNATIVE CARE OF CHILDREN, PARA. 4

The course towards full-scale integration into the European Union, chosen by the Ukrainian government and society, is not possible without deep structural reforms and improved living standards. While EU member states, guided by the European Commission Recommendations “Investing in children: Breaking the cycle of disadvantage” (2013/112/EU)¹, undertake comprehensive measures to implement de-institutionalisation, the system of child protection in Ukraine is still based on the broad use of institutional care (placement and care in large residential facilities of different types).

Publicly available information on the extent of institutional care does not offer a full understanding of the current situation and, therefore, complicates the process of reforming the child protection system in Ukraine. Quantitative and qualitative information on children and young people resident in institutions, the causes of their placement in institutions, as well as opportunities for their return to families remains unexplored because of the closed nature of the institutional system and weaknesses in state statistics. The data collected by the government (the State Statistics Service) and sectoral data, collected by ministries, vary significantly. Usually, the information on residential facilities is simply inaccessible; no relevant data is available on websites or in reports of government bodies administering each type of institution. Additionally, the real reasons for the placement of children in such facilities and the consequences of institutionalisation are not monitored.

To obtain complete data on the child protection system and related problems, **Hope and Homes for Children** has conducted during 2015-2016 a comprehensive study of the child protection system in Ukraine. To ensure the integrity of the data, the structure of the study included components focused on different levels of the child protection system in Ukraine (national, regional and rayon), and combined both quantitative and qualitative approaches and methods. The system of institutional care was the main focus of the study.

The study found that the system of institutional care in Ukraine is not a favourable environment for the development and socialisation of children and the closed nature of the system sanctions abuse and violence against them. Moreover, residential facilities fail to provide adequate conditions to meet even the most basic needs of children let alone offer the support, protection and care necessary for them to reach their full potential.

Due to the lack of uniform and clear procedures for referring children to institutions, the decisions on institutional placements are taken inconsistently and without considering a child’s individual needs. Despite having parents who are not deprived of parental rights, most children stay in residential facilities for extended periods of time, and often until reaching full age.

The majority of expenditure on institutional care covers salaries and maintenance costs, and the remaining funds are barely enough to meet children’s needs for proper nutrition, clothing, development and medical treatment.

The study also found that, contrary to international standards, most children remain in institutions due to poverty, difficult life circumstances and the social vulnerability of families.

Under declared changes in the provisions for specific types of institutions, another required focus of their activities is to provide rehabilitation and educational services for children with mental and physical disabilities. However, the study’s findings demonstrate that residential facilities have limited capacity and insufficient staff with appropriate qualifications to ensure the quality delivery of such services. As a result, even after an extended stay in such institutions, there are no obvious improvements in children’s health and academic performance.

The current process of reforming institutions is declarative; in reality, nothing changes either for the children or the system in general. In fact, in many cases, reform has simply meant renaming an institution without changing its format or function. At the same time, there is evidence of the artificial “filling” of orphanages with children to preserve funding.

The functions of state agencies responsible for child protection and categories of children in need of state protection are not clearly defined, therefore making it impossible to control the validity of decisions regarding the placement of a child in an institution.

Currently, institutions are managed by different ministries depending on their classification, and there is no common vision or political will regarding their phased closure. These issues, coupled with the lack of development of community-based services for children and families aimed at preventing the removal of a child from their family, have led to the preservation of the problem and the inability to introduce quality changes.

The institutionalisation of a significant number of children could have been avoided if a local infrastructure of support services for children and families were in place. The provision of such services is more economically and socially sound compared to the current support of the institutional system. Results of the study show that such services are virtually non-existent and children with families receive no professional assistance and support. The analysis confirms that the number of specialists in the child protection system and their professional capacity, as well as the amount of social work carried out at rayon/city level, is very low and insufficient to prevent institutionalisation and to provide support to children and their families.

Moreover, the analysis reveals a failure of Ukrainian legislation to introduce quality changes in the child protection system to bring it in line with international standards. The national legislation does not offer a clear definition of child protection nor does it act as a coordinating mechanism for responsible agencies. It encourages the delegation of the role of parents and family to the state, contrary to international norms, and it does not provide for child participation or the consideration of children’s views and best interests in cases of state intervention. The legislation also fails to distribute powers in the area of children’s rights and hampers the development of appropriate services in communities. Financial mechanisms remain conservative and centralised, while budget funding does not contribute to the development of services to support children and families. New legislation that was adopted or modified during the decentralisation process includes no provision for the redistribution of powers and budgets between the different levels of government to ensure the rights of children and to develop community-based services for children and families.

To address these weaknesses and negative trends, the child protection system needs to be reformed at a national level, and a national de-institutionalisation strategy implemented. This strategy should include the suspension of institutional placements of children under three; training of relevant specialists; the gradual closure of institutions; the development of community-based services to prevent the removal of children from families and the development of mechanisms to reallocate funds from financing institutions to supporting social services/ for children and families.

¹ European Commission Recommendation: Investing in children: breaking the cycle of disadvantage (2013/112/EU) http://ec.europa.eu/justice/fundamental-rights/files/c_2013_778_en.pdf.

METHODOLOGY

THE STUDY WAS CONDUCTED IN SEVERAL STAGES:

The first stage

The overall goal of this study was to collect and analyse quantitative and qualitative data on the specific functions of the child protection system in Ukraine and its network of institutions. The information collected will be used to inform the development of a strategy for reforming the childcare system and the implementation of de-institutionalisation.

included a review of publicly available analytical reports, results and statistical data from studies focusing on the protection of the rights of children in Ukraine. An analysis was also undertaken of relevant experiences in Romania, Bulgaria and Moldova, as well as activities of other Ukrainian NGOs that have carried out similar studies or inspected individual institutions. The results of this stage were summarised in a Desk Review, completed in collaboration with the Kyiv International Institute of Sociology and are available online at www.hopeandhomes.org.ua

The second stage

included a national audit of the network of institutions with data collected from all residential care facilities in Ukraine. Qualitative indicators were analysed including categories of children, dynamics of placements and exits, staffing numbers, operational parameters and funding. Data² was collected through standardised quantitative forms completed by the heads of institutions. The study reached 663 residential facilities as well as 40 facilities of other types (shelters, centres for social and psychological rehabilitation, social dormitories, etc.), but the latter were not the focus of the study.

At this stage researchers also collected quantitative data on the child protection system from 24 regions and the city of Kyiv through standardised forms completed by relevant representatives from all oblast administrations.

Obtaining information from different oblasts was made possible due to the support of the central government. With support from the Presidential Commissioner for Children's Rights, the heads of all oblast state administrations and the head of the Kyiv city state administration received a letter No. 02-01/4553 as of November 18, 2015 "On monitoring of the network of residential facilities for children, social protection institutions, and functioning of the child protection system at the oblast level", signed by the Head of the Presidential Administration of Ukraine.

The heads of institutions returned the completed questionnaires stamped and signed by relevant individuals; completed questionnaires with information about the child protection system in each region were signed by governors. At the data processing stage, quantitative data and indicators were verified with each institution or with officials responsible for completing the forms in oblast administrations and the Kyiv city state administration.

Each form was reviewed and verified, where necessary, with the heads of institutions and individuals responsible for filling out the forms via the telephone. Overall, more than 500 consultations were conducted.

The third stage

focused on the collection of data on the functioning of the child protection system at a rayon level. For example, quantitative indicators (the number of children and families in need of social support and protection by the state and the current system of services available at rayon level) were collected through questionnaires completed by relevant individuals from selected rayon administrations (overall, 32 rayons and cities of oblast subordination). In addition, a comprehensive evaluation of the state and functioning of the child protection system was performed in three rayons. This included in-depth interviews with the heads of the services for children, the directors of centres of social services for family, children and youth (CSSFCY), the heads of the departments of education, the heads of local psychological, medical, and pedagogical commissions (PMPC) and the heads of local health facilities.

In addition, an analysis of the state of children's rights observance was carried out in 10 institutions of five types (boarding schools for general education levels I-II, specialised baby homes, sanatorium-type boarding schools for general education levels I-II, special boarding schools levels I-II, and children's care homes). In-depth interviews were conducted with 130 children and 40 staff members. Also in selected institutions analysis was completed of the personal files of 904 residents.

In selected rayons, focus groups were conducted with graduates of institutions (29 individuals), parents of institutionalised children (31 individuals), parents of children with disabilities (26 individuals) and parents in difficult life circumstances (29 individuals).

The study adhered to the ethical principles of sociological data collection, the rules regarding the collection of personal data as well as the guidelines established in Hope and Homes for Children's Child Protection Policy. In particular, interviews with children were only conducted with their consent and the consent of their parent or guardian. All answers provided to researchers during interviews are treated anonymously. The reporting format involves the use of some particulars without specifying the names of their authors.

Forms, guides and questionnaires developed for the study were discussed with experts and field-tested in several institutions and rayons.

Data collection during the third stage of the study was carried out by a team of 14 experts, including psychologists, physicians, social workers, special education teachers, university professors and lawyers. While assembling this team, we took into account candidates' background and professional experience of working with children, specifically in the areas of psychology, medicine and social work.

The team completed introductory training on the rights and best interests of the child, on the specifics of the functioning of the residential care system for children, and on data collection and processing, including the use of research tools and legal requirements.

A separate section of the study was dedicated to the analysis of child protection legislation in Ukraine and five EU countries (United Kingdom, Germany, Poland, Romania and France). This analysis was carried out by specialists from the multinational law firm Clifford Chance as part of their pro bono support of Hope and Homes for Children. A copy of the report is available on www.hopeandhomes.org.ua

In the course of the study researchers faced a number of difficulties. These included a lack of previous research in the area of child protection, limited data available to aid understanding of the issues related to ensuring the rights of children; the need to verify and refine data obtained from institutions and oblast administrations; as well as the closed nature of the institutional system which led to difficulties in gathering information.

Statistical data based on 663 institutions as well as quantitative data on the child protection system in 24 regions is available at www.hopeandhomes.org.ua

² The data was collected during 2013–2015; the data for 2015 includes information for the first nine months.





1

**General information
on the system of institutions**

As of September 1, 2015, there were 99,915 children in institutions across Ukraine according to the information provided by heads of institutions. Only 9,291 children (9.3%) of the total number are orphans or children deprived of parental care. The remaining 90,624 children were placed in institutions by their parents or guardians.

As of September 1, 2015, there were **663** residential facilities functioning in Ukraine. This network is quite extensive both in terms of location and type. These facilities can be divided into nine main categories of institutions and subdivided into 33 types.

Types of residential facilities and the number of children resident in them

NUMBER OF FACILITIES CHILDREN IN FACILITIES / INCLUDING ORPHANS AND CHILDREN DEPRIVED OF PARENTAL CARE

38
BABY (INFANT) HOMES
 2,790 / 1,162

- 12 Baby homes 837
- 26 Specialised baby homes 1,953

96
BOARDING SCHOOLS OF GENERAL EDUCATION
 16,671 / 1,758

- 58 Boarding schools for general education for levels I-II and I-III for children requiring social assistance 11,108
- 38 Boarding schools for general education for levels I-II and I-III for orphans and children deprived of parental care 5,563

50
CHILDREN'S CARE HOMES
 4,096 / 1,100

- 23 Care homes of profile I-II 1,887
- 20 Care homes of profile III-IV 1,449
- 7 Care homes 760

45
CHILDREN'S HOMES
 1,491 / 773

mixed type children's home

57
EDUCATION AND REHABILITATION CENTRES
 7,081 / 569

56
SANATORIUM BOARDING SCHOOLS
 13,165 / 701

- 3 For children with neuropsychiatric disorders 579
- 10 For children with scoliosis / musculoskeletal disorders 2,572
- 13 For children with cardiovascular diseases 3,353
- 6 For children with chronic non-specific respiratory diseases 1,576
- 5 For children with chronic non-specific diseases of the digestive system 849
- 1 For children with diabetes 235
- 18 For children with minor and inactive (latent) forms of tuberculosis 4,001

75
SPECIALISED BOARDING SCHOOLS OF GENERAL EDUCATION
 20,339 / 575

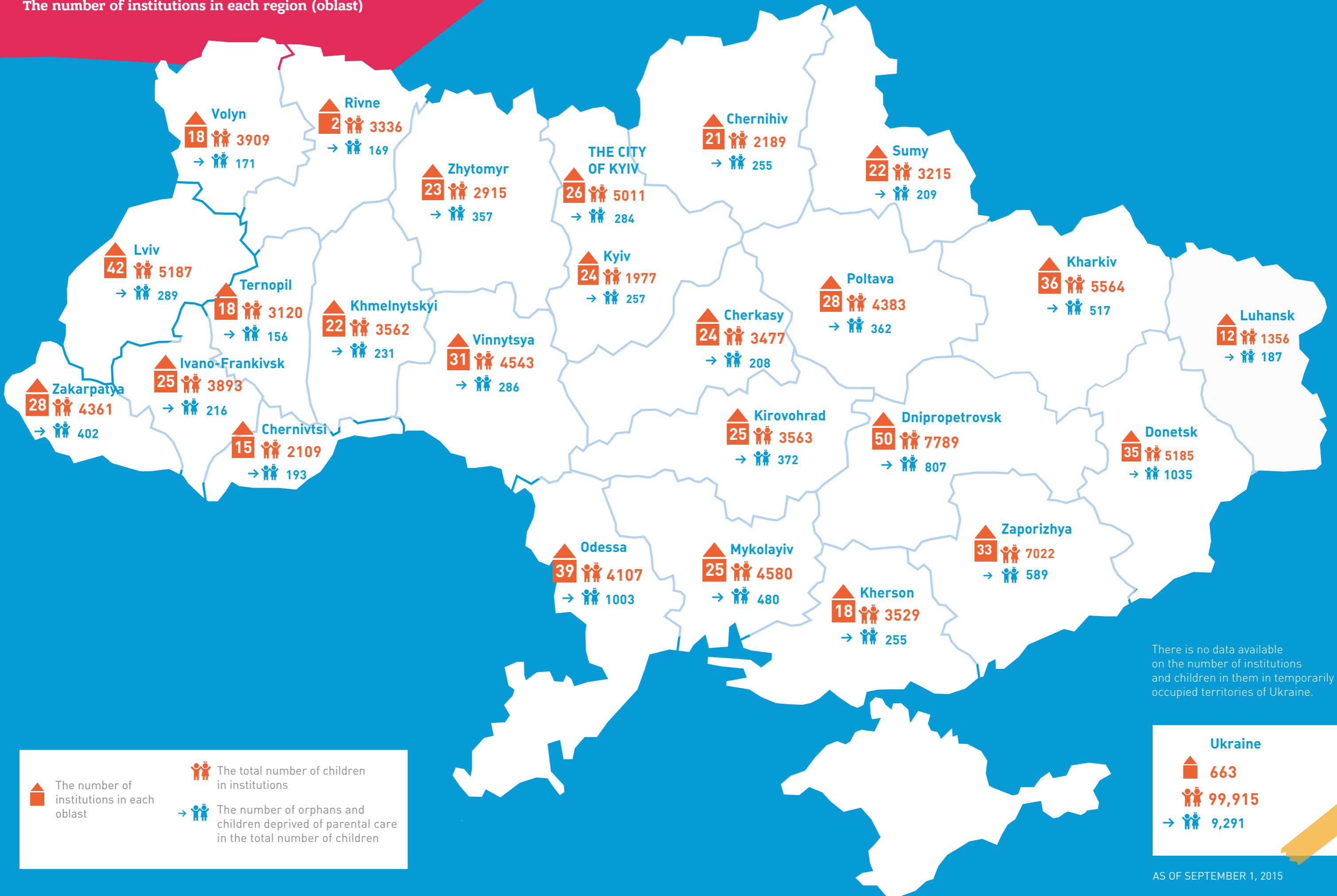
- 11 Residential lyceums 3,833
- 3 Residential gymnasiums 1,442
- 9 Residential gymnasiums, lyceums or specialised schools for gifted children from rural areas or low-income families 2,793
- 18 Residential lyceums or gymnasiums with advanced military and physical training 5,055
- 15 Specialised boarding schools with advanced training of specific courses (languages, aesthetic education, sciences) 3,276
- 13 Specialised boarding schools for levels I-III 3,113
- 4 Specialised boarding schools for levels I-II 359
- 2 Specialised boarding schools for levels II-III 468

218
SPECIAL BOARDING SCHOOLS OF GENERAL EDUCATION
 27,142 / 2,261

- 5 For deaf children 567
- 26 For children with diminished hearing/hearing disorders 3,455
- 17 For children with diminished vision/eye disorders 2,444
- 9 For children with musculoskeletal disorders (e.g. cerebral palsy) 1,712
- 9 For children with mild and severe speech disorders 1,712
- 78 For children with mental disabilities/rehabilitation of physical and mental development 9,393
- 73 For children with mental disabilities/children with developmental delays 7,716
- 1 For children with special educational needs 143

28
EDUCATIONAL COMPLEXES
 7,140 / 392

The number of institutions in each region (oblast)



There is no data available on the number of institutions and children in them in temporarily occupied territories of Ukraine.

The number of institutions in each oblast
 The total number of children in institutions
 The number of orphans and children deprived of parental care in the total number of children

Ukraine
663
99,915
9,291

Different institutions are managed by different ministries:

<p>38 baby (infant) homes function under the Ministry of Health of Ukraine</p>	<p>50 children's care homes are managed by the Ministry of Social Policy of Ukraine</p>	<p>575 residential facilities of different types are supervised by the Ministry of Education and Science of Ukraine</p>
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The period of establishment of institutions, area of the premises and land plots

425 of 663 existing institutions were founded in Soviet times (before 1991). Most institutions were established in the period from 1951 to 1970 (300 or 45%) – slightly less than half of all current functioning residential facilities in Ukraine. The peak year for the establishment of institutions was 1961 when 56 facilities were established; 43 institutions were founded in 1959.

Pishchanska oblast special boarding school for general education (Vinnytsya oblast) was founded in **1938**.

Myrhorod oblast special boarding school for general education levels I-III (Poltava oblast) was created in **1938**.

Snyatynskiyi oblast children's care home (Ivano-Frankivsk oblast) opened its doors in **1945**.

Residential facilities were predominantly designed to house large numbers of children and consist of several buildings. 66% of institutions were built to hold 100 or more children; today, according to their administrators they are, on average, 50-60% full.

The total floor area of all institutions is **4,778,209 m²**

The total land area of institutions is **4,866.88 hectares**

Institutions with the largest land areas

The land area of the Krasnyi Khutir oblast boarding school for general education for levels I-III (Chernihiv oblast) is **34.6 hectares**

The area of land owned by the Hulyay Pole oblast special boarding school for general education (Zaporizhya oblast) is **52.1 hectares**

Similarly, the total land area of the Chernihiv oblast children's care home (Zaporizhya oblast) is **125.4 hectares** (141 residents).

List of institutions with a total area of buildings exceeding 20,000 m²

Total area of buildings owned by the institution, m²

Zhmerynka oblast boarding school for general education for levels I-II
26,443
VINNYTSYA

Pryjkkarpatya oblast military and sports lyceum
25,540
IVANO-FRANKIVSK

Kryvyi Rih oblast multi-disciplinary education and rehabilitation centre "Natkhenya" (Inspiration)
22,020
Vasylivska oblast boarding school for general education
39,900
DNIPROPETROVSK

Novomyrhorod oblast special boarding school for general education for levels I-II
95 953
KIROVOHRAD

Kramatorsk oblast boarding school #3 for levels I-II
27,308
DONETSK

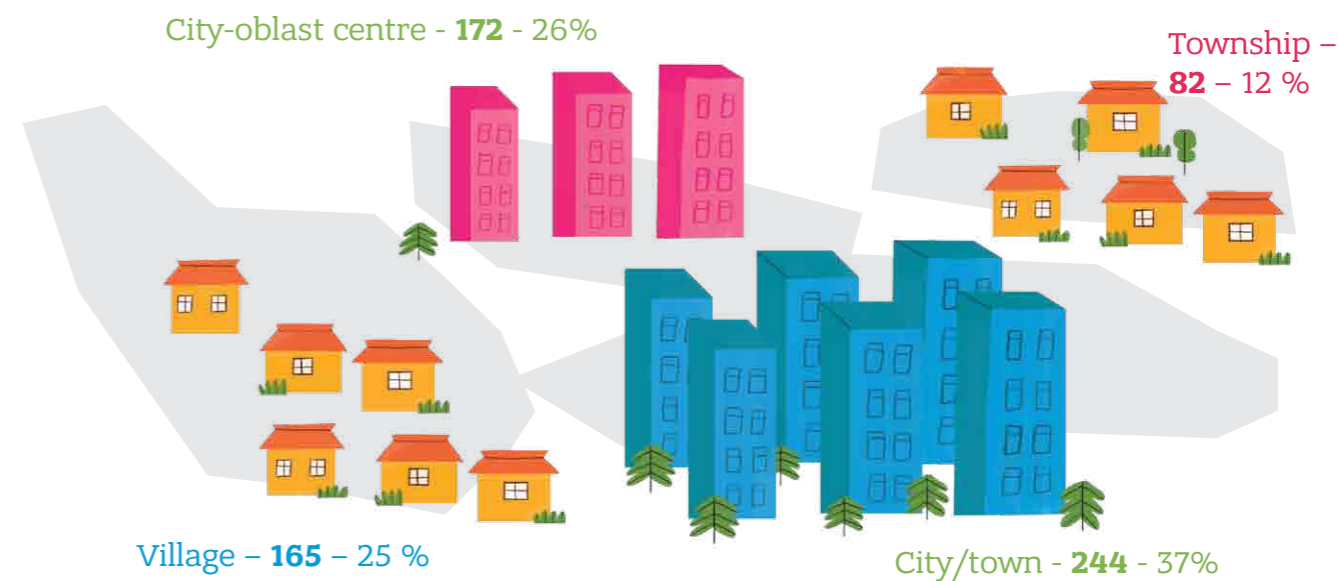
Shevchenkove oblast specialised boarding school for general education with advanced artistic and aesthetic education
20,890

Zolotonosha oblast boarding school for general education for levels I-III
22,830
CHERKASY

663 institutions

598 facilities of regional (oblast) property

Location of residential facilities



The system of residential facilities for children was founded in the Soviet era, and since then little has changed. Institutions continue to function as oblast-level facilities. They have huge buildings and land plots and have become closed and isolated enterprises filled with children, who are being separated from families, communities and society, thus depriving them of simple everyday things – living with parents, going to school, doing what they like and being just like other kids.



2

Meeting the basic needs of children in institutions

What happens in childhood does not stay in childhood. The experiences children have in their early lives – and the environments in which they have them – exert a lifelong impact. These experiences shape the developing brain architecture and influence how and what genes are expressed over time. This dynamic process affects whether children grow up to be healthy, productive members of society.

Beyond Survival: The Case for Investing in Young Children Globally.
National Academy of Medicine, 2016³

³ Huebner G., Boothby N., oth. (2016) Beyond Survival: The Case for Investing in Young Children Globally, National Academy of Medicine, <https://nam.edu/beyond-survival-the-case-for-investing-in-young-children-globally/>

Effects of institutionalisation on children



Physical development and motor skills:

- **Physical underdevelopment**, with weight, height and head circumference below the normal ranges;
- **Hearing and vision problems**, which can be caused by poor diet and/or under-stimulation;
- **Motor skill delays and missed developmental milestones**; in severe conditions, stereotypical behaviours such as body rocking and head banging;
- **Poor health and sickness**;
- **Physical and intellectual disabilities** as a consequence of institutional care.



Psychological consequences:

- **Negative social or behavioural consequences**, such as problems with anti-social behaviours, social competence, play and peer/sibling interactions;
- **"Quasi-autistic" behaviours** such as face guarding and/or stereotypical self-stimulation, comfort behaviours such as body rocking or head banging; in some low-quality institutions young children become socially withdrawn after six months;
- **Attention-seeking behaviour**, such as aggressive behaviour or self-harming (which can lead to the social isolation of children or the use of physical restraints).



Formation of emotional attachments:

- **Indiscriminate friendliness, over-friendliness and/or uninhibited behaviour**, especially in children admitted to institutions before the age of two;
- **Detrimental effect** on children's ability to form relationships throughout life;
- Children who are **desperate for adult attention and affection**.



Intellect and language:

- **Poor cognitive performance** and lower IQ scores;
- **Delay in language acquisition**;
- **Deficits in language skills**, such as poor vocabulary, less spontaneous language and early reading performance.



Brain development:

- **Suppression of brain development** in young children, resulting in neural and behavioural deficits, especially for social interactions and emotions, as well as language.

Common European Guidelines on the Transition from Institutional to Community-based Care, Expert Group on the Transition from Institutional to Community-based Care, 2012⁴).

⁴Expert Group on the Transition from Institutional to Community-based Care (2012) Common European Guidelines on the Transition from Institutional to Community-based Care www.deinstitutionalisationguide.eu

Growing up in an institution is harmful to a child's development

60 years of research has produced compelling evidence regarding the negative effects of institutional care on the physical, emotional, social and cognitive development of children. Moreover, the younger a child is placed in an institution, the more profound, tragic and irreversible the consequences for future life.

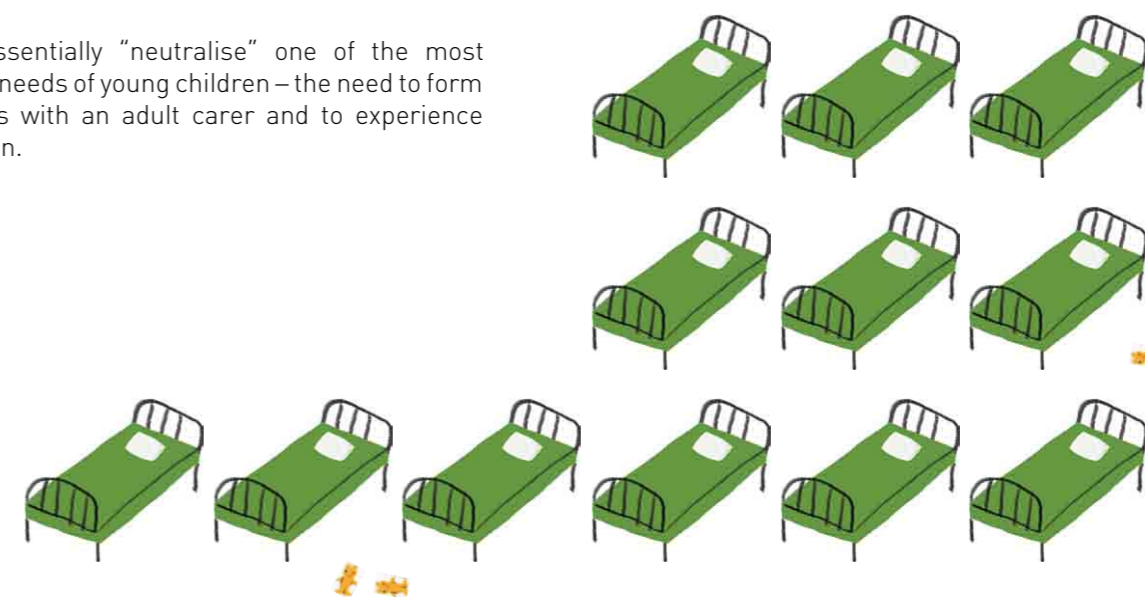
The impact of institutional care is particularly damaging for infants and children under the age of three. According to the conclusions of researchers from the Centre on the Developing Child at Harvard University, it is during this period that the brain actively develops and the responsive interaction of a child with a caring adult is vital for this⁵. Through emotional links with an adult caregiver a child establishes and develops social preferences (affection, long-term relationships, attention to another, solicitude, ability to love). The absence of links with significant adults is the cause of emotional and physical stress, which disrupts his or her sense of security.

As of September 1, 2015, there were 38 baby homes within Ukraine's health system providing care to 2,790 children from birth to five years. These institutions follow a "medical model", of care in terms of staffing (children are attended by junior and mid-level health professionals) and the organisation of daily routines and child development. Of the total number of children, 2,088 (75%) had lived in an institution for one to five years, and 56 children had lived in an institution for more than five years. Given that 75% of children have been living in these facilities for years, it can be assumed that life in an institution leads to significant developmental issues. According to directors of baby homes, over 90% of children have developmental and health disorders, with 49% being neuropsychiatric disorders.

Baby homes essentially "neutralise" one of the most important basic needs of young children – the need to form emotional bonds with an adult carer and to experience love and affection.

"More than half of the children have been living in this institution for four to six years. We met a girl who is already seven, but she doesn't attend school. Children are not prepared for school – we did not notice any sign of lessons. The speech therapist's office is tiny and dark, with no windows or special equipment. We did not notice the doctor working with children either. Most of the kids have very limited vocabulary – not all of them know their last names. Some of them don't even know their names. We were shocked by two children who have been living in an isolation ward all of the time."

From observations in a specialised baby home



⁵Walsh B. (2015) The Science of Resilience. Harvard Graduate School of Education www.gse.harvard.edu/news/uk/15/03/science-resilience.

Institutions fail to meet children's basic needs

Apart from the negative consequences of institutionalisation, the Ukrainian institutional care system operates in a way that does not provide for the basic needs or proper care of children, and/or rehabilitation. Observations in institutions show that **living conditions in these facilities are often poor and degrading**. Children live in bedrooms designed for six to 16 people. These rooms have virtually no furniture – usually just one table and a closet per room. Children have no place to store their belongings, and because of theft, they give their valuables to teachers, having no free access to them afterwards. Showers and toilets are in short supply – they are predominantly public and often in poor condition.

Below are some comments made by specialists who analysed the observance of the rights of children in selected institutions:

"The bedroom building is made of blocks of two rooms. Each room has four to six beds with a bedside table near each bed. The corridor of each block has just enough space for a table and a closet. There are cardboard boxes in the closet where children store their personal belongings. It seemed that all the rooms looked the same."

A boarding school for general education

"The shower unit is one for all – children go to shower in groups. According to the schedule there is only one shower day per week. The room has a very unpleasant smell of mould. Each toilet room is equipped with three bowls with no partition walls."

A special boarding school

"The indoor toilet in the bedroom block for children of secondary school age is out of order; children have to use a pit latrine which is insanitary. The smell around this facility is terrible. You cannot lock the door; there is no toilet paper inside. At the same time a brand new toilet facility was built for the staff."

A boarding school for orphaned children and children deprived of parental care

"Shower cabins have no curtains; some have broken taps or do not work at all. There is often no running water, so children collect water in buckets and share large washbowls to wash. Only three of the five washstands are operational; children from several rooms share one piece of soap. The facility has a bathing complex where children can wash every eight to ten days. We were told that it has a special shower for guests, without explaining who these might be."

A boarding school for orphans

"We were left speechless by this bedroom for boys of grades five to nine. Imagine a room [roughly 35m² of floor area] with 16 beds in tight rows. No bedside tables, closets, tables or chairs – just beds. Very narrow passages. You enter the room directly from the gym. The toilet is just like one in a kindergarten with very low washstands – and just one shower unit for all."

A special boarding school



Results of monitoring visits to Ministry of Education and Science institutions in Ukraine revealed violations of the right of children to privacy and personal space, the right to access to proper medical care and rehabilitation as well as the right to a decent standard of living:

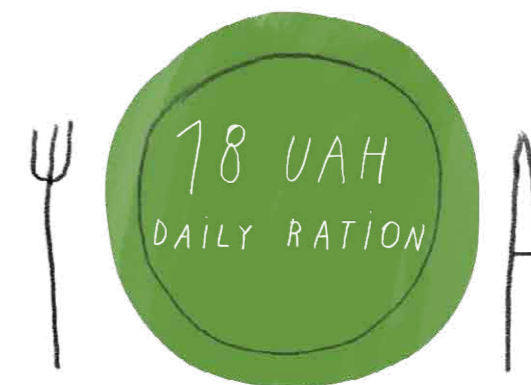
- Often, despite there being sufficient space, children are placed unequally in overcrowded rooms – up to 12-14 sleeping places per room. Bedrooms are not equipped with bed-stands, wardrobes, desks or chairs;
- Bedrooms are often locked after wake-up until the night and children keep their belongings in classrooms or playrooms.

Monitoring places of detention in Ukraine: the State of Implementation of the National Preventive Mechanism, 2014 Report. The Verkhovna Rada of Ukraine Commissioner for Human Rights, 2015

CHILD NUTRITION

in residential facilities is provided in accordance with approved standards for appropriate types of facilities⁴; they include a list of food products and rate per child per day. The funding for nutrition depends on the type of institution.

In general, according to the heads of residential facilities, the average cost of food per child in all types of institutions in 2014 was UAH 539 a month. As for the daily ration, it costs just UAH 18. We can assume that it is impossible to provide quality and balanced meals for this amount of money.



Comments from participants of focus group discussions with graduates of Ukrainian institutions:

"You eat this porridge and it is even delicious. And then, all of a sudden you see a worm. We complained to our cooks but they didn't even bat an eyelid."

"I was hungry – and this was the main thing. Yes, we lacked clothes and warmth; we slept in pairs to keep us warm. Now I won't eat barley, wheat and buckwheat groats – I've had too much of those during my eight years in the orphanage. In there I was always dreaming about nice things, to look decent. Sometimes sponsors came over and brought sweets. We rushed to them and hid the sweets away."

"It wasn't possible to drink the water – it smelled bad, well, it simply stank."

"We simply could not eat what they were giving us. One of my classmates took this cutlet and asked me if I wanted to know what it was made of. So he lifts the cutlet with his spoon and throws it up – and it stuck to the ceiling!"

In different types of institutions, despite similar standards, the provision of child nutrition varies significantly. For example, baby homes, where the majority of children were placed upon the request of their parents, spent almost UAH 750 per month on food, while the average monthly cost of food for children in boarding schools for orphans and children deprived of parental care, which have full state maintenance, was UAH 585.

Sanatorium-type boarding schools, which offer somewhat higher standards of nutrition, on average spend UAH 747 per child per month, while the cost of food in educational and rehabilitation centres is even higher – UAH 935.

The feeding of children in institutions follows established regimes and approved menus. Children's health or their taste preferences are usually not taken into account.

"Feeding of bedridden children occurs in the playroom in the bedroom block – before giving children their food, nurses wash kids' hands in small bowls. Kitchen personnel bring food and dishes and serve the food in portions. They mix the first and the second course in one bowl and drop large chunks of bread, soaked in the same bowl. We were shocked by how quickly nurses were feeding these children, who, in turn, quickly swallowed all the food. When asked why they were doing it so fast, they explained that they needed to keep up with the schedule."

Observations in a children's care home

Therefore, taking into account the amount of budget allocated to food, approaches to nutrition, and evidence from former residents of institutions, it can be assumed that food in residential facilities is of poor quality. Children's tastes, preferences and development needs are generally ignored and the amount of food provided is often insufficient for a child to feel full.

⁴ The Cabinet of Ministers of Ukraine Resolution No. 1591 as of November 22, 2004 "On approving norms of nutrition in educational and children's facilities of health improvement and recreation".

THE PROVISION OF CLOTHING AND FOOTWEAR FOR CHILDREN

is regulated by approved standards of material provision for orphaned children, children deprived of parental care and children in need of social support⁷. These standards are used to calculate expenditure for purchasing clothes, footwear and hygiene products for children.

According to the heads of residential facilities, expenditure on clothing and shoes for children in 2014 accounted for 1.4% of the total budget, and in 2015 this rate increased to 1.8%. For example, the cost of clothing for children in children's homes ranges from UAH 3,000 – 6,000 per child per year, while boarding schools of general education for orphans and children deprived of parental care spend UAH 2,000 – 3,000. Expenditure on clothing and footwear in care homes is even lower, from UAH 1,000 – 2,000 per year.

Staff members of boarding schools admit that these standards make it virtually impossible to provide children with adequate clothing and footwear. In addition, employees of special boarding schools, education and rehabilitation centres and other institutions where children are placed upon at their parents' request (which means no budget for clothes) noted that most children in these institutions come from low-income families or families in crisis where parents are unable to provide proper care. Therefore, staff members try to solve the problem of finding clothes and essentials for these children through humanitarian or charitable assistance.

"They are only able to meet 20–25% of the children's needs for clothing and footwear. They cover some of these needs through sponsor support. Some children in the facility, who travel abroad on vacation, differ from others, they wear nice clothes. Other kids are dressed in old stuff, sometimes the wrong size – these are delivered by philanthropists."

Observations in a boarding school for orphans and children deprived of parental care

"Kids are dressed slovenly; younger ones are dirty. Clothes and shoes are too big and don't match the season. I saw a boy wearing a sweat suit which was too large – he said they gave it to him right before our visit. Then I met a girl with a shaved head who was wearing a headscarf – she was ashamed of her appearance. The educator told us she had lice. Some girls wore sweat pants with school blouses, heeled sandals and warm socks."

Observation in a special boarding school

"Before this commission (specialists visiting the institution during the study) arrived we were all given something – a bar of soap, a toothbrush, some towels, new bed linen. Even the food became more delicious – usually, it does not taste that good."

Interview with a resident of a boarding school for general education

"We lacked clothes; when guests came and brought things our educators were the first ones to pick things. And then they would let us in."

Statement from a graduate from an institution during a focus group

UAH
1–2
THOUSAND
PER YEAR

MEDICAL CARE FOR CHILDREN

The situation with medical care for children and the provision of treatment and rehabilitation services in institutions fail to meet the objectives declared in regulatory documents as well as children's needs. This conclusion is based on the analysis of the structure of funding of orphanages, medical personnel available in certain types of institutions and on observations and interviews.

According to the heads of institutions, only 0.6% of funds allocated for financing institutions are spent on medical care and the procurement of medicines for children. For example, in 2014 the budget for medicine in sanatorium-type boarding schools was 0.5%, in baby homes and specialised baby homes 1.2% and care homes 1.6%.

"They don't give us money for treatment, so we buy the most needed drugs from our own pockets. They used to distribute at least aspirin, bandages, and brilliant green antiseptic. The sanitation station also provided us with some health products. Nowadays no one gives anything, so sometimes we turn to folk medicine. For example, we fight lice with the "Troyny" cologne. No one issues prescriptions – if a child is sick, they take him or her to the hospital. There is a medical examination at the beginning of every year."

Interview with an educator in a special boarding school

Health checks are usually conducted twice a year, their results, as well as doctors' orders, serve as a basis for the treatment of children. However, both staff members and parents of children raised in residential facilities have highlighted the issue of the absence of specialists as well as the lack of money to buy medicines. As a result, it is impossible to ensure proper medical follow-up and to monitor the changes in a child's health and development.

"Our institution has neither a neurologist nor psychiatrist. It is very difficult to work with children as many of them have serious health issues. Our rayon hospital also lacks health professionals. There is a full-time nurse in our facility, but she works alone and is not always ready to help."

Interview with a staff member from a care home

Children with disabilities in specialised schools for children with hearing impairments use hearing aids designed for the elderly (whose hearing issues are related to physiological changes due to age); schools do not have the expertise or equipment to support children who are deaf or have decreased hearing.

Monitoring places of detention in Ukraine: the State of Implementation of the National Preventive Mechanism, 2014 Report.
The Verkhovna Rada of Ukraine Commissioner for Human Rights, 2015



419 of the 663 institutions in Ukraine are designed for children with health issues and developmental disorders. According to data collected from the heads of institutions, the entire system of residential facilities has 74 neurologists, 45 recreation therapists and 118 psychiatrists. For example, 67% of personnel in children's care homes are junior medical staff – "nurses" and "nurse's aides"; and 14.6% are medical nurses. There are only 34 paediatricians and 27 psychiatrists working in 50 facilities.

Heads of institutions reported that they try to buy some necessary medicines for "sponsor money". Specialist equipment, necessary for rehabilitation work with children, is either severely outdated or procured thanks to philanthropists and sponsors.

"We have not bought any equipment from our budget for 20 years. Everything we have is thanks to sponsor support. Our children still need modern equipment. On the internet we see beautiful equipment for development and rehabilitation and then we come back to work with equipment from the previous century."

Interview with a psychologist from a special boarding school

"Recently I was in the city and visited a rehabilitation day centre. They organised children's groups and the rehabilitation specialist works with these kids. I was shocked – they have a room for physical rehabilitation and rooms for child development with all the necessary equipment. Of course, children in there will grow and develop. They are much more advanced in terms of development compared to our kids."

Interview with a staff member of a care home

⁷ Order of the Ministry of Education and Science of Ukraine No. 763 as of November 17, 2003 "On approving standards of material and norms of financial provision of orphaned children, children deprived of parental care, as well as students of boarding schools".

Ensuring **proper round-the-clock care of children in institutions and providing individual attention** raises many questions. The staff-child ratio of personnel working in one shift and providing direct care eliminates any possibility for individual attention, let alone meeting the needs of every child. For example, one educator in a boarding school, education and rehabilitation centre, educational complex or children's home has to attend on average 38 children.

According to the work schedule in residential facilities, an educator stays with the group or class after school from 13.00 to 20.00. In the evenings and at night children are supervised by assistant educators (one person per bedroom block or floor, depending on the size of the institution). As for baby homes and care homes, children are cared for by junior and mid-level health professionals (paramedical staff).

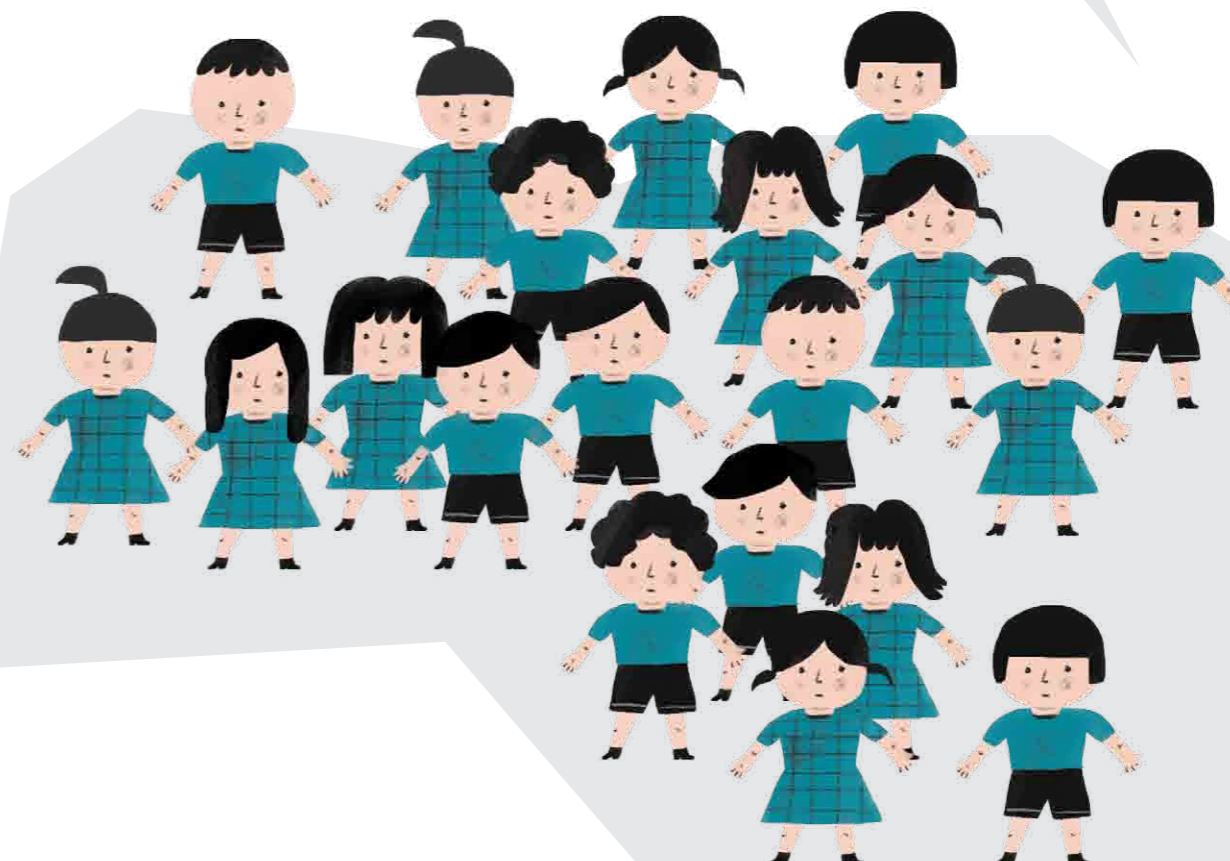
"My working day is as follows: at 14.00 I accept kids from the teachers. We go to the bedroom block and they change. Then I take them to lunch. After that, we have a so-called maintenance hour – stitching, shoe shining and the like. At 16.00 we have a sports hour where children have relays or play "hot potato". At 16.45 we have snacks and then at 17.00 I take them to the classroom to do homework. Some children work on an individual programme. At 18.00 I conduct educational conversations with the children followed by supervised leisure time. Children have their dinner at 19.00, after which they watch TV. In the evening they only wash their hands – they bathe in the afternoons as it is more convenient."

Interview with an educator from a special boarding school

"Without a doubt, children in this facility have lower levels of emotional development compared to children who are brought up in families. Why so? Kids here do not get that warmth, which is shared within a normal family (mum, dad, and granny). It seems like institutions encourage artificial cultivation. Children are deprived of important care that can only be provided in a normal family."

Interview with a psychologist in a baby home

ONE
EDUCATOR
HAS TO ATTEND
38 CHILDREN





3

Protecting children from violence; creating conditions for their socialisation in institutional settings

Any institution is a closed system. In line with the UN Convention against Torture, and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT)⁸ and its Optional Protocol⁹, ratified by Ukraine, as well as the National Preventive Mechanism, institutions are recognised as **places of detention**¹⁰, and compared to prisons with relevant consequences for children.

⁸ http://zakon3.rada.gov.ua/laws/show/995_085

⁹ http://zakon2.rada.gov.ua/laws/show/995_148.

¹⁰ The Verkhovna Rada of Ukraine Commissioner for Human Rights. Monitoring places of detention in Ukraine: the State of Implementation of the National Preventive Mechanism, Kyiv, 2014. www.ombudsman.gov.ua/files/Dopovidi/Dopovid_NPM_2013.pdf.

Institutions increase the risk of violence against children

There are many cases, including those documented by Hope and Homes for Children, where the closed nature of institutions contributes to physical and emotional violence against children, both by other children and institution staff.

Due to the lack of supervision and control by both the state and other organisations, residential facilities become a “breeding ground” not only for physical but also for sexual violence against children.

“I would like to ask our staff to talk to us properly, without shouting and punishment. Those kids who don’t clean their room well are forced to clean toilets.”

Interview with a resident of a special boarding school

During the study we learned about cases where staff employed specific disciplinary measures – intimidation with law enforcement authorities, shouting and verbal abuse or the use of forced labour.

“We can raise our voices while dealing with these children – other methods simply don’t work. We speak their language. This is the system and kids get used to it.”

Interview with a social pedagogue from a special boarding school

“Everything seems so nice right now because you [the researchers] came over. At any other time the atmosphere is very strict – they yell at us and even beat us. A teacher may smack you on the back of the neck.”

Interview with a child from a boarding school of general education

“Teachers yell at us during lessons and threaten to take us to the headmaster. In turn, the headmaster may put you in the corner for the whole lesson or threaten to kick you out of school. At night when children want to go to the bathroom, the guards open up the block so kids go to the store and buy cigarettes and alcohol and drink. Several times the boys wanted me to drink with them and beat me up. I don’t drink! If an educator learns about this – about boys running to the store, smoking and drinking, they will be punished. They make you kneel down and hold a basin of water over your head.”

Interview with a child from a special boarding school

“...true, even the headmaster beat kids up and teachers pulled our hair and hit our heads against the chalkboard. They used pointers as well. If someone did something bad the headmaster took this cane that they use at physical training classes and smacked this person on the back or the head.”

Statement from a graduate of an institution during a focus group



Below are statements from former residents of institutions participating in focus group discussions:

“My girlfriend was raped in the institution but the police never came. I meet many children on the streets who ran away from orphanages because they were afraid of the staff.”

“Sex at the age of 13 or 14 between children in an internat (boarding school) is normal. We all did this. Some girls became pregnant and staff had to send them away to have abortions. They did not ask for permission; the girls had no choice – a pregnant teenage girl means many problems for the headmaster.”

“Our educator humiliated us – in the evenings he made us (the girls) undress in front of our classmates. It this normal?”

In institutions, especially those operating in rural areas, children are often used as “cheap labour”. Children work both inside the facilities and in the kitchen gardens of the staff or villagers outside the institution. There are many cases of children working during their school hours.



“I can make money by harrowing kitchen gardens and fields – UAH 150 per ten acres. Villagers may ask children for help – they just write a request and children come and work.”

Interview with a child from a special boarding school

“We had a garden and a large kitchen garden in the grounds of the institution – about five ha. They grew potatoes, marrow squash and corn. We went to this kitchen garden to work, but not all children. They only sent those who they trusted.”

Statement from a former resident of a special boarding school

“We spent the money we earned on soap because there’s never enough in the institution. When we wash we ask other kids or educators for soap.”

Interview with a child from a boarding school for general education

“Our orphanage was huge – more than 120 hectares of land, a pig farm, and several horses. Children were working all the time, in the field and on the farm. It was really hard work and I think children worked more than they studied. They were used by adults and earned nothing.”

Statement from a former staff member of a boarding school

“We rake fallen leaves in the backyards, dig vegetable patches, collect nuts and the like. We look for jobs by walking around and asking the locals if they need any help. We make like 50 or UAH 100 and then we buy sweets, crumpets, instant noodles or chip in to buy cigarettes.”

Interview with a child from a boarding school for orphans and children deprived of parental care

Socialisation in artificial settings

Institutional care is contributing to creating “lost generations” of young people who are not able to integrate into society. Many people who enter institutional care at a young age suffer at later stages in life from serious failures in their social and emotional development. Those who experience severe physical and psychological violence in early childhood can struggle with lasting developmental problems, injuries and trauma. As care institutions are often cut off from communities, children are prevented from developing social networks essential for later life. This is usually reinforced by the stigma associated with having grown up in care.

The rights of vulnerable children under the age of three. United Nations High Commissioner for Human Rights, Europe Regional Office, 2011¹¹

The organisation of care and education in residential facilities limits children from acquiring necessary life experience and skills and significantly reduces their chances of successfully integrating into society after leaving the institution for an independent life.

Interaction in orphanages is built around something common and this dominates over the individual. Care is provided in large groups thus making individual approaches and providing individual attention almost impossible. Such care often focuses on the execution of clear instructions and guidance given by staff. Children do not have to be independent or use their own judgment in making decisions. Daily routines in almost all residential facilities are planned down to the minute, and children have very little free time for themselves; they usually all perform the same set of tasks given by educators, while their abilities and individual needs are ignored.

“Each one of us has a toothbrush and a cup to rinse our mouths. We brush our teeth every day. We bathe once a week on Saturdays. We do have hot water and they give us one bottle of shampoo per group. You still have to ask your educator about everything – can we take a shower? When do we brush our teeth? Otherwise they may scold you.”

Interview with a boarding school student

“Children are tired. Even though we have summer holidays right now, they still have to observe their routine. We have compassion for our own children – we usually let them sleep and rest longer during holidays and on weekends. But children in this place have a schedule: you must be up at 7.00. If you miss your breakfast at 8.00 you will be hungry until lunch. Moreover, children don’t have private time. Their entire lives are scheduled and planned.”

Interview with a teacher in a sanatorium boarding school

¹¹ United Nations High Commissioner for Human Rights (2011) The rights of vulnerable children under the age of three www.europe.ohchr.org/Documents/Publications/Children_under_3_webversion.pdf

"You want to know about the children's day? OK, they rise at 7.00, exercise, wash and dress. Then they clean their area. Classes begin at 9.00. Then they have lunch. After lunch, they rest until 16.00. At this time children may go to the library. At 16.00 they attend educational classes – there is a plan of topics for discussion. At 17.00 children have an hour of self-tuition followed by board games and reading. Dinner is scheduled for 19.00. Then kids wash themselves, bathe, and rest."

Interview with an educator from a boarding school for general education

"Free time is written in the schedule – from 18.30 to 19.00 for grades one to four, and from 19.00 to 19.30 – for grades five to nine. The decision on how children spend their leisure time is usually made by the educator – kids may watch TV, play board games or walk around the building."

Interviews with children and observations in a special boarding school

In institutions, children have very limited social circles and have no interaction with the external world – in other words, children are excluded from community life.

"Our children do not communicate with other children outside of the institution – only the eight kids who attend the school at our facility. Since our school is the closed type we do not allow children to communicate. Sometimes local children visit our sports ground but this doesn't happen too often."

Interview with a social pedagogue from a special boarding school

"This facility does not permit children to communicate with children outside the institution; children are not allowed to leave the grounds on their own – only under the supervision of educators."

Interview with an educator from a boarding school for general education

"Sometimes children leave the grounds of the institution without permission and steal something in the shop or at the market. They steal money, cigarettes, and sausages. To prevent this from happening, we organise excursions to the police station and show them prison cells."

Interview with a social pedagogue from a special boarding school

LOW EDUCATIONAL LEVEL AND LIMITED OPPORTUNITIES FOR CONTINUED EDUCATION

Most graduates of residential facilities have a poor educational level and when choosing their future occupation they usually focus on professions that are traditionally taught to children from a specific institution. Senior students have very little idea about where they are going to study. During interviews, children provided names of vocational schools that "traditionally" admit kids from their institutions. It is virtually impossible for children to select a profession that they want because of limited opportunities; therefore, they rely on decisions made by the administrators of their respective institutions.

From interviews with senior students studying in boarding schools:

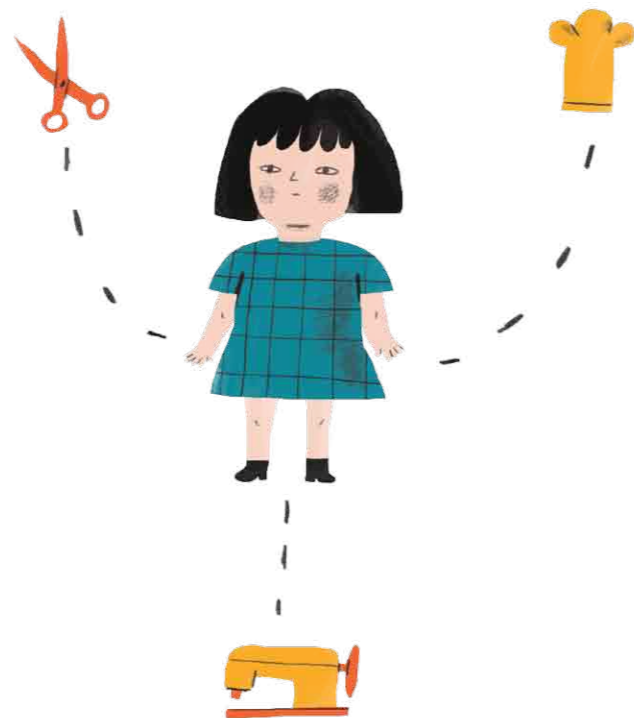
"I want to be a mechanic but it is the headmaster who will tell me what vocational training to enter."

"I don't know where to go – it's up to our headmaster. Most of our kids go to this one vocational school."

"I would like to be a police officer but our graduates study to become cooks and mechanics."

"No, I did not explore this issue. I guess I will go where everyone's going – to become a mechanic."

"I will go to vocational school to become a house painter. As for documents and other things – let the headmaster think about that stuff."



52 of the 60 senior students surveyed commented that they were going to vocational or technical schools that admitted most graduates of their respective institutions, or to where the headmaster would tell them to go. Children mentioned a limited number of professions such as a house painter, cook, seamstress, construction worker, hairdresser and mechanic. According to the children, provision of housing (dormitory) is the only thing that matters.

"Before graduation, you go to the headmaster – he gathers all senior students who are going to continue their education. The headmaster tells us about this or that vocational school. We told him about preferences in terms of future professions. I wanted to be a cook but he decided that I should be a seamstress."

Participant from a focus group with graduates of residential facilities

"I am totally against institutions – I've been there and I know how they raise children. Even though they say kids get an education there – it is not true, no education, no nothing! After life in an institution children are totally unprepared; only a few manage to obtain a normal education and start a decent life. I believe that institutions are the worst thing that can happen to a child! I don't think this is good for our country!"

Participant from a focus group with graduates of residential facilities

"Graduates of institutions are less educated; their chances to enter university or a school of higher education are minuscule. They get used to having someone that feeds them, that they have a place to live and that somebody else makes all the decisions for them. Huge numbers of children lead antisocial lives after leaving an institution."

Interview with a head of a rayon department of education

NO STRUCTURED PREPARATION FOR INDEPENDENT LIVING

Children living in institutions receive no meaningful training on how to live an independent life. There are only a few documented cases where volunteers and NGO representatives organise special courses on life skills for institutionalised children.

"The entire life of a child changes drastically within one day. He's just left the children's home, and now he has to do everything on his own, to make decisions, to take care of himself. How to do it? A child never did this before – he came from another planet. And how did we train them? No training – just daily routine and regime. No one ever told us about such training – moreover, we had no proper experience for that. Not every person can cope with this. I mean, only the mentally strong can live through this situation."

Interview with a former staff member of a children's home

"After leaving the institution it will be really hard for me to defend myself. If someone steals something, everyone will point at me without getting too deep into the case because I came from the orphanage. Well, I am not ready to live independently."

Interview with the resident from a special boarding school

"We prepare children for adult life as we keep on talking about hygiene, proper clothing and the like. We also organise social role plays – in the hospital, at the market, in the store. Our graduates visited the employment centre. I also conduct special classes, like "How I behave in school?", "What do I feel?", "What is beauty?", "My Motherland", "The Constitution: rights and responsibilities of children."

Interview with a teacher from a special boarding school

"The biggest problem for our graduates is that they are unprepared for independent living, including the use of money and communication with peers. Here they are adapted to one system, but everything is very different on the outside. We do our best to help children, we explain."

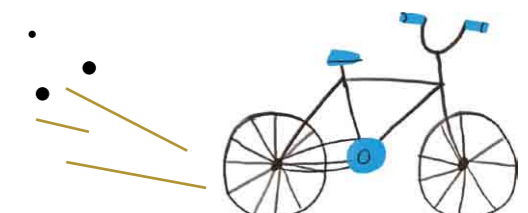
Interview with a social pedagogue from a boarding school

Quotes from graduates participating in focus group discussions:

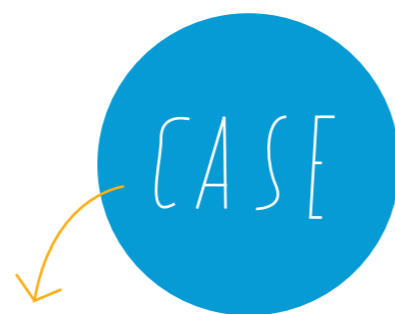
"Every time I apply for a job, I have this fear – I will fail."

"You know, sometimes it's very difficult and shameful to admit that you came from an institution. Institution means "incubator", and it seems like you are not a normal human being."

"Many of my classmates are in prison now. Some steal, some are involved in prostitution."



The consequences of long-term institutional care in adult life include chronic depression, low self-esteem, fear of loneliness and antisocial behaviour. Graduates of institutions usually **lack responsibility for their own lives**, they cannot make their own decisions and are more likely to be exploited by others and suffer from victimisation. It is estimated that less than 10% of former institution residents are able to integrate into society successfully outside of the institutional system.



While examining the fate of graduates from one children's home in the Dnipropetrovsk oblast (79 individuals), we learned that 34 of them lead an antisocial life (alcohol and drug abuse, begging), 23 survived on temporary jobs, 10 had criminal convictions; three female graduates abandoned children immediately after birth; two graduates died of infectious diseases and one committed suicide. According to personnel, only five graduates were able to successfully integrate into society. It can be assumed that similar scenarios are typical for other institutions as community specialists in social work note that graduates of such facilities face an increased risk of difficult life situations and require structured social support.



LESS THAN 10%
SUCCESSFULLY
INTEGRATE
IN SOCIETY



CIRCLE OF DISADVANTAGE

The institutional care environment does not contribute to a child's ability to build relationships throughout life which is a **direct threat to the family unit**. Studies show that children of mothers who were raised in institutions also risk finding themselves in institutional settings because this model of education is clear and understandable for such parents.

"One graduate brought three of her daughters (aged 12, 13 and 14 years) to the interview – and all of them currently stay in the institution where their mother was raised."

Member of the research team visiting a boarding school for general education

"During the study we saw how two grandmothers took kids for summer vacation. One of them took four grandchildren, and the other one – six! It turned out that the latter has three children who were raised in this institution. Each one of them has two children – and all six kids stay in the same institution!"

Observation in a special boarding school

"On the day of our visit this boarding school housed 88 children. Parents of 25 of them were also raised in this institution."

Analysis of personal files of children living in a special boarding school



Almost half of the clients of the "Ray of Hope" centre of social support for children and families are former residents of institutions. In 21 cases, when the centre received women with newborn children, 10 of them used to live in institutions. According to the centre's staff, it was extremely difficult to work with them – they did not know even basic things. They lacked knowledge about their rights and responsibilities; they knew nothing about social norms and rules of conduct; they had a distorted view of human values and on their role as mothers. These women had a limited sense of responsibility, care and warmth; their moral principles were vague. They couldn't plan for the future and predict consequences of their actions; they rejected their responsibility in performing various social roles.



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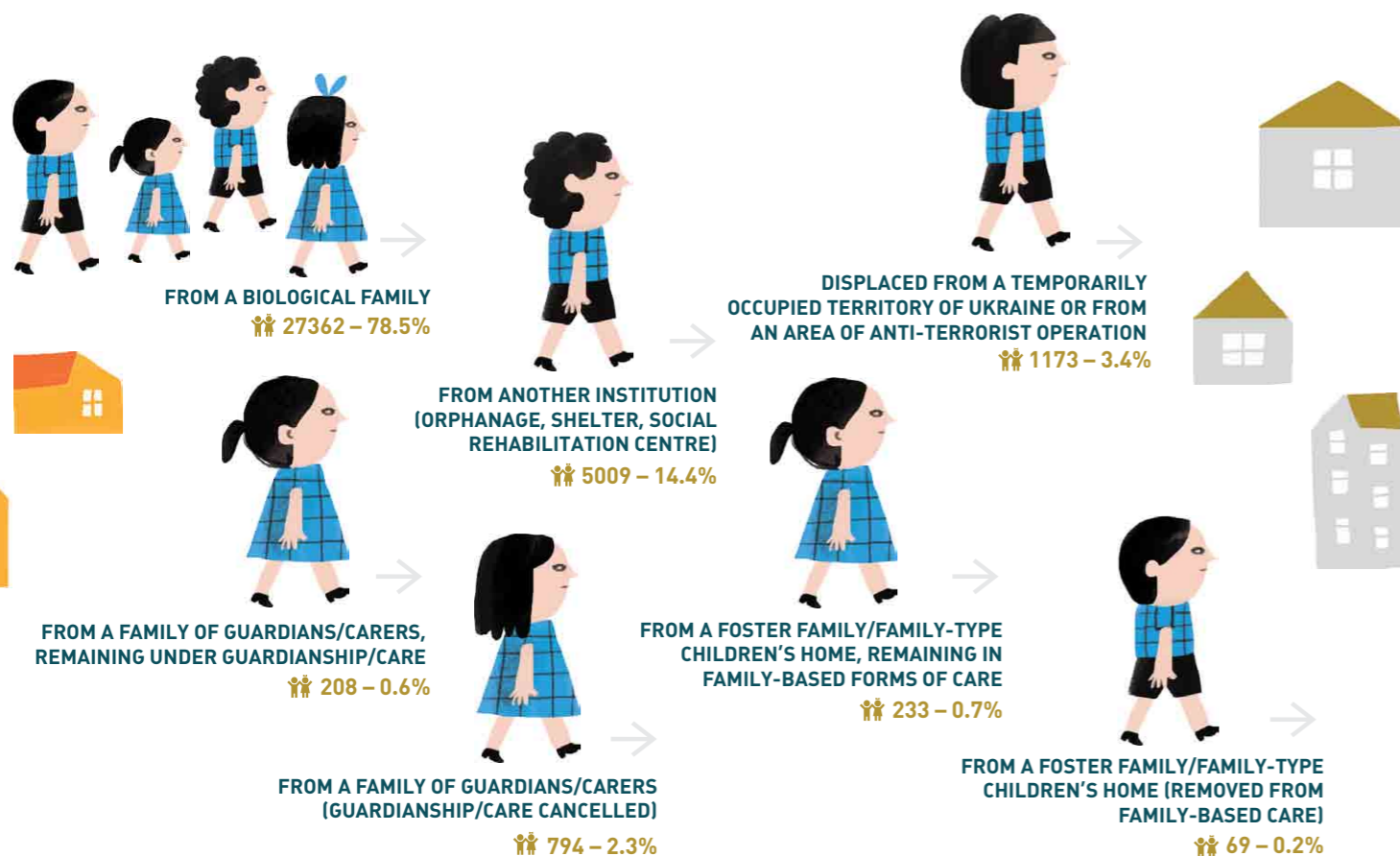
**Causes and ways
of institutionalisation**

Placement of children in residential facilities

Where a child arrived from

SEPTEMBER 01, 2014 –
SEPTEMBER 01, 2015

👤 TOTAL



According to information obtained from the heads of residential facilities, 32,481 children were placed in institutions during the academic year 2012/13 and 34,848 children during 2014/15 (a 7.3% increase). Most children came to institutions from biological families (almost 80%). While up to 16% of children were transferred from one facility to another.

Of serious concern are the increasing number of children who are being transferred to institutions from foster families, family-type children's homes and families of guardians. During the academic year 2012/13, there were 117 such cases and this number increased to 233 in the following year. Similarly, the number of institutionalised children under guardianship also increased – from 193 in the academic year 2012/13 to 208 in 2014/15.

As reported by the heads of residential facilities, the number of children who find themselves in institutions following the cancellation of their family placements has been increasing in the past three years. In particular, in 2012/13 as many as 693 children were placed in institutions due to the cancellation of guardianship or care and 27 children were removed from foster families and family-type children's homes. In 2014/15 these numbers increased to 794 and 69 respectively.

In other words, residential facilities currently provide care to 1,084 orphans and children deprived of parental care, who, according to the decisions made by child welfare authorities, are officially placed in foster families, family-type children's homes, or remain under guardianship. And 2,297 children found themselves in institutions because of the cancellation of relevant decisions of child welfare authorities on their placement in family-based forms of care.

The number of children placed in residential facilities whose official placements remain in family-based forms of care (foster families, family-type children's homes, guardianship families), and children whose decisions on placement in family-based care were cancelled

	academic year 2012/13	academic year 2013/14	academic year 2014/15
The number of children placed in institutions, whose official placements remain with foster families and family-type children's homes	117	134	233
The number of children in institutions, who remain under guardianship	193	199	208
The number of children placed in institutions following removal from foster families and family-type children's homes	27	29	69
The number of children placed in institutions following cancellation of guardianship or care	693	685	794

Poverty and lack of parenting skills are the main causes of institutionalisation

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.

UN Guidelines for the Alternative Care of Children, para. 15

Only 9% of children stay in institutions because of the loss of parents or because their parents have been deprived of their parental rights; the remaining children were institutionalised due to social factors. The data, collected during the audit, suggests that the main cause of the placement of children in institutional care is poverty and the incapability of parents to support them.

More specifically, only 491 of 11,108 children in boarding schools for children requiring social assistance are true orphans or children deprived of parental care. Administrators of institutions distinguish the following categories of children:

- Children in need of social support/assistance;
- Children from families in difficult life circumstances, from low-income and socially disadvantaged families;
- Children from disadvantaged families;
- Children from functionally incapable families;
- Children from single-parent/large families;
- Children temporarily placed in institutions at the request of their parents;
- Children from local villages;
- Children from low-income families.

In other words, poverty and/or difficult life circumstances are the main causes of institutionalisation, rather than the actual absence of parents.



THE MAIN REASONS FOR PLACING CHILDREN IN INSTITUTIONS

Causes of institutionalisation from the local authorities' viewpoint

According to interviews with the heads of rayon and city departments and services (18 individuals), the main cause of the placement of children in institutions is poverty, incapability, antisocial behaviour and unemployment of parents. It is followed by the challenges of supporting children with behavioural or learning issues. Children's health was ranked third among causes of institutionalisation.

"As many as 90% of children find themselves in institutions due to poverty and incompetence of parents; 5% are placed in residential facilities due to learning difficulties, 5% because of a health condition."

Interview with the head of the department of education and science

"Parents are unable to maintain their children and cannot provide decent living conditions; children cannot study at school and have poor health. Parents cannot help their kids with their education. Therefore, services persuade a mother to sign an application for the temporary placement of her children in an institution so she can go elsewhere to work. And the children are in a difficult situation anyway."

Interview with the head of the department of labour and social protection of the population

"It is the form master who initiates the transfer of a child to a special boarding school based on his or her academic performance. As a rule, they refer children who do not do well in school or have bad behaviour. It is safe to say that 90% of these are children from problem and low-income families. Their parents do not work, they drink and ignore their children altogether."

Interview with the head of the rayon department of education

The inability to ensure proper support and education for children in their community was identified by respondents as another important cause of institutionalisation. Critical factors in this regard include the lack of qualified specialists and financial resources to create and maintain local services for families as well as to support inclusive education.

"Prevention of institutional placement of children is only possible through active work with parents and families. Who do we have here today? Just "observers" (referring to personnel from children's service). They are only good enough to prepare reports – and there are no trained specialists."

A respondent from the rayon department of education and science

In the course of the study, it was often noted that educators viewed the placement of children in residential facilities as a quick and simple solution that required no additional effort on their part. School staff commonly advised parents to place a child in an institution in situations that did not require such a solution. For example, parents of children with developmental disorders or delays were advised to send a child to an institution, thus revealing an inability of school staff to offer other solutions, even though such situations can be addressed through the development of a special training programme or individual approach. This not only applies to children who fall behind in studies due to developmental issues but also those with discipline problems.

"Teachers in secondary schools are not interested in teaching such children. There should be some motivational factors. Inclusion requires effort, and some just give up."

Interview with a teacher from a specialised boarding school

"I went to the 1st grade of ordinary school and spent one year there – other children made fun of me and beat me up. I was transferred to this boarding school and studied here until the 5th grade. Then I came back to my old school, and the story repeated itself. I was constantly afraid of abuse. And my parents finally brought me back here again."

Interview with a child from a specialised boarding school

CAUSES OF INSTITUTIONALISATION FROM THE STAFF'S VIEWPOINT

In the course of the study we interviewed 40 staff members from selected residential facilities (headmasters, teachers, educators, psychologists, social pedagogues and nurses). When asked to describe the parents of their children 33 respondents mentioned antisocial life, alcohol abuse, extreme poverty, fights and domestic violence as well as child neglect. Only seven respondents pointed to the issue of families being unable to receive assistance from qualified specialists in the areas in which they lived.

Such characteristics of families were given by the staff regardless of the type of institution – special boarding school, boarding school for children requiring social assistance, boarding school of sanatorium-type or baby home.

Overall, staff members of residential facilities believe that the main causes of institutionalisation are the inability of parents to care for their children and the lack of inclusive education in schools for children with complex developmental disorders or health issues.

CAUSES OF INSTITUTIONALISATION FROM THE PARENTS' VIEWPOINT

During the study nine focus group discussions were conducted with parents of children who are currently in residential facilities, parents of children with disabilities and families experiencing difficult life circumstances (79 individuals). Part of the discussions focused on the causes of the institutionalisation of children.

"I grew up in the institution myself. And I can assure you after I placed my son in this place he immediately felt better. I remember myself at his age when I attended regular school I suffered from humiliation. Teachers always degraded me because of my bad clothes and lice. Of course, while in the institution I always wanted to talk to my parents, to feel their warmth and affection. But I was just like other kids. My son really likes his life in this facility – his grades have improved. I had no time to deal with him at home, but in the institution they taught him how to clean the room, to make a bed."

Participant of a focus group for parents of institutionalised children

Below are several statements voiced by the staff of residential facilities:

"As a rule, the main cause of placing children in our facility is the material poverty of families. Some parents really care for their kids but they simply cannot feed them. On the other hand, there are families that completely disregard their children – they are glad to transfer their responsibilities to the institution."

A social pedagogue from a boarding school for general education

"Poverty, unemployment and alcoholism (especially in villages) are among the main reasons for the placement of children in institutions. All these lead to fights and scandals in families."

The headmaster of a special boarding school

"There are four categories of parents: 1) those who are afraid of their child's diagnosis; 2) those in poverty; 3) those with alcohol or drug issues or with HIV; and 4) those who just don't want a child."

The head of a children's care home

"Quite frequently parents are starving as well. And this is the cause of orphanhood. If you remove baby homes, this won't resolve the problem. We need to understand why this mother is dirty and hungry."

A psychologist from a baby home

Specifically, parents who placed their children in institutions identified the following reasons for their decisions:

- Children were not doing well at school and had problems with discipline (and teachers helped to place children in institutions);
- Difficult family situation: lack of money and employment, conflicts and fights as well as domestic violence.

Some focus group participants admitted that they couldn't cope with their children's challenging behaviour. This reason was mentioned predominantly by single mothers and former residents of residential facilities.

"My child could not "keep up" with the school programme. And a teacher came up to me and openly declared that no one paid her extra fees for such children. So the school just moved my child's documents to the residential facility – and this is how we found ourselves in the institution."

Participant of a focus group, a mother of a child staying in a special boarding school

Parents who raise children with disabilities mentioned several key reasons for their decision to place their child in institutional care. These include the absence of rehabilitation services in their local area, the inability to leave a child alone during working hours and the lack of funds available at rayon level to provide treatment.

“There is absolutely nothing in our village or in the rayon centre – no specialists, no special classes or groups. It is virtually impossible to find a speech therapist or neurologist. You have to travel to the oblast centre but this is quite expensive. Mothers have to lift children and they grow heavier. We need just minimum services – at least some small support centre in the rayon.”

Mother of a child with a disability

“We have no medical specialists or specialist doctors – no neurologists, ophthalmologists, recreation therapists. I think we do have one mental health specialist but it is impossible to get an appointment. Teachers in school have no idea how to work with children with special needs or how to assess their knowledge. They follow one school curriculum so parents are forced to place their kids in institutions.”

Mother of a child with a disability

According to the participants of focus groups of families in difficult life circumstances, the main reason for a child’s placement in a residential facility is the inability to obtain assistance and support from social services in the community. Support from social workers is largely limited to controlling how families spend their material assistance. When asked what would force them to send their children to institutions under the present-day conditions almost all respondents mentioned the decline of their families’ financial status. For them, institutionalisation is often seen as a way to reduce their financial burden. The second reason mentioned was the deterioration in a parent’s health.

It can be assumed that in some cases the reason for placing a child in an institution is a parent’s desire to make their lives easier and to hand over the responsibility for their child’s education and development to someone else. This also includes poor parental competence and their unwillingness to assume responsibility for their children. While analysing responses of parents who placed their children in institutions we found that many of them expressed displeasure with all services and personnel of institutions, never taking a critical look at their own parental role and competence.

In summary, we can conclude that by providing comprehensive support to families living in poverty, building parental capacity, promoting inclusive education and ensuring the availability of local services and specialists to support children and families, it is possible to avoid placing children in institutions and enable them to grow and develop in families and communities.



Below are some statements and claims voiced by these parents:

- “They keep on stealing things from children in this institution. I called a teacher and asked where my kid’s jacket is. And she tells me that they are doing the laundry.”
- “Children run away from this institution and so did my son. I even went there to find out what was going on and why he was afraid to stay there.”
- “I also asked the teacher why they make children walk around the village and collect scrap metal. My son also told me that he went with his teacher to help her plant her vegetable garden.”
- “I came to visit my kid over the holidays and he has a black eye. He told me that older students beat him up and the teacher knows nothing. The boy was sick and they didn’t even call me!”

Other ways of filling institutions

Our observations exposed a number of hidden causes which led to the institutionalisation of children. These causes are driven by the system’s survival. The very existence of institutions forces their personnel to “recruit” children and to issue dubious diagnoses.

“Sometimes parents who take their children away for holidays fail to bring them back to school in time. In these cases staff members travel to pick a child up and bring him/her back to the institution.”

Interview with a social pedagogue from a boarding school for children requiring social assistance



While analysing the data from 663 residential facilities, we found that there are 9,455 separate sibling groups which total 20,058 children. Of them:

- 2,759 sibling groups (6,271 children) stay in special boarding schools;
- 1,256 sibling groups (2,815 children) live in sanatorium boarding schools.

Judging from this data, many families have children with identical physical or mental development disabilities or identical health issues. Experts believe that in real life such situations are virtually impossible.

Grounds for placing children in residential facilities

	The number of children	%
Application of parents and the conclusion of the psychological, medical, and pedagogical commission	43,464	43,5
Application of parents or guardians	38,168	38,2
Decision of relevant child welfare authority and the conclusion of the psychological, medical, and pedagogical commission	4,195	4,2
Decision of relevant child welfare authority	5,096	5,1
Other (transferred from other institution)	7,993	8,0
Application of parents displaced from temporarily occupied territories of Ukraine, areas of anti-terrorist operation and settlements located along the front line	999	1,0
Total	99,915	100



“What would you tell a person who had sent you to the orphanage?” – “I would ask her why this diagnosis? I wish her children found themselves in some institution and I would like to hear what they tell her in about ten years! But no, she won’t do it to her kids, she knows too well what it is like to live here and she does not care.”

Interview with a former student of a special boarding school

Residential facilities are administered by different ministries; as a result, decisions concerning the placement of a child in a specific institution are made according to sectoral norms and procedures, rather than in line with a child's real needs.

According to information provided by the administrations of residential facilities, almost half of children (43% of the total number of institutionalised children) were placed in institutions at the request of their parents and recommendations from psychological, medical and pedagogical commissions (PMPC) while 38% were placed in institutions only at the request of parents. A much smaller number of children found themselves in institutions due to the decision of relevant child welfare authorities 4% with PMPC conclusion and 5% without. 1% of children were placed in institutional care at the request of parents displaced from temporarily occupied territories of Ukraine, areas of anti-terrorist operation and settlements located along the front line.

PMPC recommendations are mandatory for placing children in special boarding schools, education and rehabilitation centres and other facilities.

Conclusions issued by oblast PMPCs are mostly formal, containing short recommendations on special education; they include no individual recommendations on the forms and methods of learning or recommendations concerning individual rehabilitation or development programmes. The diagnostic procedure, which serves as a basis for a PMPC conclusion, usually takes 20–30 minutes. A child performs various logical or mathematical tasks according to their age. The procedure is similar to an exam or interview. PMPCs do not consider a child's history, living conditions or capability of parents; similarly, commissions do not request additional information from local social services. This means that a recommendation on the place of study, and therefore the place of a child's residence, is issued quickly and superficially.

The main document permitting the placement of children in boarding schools for children in need of social assistance is the certificate of the material status of the family, issued under the Law of Ukraine "On the State Social Assistance to Low-Income Families". During the study, it was found that this document was missing in the majority of files of institutionalised children. Instead, Housing Inspection Reports signed by the village head, letters from village councils confirming the need to refer a child to an institution and similar documents were used as grounds for institutional placements.

"We found different documents stating that the child may be placed in the institution, such as certificates on the family composition, Housing Inspection Reports signed by the village head or local deputies, certificates from the village councils confirming unemployment of parents, confirmation of low-income status etc. (most of them were issued two or three years ago). The statute of the facility has no procedures regulating the placement of children."

Review of personal files and constituent documents of a boarding school

"Parents cannot obtain necessary certificates. They do not work and are not registered with employment centres. In most cases, we ask village councils to issue necessary certificates for us. 80% of parents drink and don't have normal housing."

Interview with a headmaster of a boarding school

"The institution hosts orphaned children, including those under guardianship, from large, low-income families and local children."

From the data collection form

According to Standard Provisions¹³, children can only be referred to baby homes with the authorisation of a child welfare authority regardless of whether a child is placed at the request of the mother or transferred from a health facility. However, the study found that in some cases referrals are made without the authorisation of the child welfare authority. Moreover, in many instances, there are no recorded decisions of an authority extending the child's stay in the institution. Because of this children live in these facilities for years; they cannot return to their parents, and cannot be transferred to family-based forms of care as they lack the status of an orphan or a child deprived of parental care.

The placement of children in care homes or sanatorium-type boarding schools follows similar procedures. Parents or guardians prepare a set of documents, prescribed by Standard Provisions for these types of institutions. Having received and reviewed these documents, the relevant departments of an oblast state administration issue referrals to an appropriate residential facility.

"Parents or guardians gather necessary documents, while a child undergoes a medical examination. Then the oblast department for social protection issues a referral to the special residential facility."

Interview with the head of the department of labour and social protection of the population



We can conclude that current mechanisms for placing children in residential facilities are quite general. None of the provisions regulating the procedure for issuing referrals demand information on whether a child and his or her parents receive assistance at their place of residence or whether the placement is truly the only possible solution for the child. In addition, placement decisions are often not consistent between different agencies and services, and a child's participation in such decision-making is not stipulated in most cases. Current regulations and procedures for referring children to residential facilities contradict each other; they are not viewed as mechanisms that contribute to the separation of children from their families. Given the fact that 598 facilities are oblast-level institutions, referrals are issued by the oblast departments. Under such arrangements, it is very difficult to make sure that the best interests of the child are duly taken into account in decisions that affect the child's fate.

¹² Medical and pedagogical commissions were introduced in 1949 as special bodies to select students for special needs schools. They were composed of the members of the Communist party, teachers and doctors. The word "psychological" was added in 1978.

¹³ Order of the Ministry of Health of Ukraine No. 123 as of May 18, 1998 "On approving Standard Provisions on the baby (Infant) home".

¹⁴ Order of the Ministry of Education and Science of Ukraine No. 363 as of June 12, 2003 "On approving Standard Provisions on the boarding school of general education, and the sanatorium boarding school of general education".
Order of the Ministry of Labour and Social policy of Ukraine No. 173 as of April 2, 2008 "On approving Standard Provisions on the children's care home, youth section of the care home within the system of labour and social protection of the population".



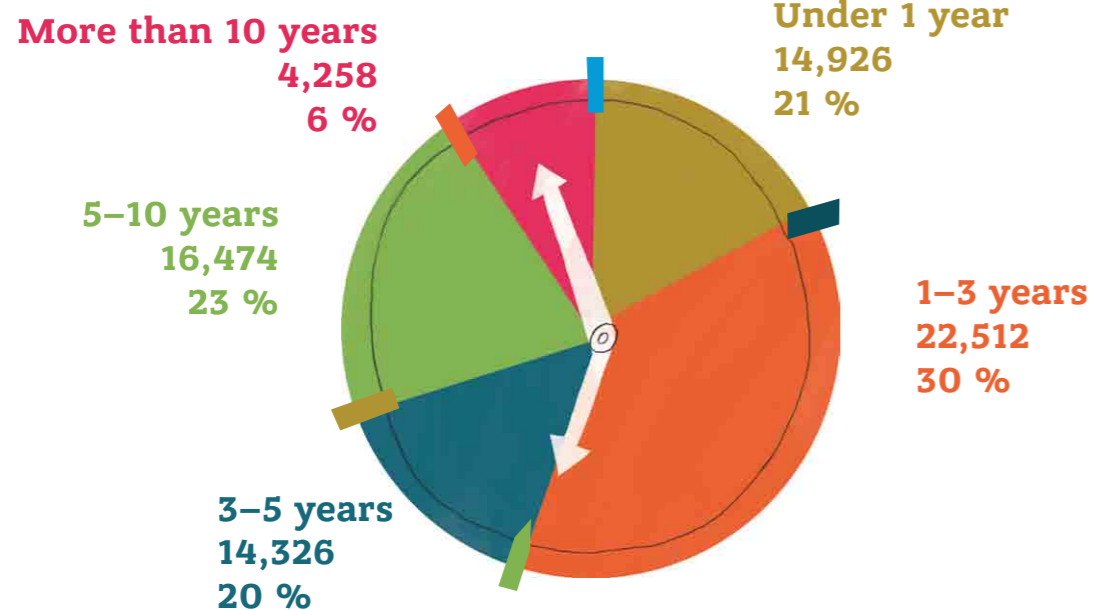
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The duration of children's stay in institutions and causes of exit. Efforts of staff aimed at returning children to their families and schools at their place of residence

Removal of a child from the care of the family should be seen as a measure of last resort and should, whenever possible, be temporary and for the shortest possible duration. Removal decisions should be regularly reviewed and the child's return to parental care, once the original causes of removal have been resolved or have disappeared, should be in the best interests of the child.

UN Guidelines for the Alternative Care of Children, para. 14

Duration of children's stay in institutions



ALMOST 50% OF CHILDREN REMAIN IN INSTITUTIONS FROM 3 TO MORE THAN 10 YEARS



MOST CHILDREN REMAIN IN INSTITUTIONS UNTIL GRADUATION

Almost **50% of children** remain in institutions for extended periods of time – from three to more than ten years. Data analysis shows that the placement of a child in a residential facility is a final decision in the majority of cases. As a result, most children do not return to their families or schools at their previous place of residence. As noted previously, almost 91% of children in orphanages have parents who are not deprived of parental rights; this is why children do not return to their families on the one hand and cannot be adopted or placed in family-based care on the other as they do not have the legal status of children deprived of parental care.

While analysing the departure of children from residential facilities, it was found that **52% of children leave institutions after graduation or upon reaching the age limit (established individually for each type of institution)**, while 11.5% are transferred to another type of facility.

52% OF CHILDREN LEAVE INSTITUTION AFTER GRADUATION



Ways of leaving residential facilities

	Sept. 01, 2012 – Sept. 01, 2013	Sept. 01, 2013 – Sept. 01, 2014	Sept. 01, 2014 – Sept. 01, 2015
Completion of education/term of placement (according to statute)	12,702 52.1 %	12,624 51.2 %	12,400 52.1 %
Return to biological family and school of general education at their place of residence	6,785 27.8 %	6,809 27.6 %	6,644 27.9 %
Transferred to another facility	2,228 9.1 %	2,728 11.1 %	2,745 11.5 %
Adoption	1,308 5.4 %	1,238 5.0 %	1,040 4.4 %
Placement under guardianship or care	519 2.1 %	510 2.1 %	453 1.9 %
Placement in a foster family	495 2.0 %	388 1.6 %	250 1.1 %
Placement in a family-type children's home	237 1.0 %	199 0.8 %	147 0.6 %
Death	107 0.4 %	143 0.6 %	107 0.4 %
Total	24,381	24,639	23,786

The number of children returning to their families remains virtually unchanged in the three-year period between September 2012 and September 2015. Additionally, there has been a reduction in the number of children who leave institutions through adoption or placement in family-based forms of care.

Another alarming trend is that an increasing number of children are being transferred from one institution to another (a 3% rise in the past three years). The study's findings show that 11.5% of children are transferred to other types of facilities, mostly in different communities and in some cases this leads to the separation of siblings.

Children's care homes are places designed for children with mild and severe mental disabilities. The legislation does not determine a maximum term of placement. In reality, children stay in these facilities well beyond any reasonable term. Moreover, they can live there even after reaching full legal age as legislation allows these institutions to establish youth sections. As a result, people can remain in the same facility up to the age of 35. After reaching this age, residents are transferred to residential facilities for the elderly. Therefore, some people may live their entire lives in residential care settings.

"I went to school in the morning. On my way back I saw girls running towards me and shouting "They've taken your brother to another children's home!" I dropped my bag and ran. I started calling his name, and they told me "Stop screaming, they already took him away." I cried all night and kept thinking why didn't they tell me? I went to school and couldn't even say goodbye!"

Memories of a former resident of a children's home

"We teach our children to take care of themselves. We know that our children will never leave residential care and never live in society. After they reach 35, they will be transferred to other institutions."

Interview with a staff member from a care home

"Children are referred to nursing homes for patients with chronic mental illnesses. They adapt badly under new conditions – many die within the first two years."

Interview with a member of staff from a care home

Institutions do not work towards returning children to families

The institutional care system in Ukraine does not view a child's return to a family environment as one of its priorities. Therefore staff members do not work with parents to return children to their biological families or place them in family-based forms of care.

There are gaps in standard provisions as well, such as unclear grounds and terms of children's stay in institutions. Through the study, it was discovered that a significant proportion of children are "overexposed" to institutional care.

According to standard provisions, a child can be placed in a sanatorium-type boarding school for no more than 12 months and this term can only be extended in exceptional cases. However, according to the audit results, more than 40% of children stay in these facilities for three to ten years.

"Children receive substantial support from sponsors (clothes, future studying in vocational schools). Most parents are inadequate; they don't even have money to come and visit their kids, let alone their education. When children get here, the children eat everything and ask for more – they are hungry! Some children have medical conditions, but the main reason is their parents. There's no point in taking children back home."

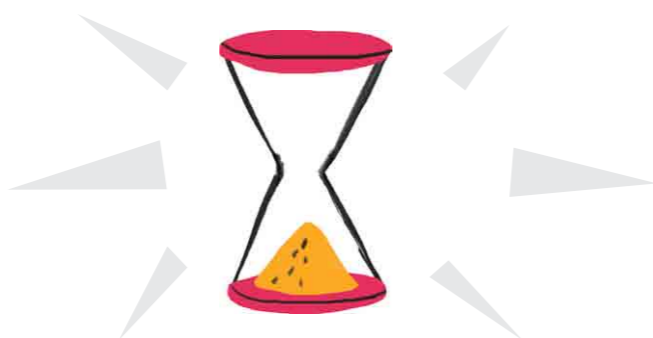
Interview with an educator from a sanatorium boarding school

Similar situations with extended terms of stay for children in residential facilities and the lack of any action by administrations of institutions and local child welfare authorities are common with other types of institutions too. For example, 58% of children placed in baby homes at maternal request stay there much longer than the six months prescribed by law. In cases of ungrounded refusal to pick up a child within the established term, and refusal to participate in child-rearing without a reasonable excuse, the administration has the right to deprive such parents of their parental rights through the court. In practice, a mother may submit another request, and her child would remain in the institution for another six months. The law does not define the number of such repeated requests and as a result, children may stay in baby homes for four to five years.

"In children's files, we frequently found copies of letters to mothers asking them to visit their kids. We also found maternal requests signed a year or two ago asking the institution not to put children up for adoption or to extend the term of stay. We also found copies of letters to child welfare authorities requesting an extension of the term of stay because the mother allegedly is in difficult life circumstances. There are also responses from child welfare authorities stating that the mother no longer lives at said address."

Analysis of children's files in a baby home

In residential facilities for children requiring support for mental or physical disabilities, staff **do not work towards returning children to their biological families and their subsequent education in schools in their local area.** Despite the fact that after such rehabilitation a child could return to a family and to school in his/her community, most students remain in institutions for years: 27% stay for five to ten years and 17% for three to five years. Standard provisions for this type of institutions clearly indicate that in the case of recovery and upon conclusion of a relevant PMPC a child shall be transferred to another educational establishment at the place of his/her residence or by parents' choice. In practice, the staff of these institutions are not encouraged to work towards the prompt integration of a child into an ordinary school setting as the number of children returning to parents and to public schools is not an indicator of the quality and efficiency of their work with a child. As a result, only a few return to their families and to regular schools from such institutions. According to staff, most children cannot return to their families due to antisocial behaviour and poverty of their parents rather than developmental issues.



"80% of our children come from families where parents drink and do not work. They don't need children. So children call us "mommies". Last year sponsors bought suits and dresses for our graduates. They were so beautiful, but most parents never showed up for the senior dance."

Interview with a social pedagogue from an education and rehabilitation centre

As is the case with other institutions, students in boarding schools for general education for children requiring social assistance typically stay until graduation. In the course of the study, it was not possible to identify a single family that received support from social worker after the placement of a child in an institution due to difficult life circumstances. Moreover, social services have no information on families who have sent their children to residential facilities and do not monitor these placements. In turn, these children are not registered with services on children's affairs. It can, therefore, be assumed that institution staff, social workers and child welfare authorities in relevant communities do not work with parents to overcome difficult circumstances and crisis, and to return children to families.

"We organise teacher-parent conferences but many parents do not come. We summon these parents and conduct individual sessions. There are many socially disadvantaged, low-income families; many parents drink. We have to control them; we need social services to function! Parents simply booze away their children's money."

Interview with a teacher from a boarding school for general education for children requiring social assistance

"It is necessary to work with parents. We need to show them alternatives in order to preserve families for children. Here we cannot work with parents – all work should be done with them locally. No one's working with them. Children feel stressed – they become aggressive after seeing parents. You should agree: we can help children by helping their parents. If parents had any support we could avoid many problems."

Interview with a staff member from a boarding school for children requiring social assistance

Most staff of residential facilities interviewed during the study pointed to the need to work with parents and immediate relatives of children, but don't see that they have a role in this process. Several reasons were stated for why this work can't be done by institution personnel: parents live too far away and it is not possible to work effectively over the telephone; workers at institutions know nothing about children's families; they are not required to work with families as consultations are provided at the request of families; parents are often intoxicated when they attend meetings.

"We work a lot with parents but usually over the phone."

Interview with a social pedagogue from a special boarding school

"It is poverty that usually prevents parents from seeing their children – they have no money to get here (80% of children come from rayons). Social workers poorly perform their duties – there's no proper support."

Interview with a chief physician of a baby home

"We talk to parents when they take their children home for holidays. It is necessary that services on children's affairs, social services, village councils work with them."

Interview with a social pedagogue from a sanatorium boarding school

"One conversation is not enough for parents. They need this "social crutch". A mother cannot care for her children but she still wants to take them away. Therefore, there should be a trainer or some kind of social nurse who could work with the family. They would help the family to get children to school or kindergarten – they would support the mother, teach her how to spend money, how to improve parenting."

Interview with a psychologist from boarding school

"Social services should work actively. It is also necessary to control how the child's money is spent. Here we play the role of parents."

Interview with an educator from a boarding school for general education

Therefore, it can be assumed that an extended stay, or, in fact, a child spending their life in an institution is primarily due to inertia by both residential facilities and child welfare authorities. The lack of requirements regarding parental involvement in caring for children during their stay in institutions, as well as the absence of performance indicators of staff based on the number of children placed in schools in communities also contribute to this situation. Additionally, the failure to address issues related to the status of a child deprived of parental care (where parents are unable to fulfil their duties) leads to significant proportions of children who cannot be adopted or placed in family-based care.



6

Occupations of staff in residential facilities. Consistency of staffing and established qualifications of staff within specific functions

The distribution of working personnel

AS OF SEPTEMBER 1, 2015



Support staff/attendant
21,165 – 31.2 %



Teacher
12,548 – 18.5 %



Educator/tutor
11,905 – 17.6 %



Assistance nurse
4,591 – 6.8 %



Librarian
525 – 0.8 %



Pedagogue-facilitator
499 – 0.7 %



Social pedagogue
430 – 0.6 %



Music teacher
275 – 0.4 %



Nurse
4,504 – 6.6 %



Administrative staff
3,476 – 5.1 %



Assistant teacher
3,349 – 4.9 %



Special education teacher
1,296 – 1.9 %



Psychiatrist
117 – 0.2 %



Neurologist
74 – 0.1 %



Recreation therapist
45 – 0.1 %



Physiotherapist
33 – 0.0 %



Head of hobby group
862 – 1.3 %



School psychologist
700 – 1.0 %



Paediatrician
686 – 1.0 %



Speech therapist
679 – 1.0 %



Orthopaedist, trauma specialist
33 – 0.0 %



Other staff
22 – 0.0 %

Total
67,814

As of September 1, 2015, residential facilities in Ukraine employed **67,814** individuals. Support staff make up the largest proportion of personnel – 31% (including 42% in sanatorium-type boarding schools and 37% in specialised boarding schools). The second most widespread profession is teachers and educators (18% each). The proportion of nurses and junior medical staff is 7% each. School psychologists make up only 1% of the entire staff of institutions, while the proportion of other professions is even lower. The size of administrative staff ranges from 4 to 7%.

Proportions of administrative and support staff in institutions of different types

AS OF SEPTEMBER 1, 2015

Residential facility	Total number of staff	Administrative staff	Administrative staff, %	Support staff	Support staff, %
Baby (infant) home	6,881	343	5.0	1,050	15.3
Children's home	1,977	166	8.4	591	30.0
Children's care home	5,278	379	7.2	1,439	27.2
Boarding school of general education	9,149	444	4.8	3,586	39.0
Educational complex	3,202	142	4.4	1,044	33.0
Education and rehabilitation centre	5,694	247	4.3	1,595	28.0
Sanatorium boarding school	6,782	245	3.6	2,758	41.0
Specialised boarding school	7,565	417	5.5	2,743	36.0
Special boarding school	21,286	1,093	5.1	6,359	30.0
Total	67,814	3,476	5.1	21,165	31.0

According to the heads of residential facilities, of 99,915 children currently living in institutions, **91,410** have developmental disorders or health issues. Children with mental disabilities make up the largest proportion 20,196 (22%); 13,148 (14%) have speech disorders and 9,753 (11%) suffer from delayed mental development. Children with Down's syndrome and deaf-blindness make up 0.9% and 0.1% respectively.

Types of disorders in children living in institutions

Mental disability 20,196 – 22.1 %	Musculoskeletal 6,931 – 7.6 %	Chronic non-specific respiratory diseases 2,927 – 3.2 %	
Speech disorder 13,148 – 14.4 %	Cardiovascular diseases 5,791 – 6.3 %	Inactive (latent) forms of tuberculosis 1,296 – 1.4 %	
Delayed mental development 9,753 – 10.7 %	Scoliosis 5,683 – 6.2 %	Autism 882 – 1.0 %	
Vision disorder 9,034 – 9.9 %	Hearing disorders 3,988 – 4.4 %	Down's syndrome 831 – 0.9 %	
Neuropsychiatric diseases 7,545 – 8.3 %	Chronic non-specific diseases of the digestive system 3,246 – 3.6 %	Diabetes mellitus 99 – 0.1 %	
		Deaf-blindness 60 – 0.1 %	
		Total number of children with disorders 91,410	

Accordingly, 351 of 663 institutions were built specifically for children with physical and mental disabilities, namely 218 special boarding schools, 57 education and rehabilitation centres, 26 specialised baby homes and 50 care homes. The establishment of these institutions was justified by the assertion that these children could not receive qualified assistance in their communities due to the lack of relevant specialists, services and inclusive education.

However, the staffing structure and the existing personnel in these residential facilities cast doubts upon their ability to meet the developmental needs of the children. For example, there are almost 100 children to each speech therapist; almost 30 children per special education teacher and 118 children to one psychologist.



As for specific types of institutions, the situation is as follows:

111 of 218 special boarding schools do not have special education teachers and 74 facilities lack speech therapists. Overall, 28 psychologists, 38 speech therapists and only one special education teacher work in 50 care homes. These facilities desperately need professional educators and specialists. Paediatricians make up only 0.64% of the total staff of care homes. The same is true for educators (10.7%) and teachers (0.29%). Psychiatrists are available in every second facility and there is only one special education teacher in 50 facilities.

Sanatorium boarding schools that are subdivided into types by the profile of children's diseases, also lack qualified health professionals – only one in five schools for children with non-specific diseases of the digestive system has a gastroenterologist. Sanatorium schools for children with neuropsychiatric diseases lack neurologists and facilities for children with cardiovascular diseases do not employ cardiologists. It is telling that 43% of personnel from these institutions are support staff.

Children in baby homes requiring special, individual attention in terms of care and development are mostly cared for by health professionals, as these institutions belong to the national health system. As of September 1, 2015, baby homes with a total number of 2,790 children employed 6,986 people. The staff included 2,009 assistant nurses; 2,248 nurses; 1,049 attendants; 344 administrative workers, and 241 doctors of various profiles. In other words, 84% of the staff in baby homes are administrative, technical and medical personnel. Yet there are only 122 speech therapists and 44 special education teachers working in these institutions. The proportion of educators and other pedagogical staff is minuscule at 14%.

The lack of standardised training for staff on the rights of the child and application of international standards of care and development of institutionalised children

During the study, information was requested as to whether staff of institutions received advanced training. According to the heads of residential facilities, advanced training applies exclusively to medical and pedagogical workers every five years. No training of this kind is conducted with other categories of workers.

During interviews as many as 90% of staff surveyed in institutions admitted that they have never received any form of training on children's rights, the understanding of international care standards or innovative methods of working with children. In some institutions, workers took part in educational sessions on child development but these were usually conducted by non-governmental organisations.

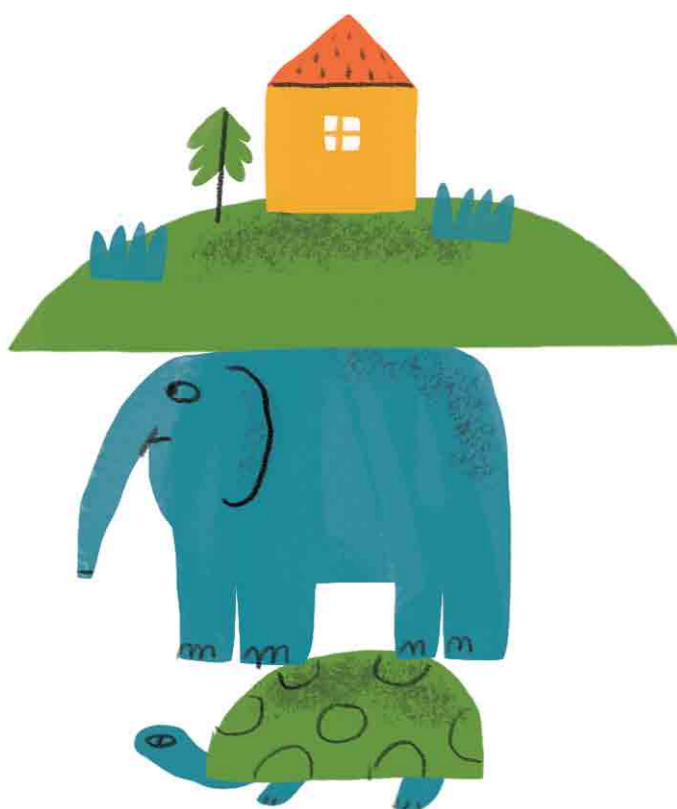


"During 2013 – 2015, 34 staff members of our institution completed retraining and advanced training courses for medical and pharmaceutical professionals but not a single worker participated in training on the protection of the rights of children, prevention of violence against children and child development."

Results of a survey in a baby home

"In April, several of our workers attended the training "Key aspects of assistance to orphans and children deprived of parental care", organised by the International Leadership Centre. They paid for this training themselves. I am not going to search for money to spend for their training."

Interview with the director of a sanatorium-type boarding school



The shortage of methods and techniques for working with children, particularly those with developmental disorders, is felt most by staff members from care homes, baby homes and special boarding schools.

"We understand that we are lacking rehabilitation programmes to work with children. Anything we try to introduce or change or improve we find ourselves. Our workers are ready to learn more about how to work with children, to participate in training on child development. All events of this kind are conducted by NGOs – there are no state programmes."

Interview with the director of a care home

"For how many years do we have children's care homes? I think, the government once created these institutions to hide people with disabilities and forgot about them. It is sad that Ukraine never recalled these children. We have no methodologies, no true reforms. People in institutions are one-on-one with these kids and we do all we can. Many children have potential to develop – we see that but what can we do?"

Interview with a staff member of a care home

According to data collected during the study, the average age of staff in institutions is 45. However, in some types of residential facilities more than half of staff members are of pre-retirement and retirement age.

"Almost half of the institution's full-time staff are of pre-retirement and retirement age (83); the other 75 are aged 30 to 50. Only 21 staff members are younger than 30. As for work experience, 31 staff members have worked in the institution for more than 16 years; 57 from eight to 15 years; 85 from one to seven years and six staff members for less than a year. The institution also employs relatives, e.g. a few generations of one family."

Information collected from a baby home

It can be concluded that the staffing structure of institutions (including hourly workload and shift work) and the availability of specialists are inadequate to ensure the appropriate level and quality of childcare and therefore the development of children both in terms of education and rehabilitation. Personalised approaches to identifying a child's needs and the delivery of individual work with children, as one of the main objectives of institutions, remains purely declarative within current staffing levels and the overall operation of institutions.



7

**Analysis of the progress
of institutional care reform**

Reform of institutions comes down to changing the facility name or type

As noted previously, most residential facilities were founded long before Ukraine's independence and were designed for 200-400 residents. Later, because of the reduced density of the child population in Ukraine and due to the active development of family-based care for orphaned children and children deprived of parental care, the number of children in this category in institutions dropped substantially. During this period (2007-2014) "active work in the area of the reformation of residential facilities for children" was started across the country.

Reformation of institutions

The status of reformation	Number of institutions	% of the total number
Reformed	345	52
Planned to reform	188	28
Not planned to reform	130	20
Total	663	100

Timing of the reformation of institutions

Timing of reformation	Number	%
Before 1999	29	8
2000-2009	70	20
2010-2016	188	54
Not indicated	58	17
Total	345	100

According to the heads of residential facilities, as many as 345 institutions have been reformed to date - 52% of the total number of institutions. Most facilities underwent "reformation" from 2010 - 2016 (188 or 54%). In addition, the heads of 188 residential facilities reported that they are planning to reform in the near future.

During the study we asked the heads of residential facilities for information about ongoing reform and ensuing changes in the work of each institution. In their responses the heads of institutions mentioned the following:

"we started pre-school groups";

"the type of facility has changed: an orphanage was reformed into a special or sanatorium boarding school or became an educational complex";

"the special school became an education and rehabilitation centre";

"it used to be a facility for level I-II, now it is the facility for level I-III";

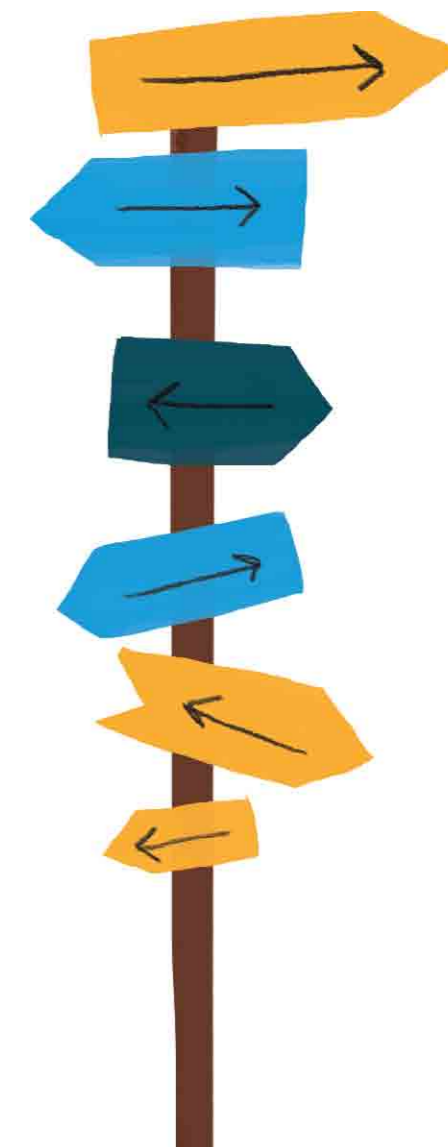
"the baby home became a specialised baby home";

"we became an affiliation of another residential facility";

"the name has changed".

The adoption of the State Targeted Social Programme for reforming the system of facilities for orphaned children and children deprived of parental care in 2007 sparked the reformation of the system. As a result, institutions for orphans and children deprived of parental care were converted into other types of facilities; buildings underwent modernisation along with the "creation of family-like conditions".

For administrators of residential facilities, family-like conditions mean "creating opportunities for children from one family to live together in one room or block", "setting up rooms for two - three children with a shared hall". As a result, reforms came down to physical or material improvements, while the regime and operation of the institution remains the same. Financial resources invested in equipment and repair works failed to bring any real change in the standard of care provided for children. Services are still provided in a centralised manner; children continue living in isolation, and their needs are still ignored.



Approval of changes or adoption of new standard provisions for institutions by sectoral ministries enabled institutions to claim they had reformed. For example, changes to standard provisions for children's care homes and youth sections, approved in 2008 by the Order of the Ministry of Labour and Social Policy, allowed these types of institutions to establish facilities for young people with disabilities aged 18 to 35 years. This enabled them to claim the institution had been reformed but at the same time, nothing has changed in the operation or staffing structure of these institutions or conditions of stay for children.



In 2012, the Ministry of Education and Science, Youth and Sports of Ukraine issued an order approving provisions for education and rehabilitation centres. According to this order, its structure may now include pre-school groups for children aged two to seven years, as well as classes for children with disabilities. But at the same time, this regulation also preserved existing special boarding schools. Following the approval of said provisions, special boarding schools immediately started to transform into education and rehabilitation centres. For example, during 2012-2013 as many as 27 institutions in the Dnipropetrovsk oblast became education and rehabilitation centres. This allowed them to admit children of different ages and with different disabilities into one facility. Such rapid reform raises questions concerning the experience and qualifications of personnel to effectively work with children with a range of conditions within the same facility.

The Melitopol oblast boarding school for general education #1 level I-III was renamed the Melitopol sanatorium boarding school for general education for level I-III (Zaporizhya oblast).

The Yasynutsya special purpose children's home was renamed Yasynutsya education and rehabilitation centre (Rivne oblast).

The Zalishchyky oblast special boarding school of general education level I-II was reorganised into the Zalishchyky oblast multi-disciplinary education and rehabilitation centre (Ternopil oblast).

The Kryvyi Rih city children's home (Dnipropetrovsk oblast) was reformed into an education and rehabilitation centre. Currently the structure of this institution includes a pre-school section for children requiring rehabilitation for physical and mental development, children living with HIV/AIDS, and mentally disabled children; a residential unit for orphans and children deprived of parental care from the age of three; a special boarding school for general education for children requiring rehabilitation for physical and mental development; and a rehabilitation department.

The Uman oblast children's home for pre-school and primary school age children of mixed compensatory type was reorganised into the Uman education and rehabilitation centre (Cherkasy oblast).

The findings of the study indicate that **not a single facility for children stopped being an institution as a result of the reforms**. In other words, reforms were largely aimed at expanding the categories and age of children that can be institutionalised. Even after the reforms, residential facilities remain regional public institutions that isolate children from their families, communities and society.

Another popular approach to reforming the system of institutions is called **"network optimisation"**. During the study, examples were found of residential facilities becoming "affiliated branches" of other institutions or several facilities uniting to become a single educational complex. The abolition of certain residential facilities occurred through merging institutions or by transferring children from one facility to another.

In accordance with the decision of the Sumy oblast council "On the liquidation of the communal facility of the Sumy oblast council – Romny boarding school for general education for level I-III", the property was reassigned as the communal facility "Sumy oblast residential gymnasium for talented and gifted children". Therefore, Romny boarding school became the Romny department of the Sumy oblast gymnasium.



The reform of residential facilities has been conducted disjointedly by each parent ministry. Specialisms have become blurred, enabling institutions to admit additional categories of children. As a result, different institutions duplicate functions and serve the same categories of children. This situation has created "competition" among institutions regarding the placement of certain children.

"We completed the overhaul of our children's home and we are ready to admit children. Why don't they refer kids from the baby home or the centre for social and psychological rehabilitation? They keep children beyond established terms on purpose, even though we offer much better conditions."

The head of the board of trustees of a children's home

Recently, we also have seen the process of renaming and transforming existing institutions into specialised boarding schools for gifted and talented children and special residential schools for gifted orphans or children from low-income families.

Borzna boarding school for general education was transformed into Borzna specialised boarding school for level I-III for advanced learning of specific courses for orphans and children deprived of parental care, children from large and low-income families, children of single mothers, children affected by the Chernobyl nuclear accident and children with disabilities (the Chernihiv oblast).

Kyiv city boarding school for general education #14 was reorganised to become a specialised boarding school for level I-II with advanced artistic and aesthetic education. The school admits children from low-income and large families, children of single parents, orphaned children and children deprived of parental care, children from families arriving from temporarily occupied territories of Ukraine and ATO zone as well as children from families in difficult life circumstances.

This evidence clearly illustrates the lack of a single vision and common requirements in reforming the country's child protection system in general and in residential facilities in particular. The current reform process allowed institutions and their "parent" ministries to preserve the *status quo* by simply changing the names of residential facilities and then to report on successful reforms. Unfortunately, there are no examples of a genuine transformation of an institution into a set of services¹⁵ or its transfer to the local community for other social or educational purposes. The interests of the system, rather than those of children, are at the heart of all current reforms.

"We have an oblast-level boarding school for orphans and children deprived of parental care in our town. More than 400 children used to live there; today it is home to less than 50. It is almost empty and we have repeatedly raised the issue of transferring these buildings to the ownership of the municipal administration. We want to move the city school there (it is a huge problem for the city, as the current school is located in a barrack-type building and works in two shifts). The bedroom block is a perfect place for the centre of social support and another section could be used as residential space for public sector employees. We've been discussing this issue at oblast level for three years but no one wants to give up this regional property. We do not understand why anyone would want to keep this "monster" when it is possible to easily set up two small group homes for those children who remain in this institution."

Interview with the deputy mayor

¹⁵ There are two exceptions, however. Hope and Homes for Children in collaboration with the local authorities of two rayons developed a model for closing institutions with the simultaneous development of family-oriented community-based services. In one of the rayons, the premises of a former child institution accommodated a kindergarten, and in the other – the rayon centre of social support for children and families.



8

Capacity of the child protection system to develop support services for families with children

The level of identification of children and families in difficult life circumstances

The current socio-economic situation in Ukraine can be described as a deepening economic crisis with growing unemployment, high inflation and large numbers of the population becoming impoverished. These trends have led to an increase in the number of families and children who find themselves in difficult life circumstances and more children face the risk of neglect from their parents. This situation requires all levels of government to undertake appropriate action to prevent crises in families, to apply effective mechanisms for identifying and responding to life and health threatening situations of children and to offer necessary support to families with children in their communities.

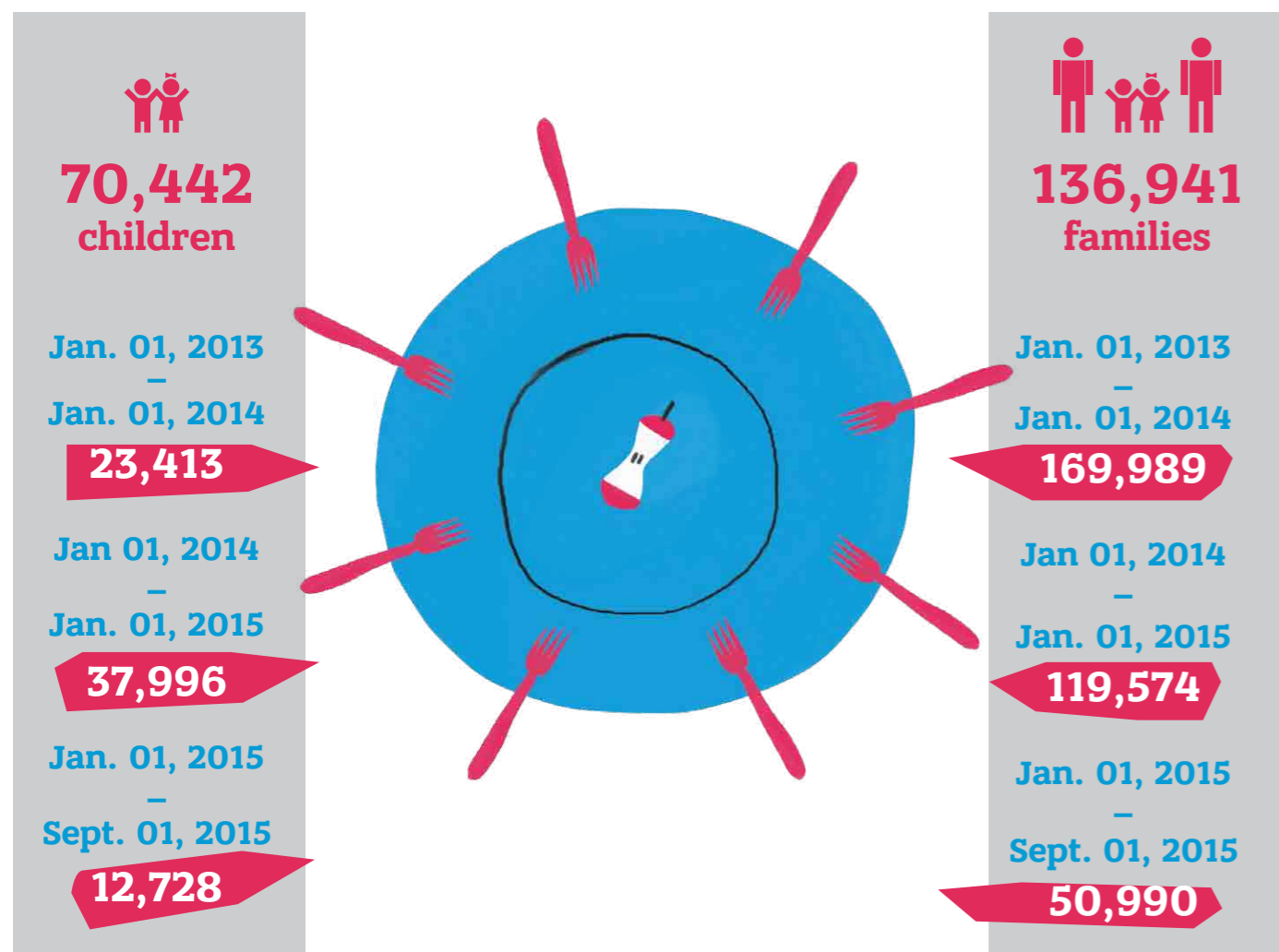
The poverty rate in the country remains consistently high. According to data for nine months of 2015, as many as 23.8% of the country's population were below the relative poverty line by expenditure. The level of poverty in rural areas is almost twice as high compared to urban residents (29.7% and 17.1% respectively).

Children under 18 are the most vulnerable social and demographic group to poverty (poverty rate at 29.9%). The poverty rate in families with children is 29.3%; in large families 50.8% and in families with children and unemployed adults 36%.

The Strategy for Overcoming Poverty, approved by the Cabinet of Ministers of Ukraine Resolution No. 161-r as of March 16, 2016

Registered number of children and families in difficult life circumstances

AS OF SEPTEMBER 1, 2015



As of September 1, 2015, the total number of children registered by services on children's affairs as children in difficult life circumstances was 70,442.

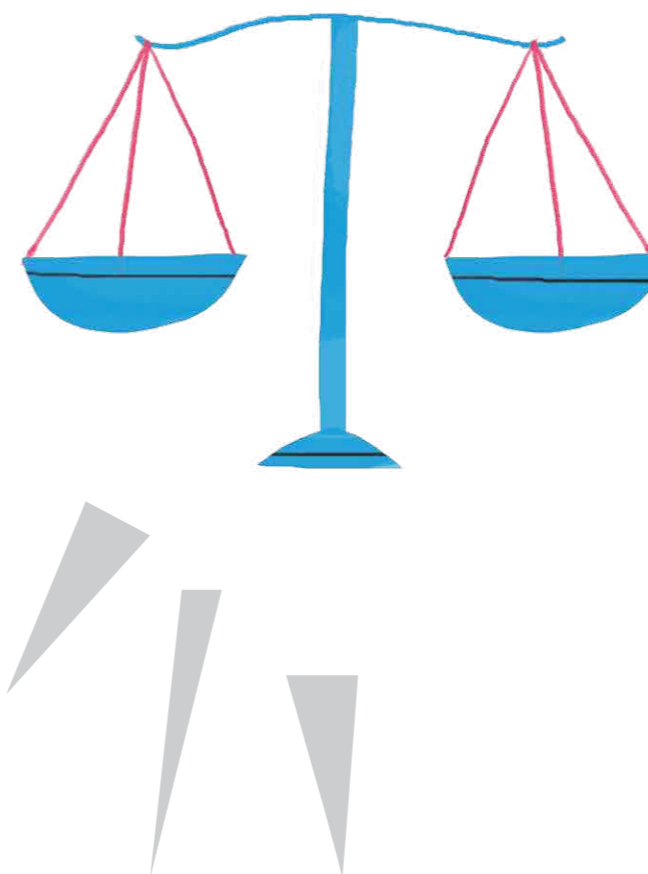
In the past three years, there has been a significant decrease in the number of families registered with centres of social services for family, children and youth as families in difficult life circumstances. In 2013, 169,989 families were identified however in 2014 this number dropped by 30% to 119,574. During nine months from January 2015 social services identified only 50,990 families. The total number of families registered on September 1, 2015 was 136,941.

Data analysis indicates that the increase in the number of children in institutions, as well as the decrease in the number of children and families identified as being in difficult life circumstances, may be due to a reduction in the provision of social services to children and families in communities.

The inefficiency of the data collection system at a national level is also evident – one state body at a local level (services on children's affairs) keep records of children in difficult life circumstances, while another one (centres of social services for family, children and youth) do the same regarding families. Our analysis demonstrates that the number of families in difficult life circumstances is almost twice as high as the number of children although logically it should be vice versa. In practice, this points to an absence of unified data on the number of children and families in need of support and assistance, and this further complicates the interpretation of existing data and its use for planning services.

The number of children who received the official status of a child deprived of parental care each year has been declining over the past three years. For example, during 2013 this status was granted to 3,976 children, compared to 1,666 during 2014. During the first nine months of 2015, only 617 children in Ukraine officially became children deprived of parental care. As of September 1, 2015, the total number of children deprived of parental care by court decision was 34,694.

The number of children deprived of parental care by the court decision



TOTAL NUMBER AS OF SEPTEMBER 1, 2015

34,694 children

Identified during the period

Jan. 01, 2013–Jan. 01, 2014	3,976
Jan 01, 2014–Jan. 01, 2015	1,666
Jan. 01, 2015–Sept. 01, 2015	617

This indicator on its own could be evidence of positive change if active work was being conducted with families, and children were not living in institutions for years, having actually lost parental care, and still being deprived the opportunity to be placed in a family.

Inclusive education is inaccessible for most children with special needs

Children with disabilities and their families are one of the most vulnerable categories of the population. These children and their parents deserve the government to introduce simple and clear mechanisms to register disabilities and establish a system of community support.

The total number of children with disabilities in Ukraine is 145,707. The number of children registered with disabilities has reduced over the past three years. For example, in 2013 disability status was granted to 70,385 children; in 2014 to 62,815 children and during nine months of 2015 to 31,161 children.

The number of children registered with disabilities



145,707
children

TOTAL NUMBER OF
CHILDREN WITH
DISABILITIES AS OF
SEPTEMBER 1, 2015

Identified during the period

Jan. 01, 2013–Jan. 01, 2014	70,385
Jan 01, 2014–Jan. 01, 2015	62,815
Jan. 01, 2015–Sept. 01, 2015	31,161

"It is very difficult to register a child's disability. Doctors look at how much money you bring to the hospital. Disability status is granted to virtually healthy children, while really sick children cannot get it. It costs 200 dollars."

Mother of a child with a disability participating in a focus group

According to data obtained there are 499,042 children in Ukraine with various physical and mental development disorders. Oblast data suggests that most children have speech disorders (155,260). The second most widespread problem is musculoskeletal disorders (113,400). Children with vision problems are ranked third (100,527). It is interesting to note 30% of children in institutions have mental disabilities and delayed developmental issues.

As of September 1, 2015, regular schools provided inclusive and special education to only 2,586 and 6,479 children with physical and mental disorders respectively. In other words, inclusive and special education only meets the needs of 1.8% of children who require such services. In rural areas, this rate is below 1%.

"I spent a lot of time and effort to register my child's disability. She is mentally disabled and in the hospital they recommended that I apply for disability status. They sent us to the oblast hospital on two occasions and each time we underwent examinations. Then the doctor asked me where we lived and what our income was and then did not write anything. When I returned to our rayon hospital our doctor asked if we received the status. I said, "No, they wanted money". He just shrugged and told me to return "whenever you are ready".

Mother of a child with a disability participating in a focus group

The number of specialists and services for children and families in communities is limited

The Ukrainian state officially guarantees opportunities for every child to be raised in a family; therefore the support of families should be a priority. In addition, the Law of Ukraine "On Education" declares that all children should have equal access to education. However, according to our observations, communities and neighbourhoods lack services to support families with children, while the deficit of relevant specialists is considerable.

Within the framework of the study, data was collected from all oblasts and the city of Kyiv regarding the number of specialists working in specific agencies and organisations responsible for providing protection and social support for children and families. Additionally, data regarding teachers providing inclusive education for children in schools for general education and pre-school facilities was also collected.

In our work, we often observe a lack of financial resources at a local level, which leads to the "axing" of specialist services for children, the school network, pre-school, and out-of-school and health facilities. This significantly complicates access to relevant social, health and educational services.

As of September 1, 2015, centres of social services for family, children and youth (CSSFCY) had 5,477 employees, including 1,855 managers and other support and technical staff. The number of specialists was 3,622. However, compared to 2013 the size of the CSSFCY workforce has dropped by 64% while the workload assigned to the staff of these centres has increased. Additional responsibilities include the provision of services to participants of anti-terrorist operations and their families; working with families and children displaced from temporarily occupied territories of Ukraine and ATO areas and the development of mentorships. These personnel cuts alongside the increase in function and workload raise significant doubts about the ability and capacity of the CSSFCY network and its staff to provide effective support to children and their families in communities.

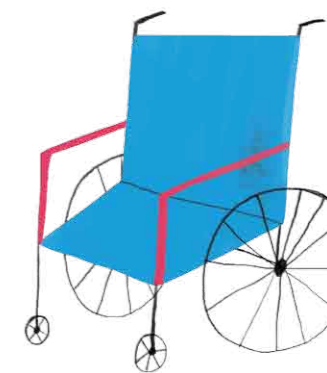
The same situation can be observed in services on children's affairs. Since 2013, the number of specialists working in these services reduced by 19%. On September 1, 2015, 3,126 individuals were working in services for children, including 1,388 managers and administrators and 1,738 specialists.

As of September 1, 2015, pre-schools and schools for general education in Ukraine employed 11,318 school psychologists. At the same time, the number of school students aged six to 17 years was 3,829,278; a ratio of one psychologist to 338 children. As for social pedagogues working in all kindergartens and schools of general education their number was even lower (5,151 individuals) with a ratio of 740 children to each social pedagogue.

Additionally, at the time of the study there were only 42 assistant pre-school teachers across all kindergartens and 920 assistant teachers in schools for general education. The number of speech therapists and special education teachers across all Ukrainian pre-school facilities and schools was only 3,349 and 1,003 respectively.

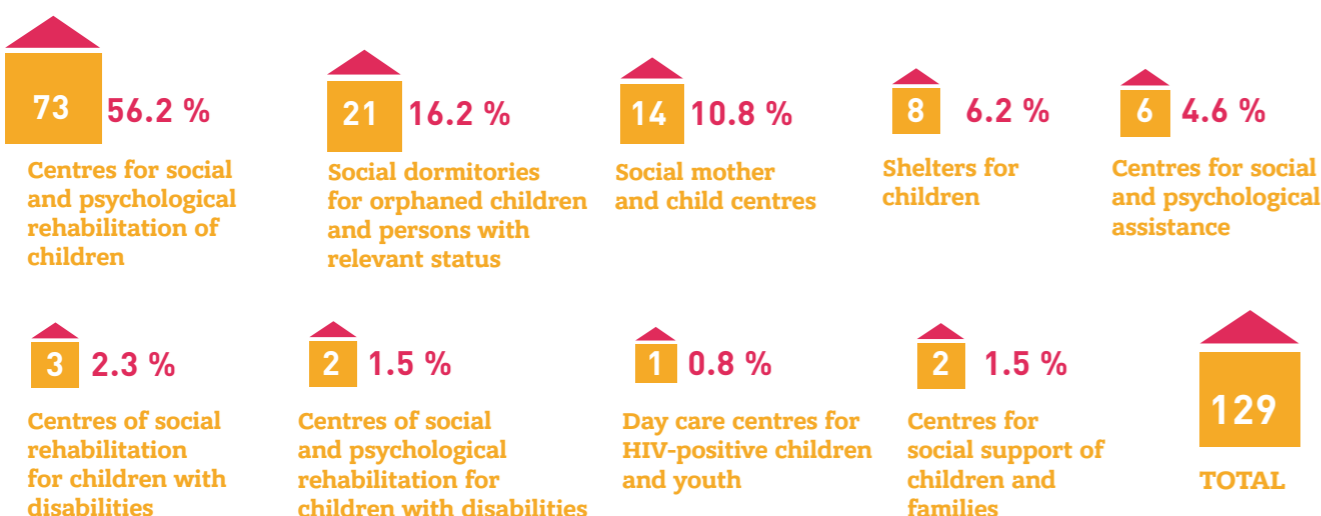
If we compare the demand (the number of children and families requiring inclusive education), and supply (the number of specialists working in communities), we will see that the situation is equally as bleak. The ratio is 46 children to one speech therapist and 92 children with mental disabilities to each special education teacher.

These figures confirm that the availability of specialists in communities, especially compared with the number of children and families in need of social support, is minuscule. In the meantime, the system of institutions, despite its harmful effects on children, families and society, continues to develop and flourish.



The data obtained from all oblasts and the Kyiv city state administration highlights that there are only 64 centres for social rehabilitation for children with disabilities across the country. Sixteen of which are located in the Khmelnytskyi oblast alone. Other facilities include social mother and child centres (19) and social dormitories for orphans and people with relevant status (24) – these were created at oblast level, therefore it is difficult to class them as facilities providing services for children and families in their local communities.

The number of social residential facilities by type



Regional data indicates that the creation of community-based services for children and families is largely sporadic. As a rule, such services are carried out by non-governmental and charitable organisations. The key reasons for the absence of these much-needed services include the lack of financial resources, approved legislation and service standards as well as the absence of trained specialists.

"There are no laws regulating the introduction of specific services. I understand my colleagues who find it easier to refer a child to the institution. They forget that this child will return in five years and this problem will be much more difficult to address. During my previous term as a head of the village council, I took five children from one family and sent them down to the boarding school. Now they have returned with disastrous consequences: they don't want to work, they keep giving birth to new babies. The number of thefts in the community has increased. One problem multiplied by ten."

Interview with a village head

Given the absence of support services for children and families and the consistently low material capacity of parents, the placement of a child in an institution is often seen as the only possible form of assistance for families, while in fact it further deepens the crisis.

The analysis of data from the child protection system at the rayon/city level revealed that only 27% of households registered as families in difficult life circumstances were under social guidance of social services. As for the availability of other services the situation is as follows: provision of day care services to children with disabilities 14% of the total need; prevention of abandonment of newborn children 11%; support services for families and children (day care centres, mobile teams) are absent altogether. Crisis intervention in the case of the threat of violence or perpetration of violence against children or mothers with children is also absent.

According to information from rayons and cities, only 18% of children with special needs attend special and inclusive groups in kindergartens; as for schools for general education only 1.4% of all children who need inclusive forms of education attend classes and study with other children.

"You talk about the right things – of course, we need to create local services and train specialists to deliver them. I am ready to bring home all institutionalised children from our rayon. But is the government ready to reallocate funds which are channelled to institutions to maintain these children in our communities so that we could create some services, at least partially?"

Statement at an oblast council meeting with the participation of heads of rayon administrations

Reforms in social and educational sectors declared at the central level, maintain long-standing financial mechanisms – institutions are financed through a system of transfers from the State Budget while social services have to be established by local authorities from their funds without state support. In fact, Ukraine now has a system of "guaranteed funding for institutions from the State Budget", based on the incentive formula "more children means more money."

"We don't have money to develop any services. Institutions are funded through educational subventions, and we are forced to close down whatever we have left (schools, hospitals). Where do we get money to create something new even it is in great need?"

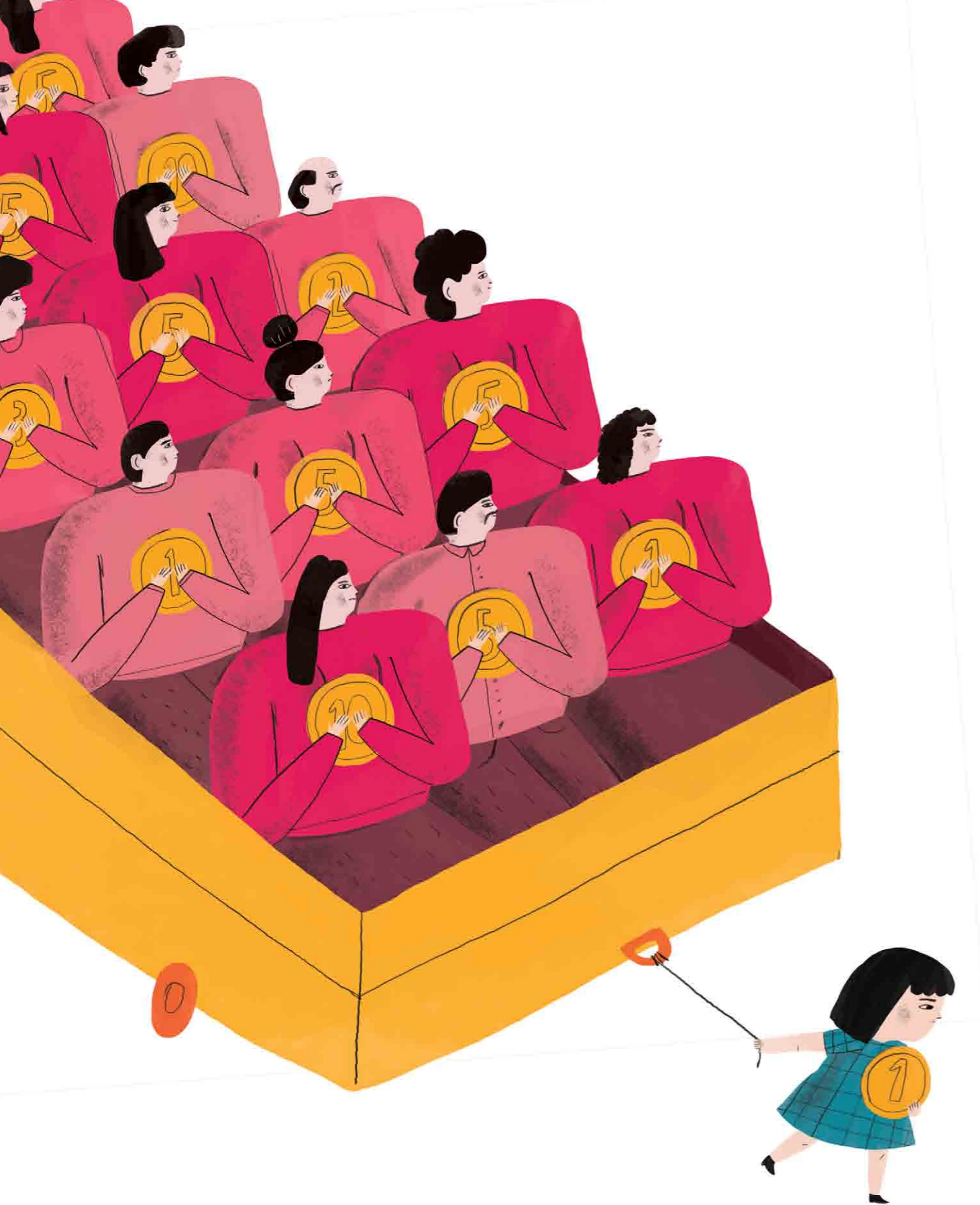
Interview with the head of the rayon state administration

Local authorities and local governments state they are ready to work on the establishment of services in their communities but only with the appropriate regulatory framework, financial resources and instructions "from above". In fact, **local officials rely on national-level decisions** so they have very little capacity to change the system "bottom up" and are limited by their mandate and resources.

The worst case scenario is when social services come under the jurisdiction of local authorities, while institutions continue receiving funds centrally. This creates certain bias, as it becomes more beneficial for local authorities to place children in institutional care (for them it would be free), rather than spend their own money on social work with families.

De-institutionalisation and transformation of services for children. Best practice manual, 2009

Therefore instead of creating real opportunities for the development of services for families at a community level and provide financial and material assistance to support parents to overcome difficult circumstances and strengthen their parental capacity, social sector reforms offer solutions that contribute to increased poverty, create a culture of dependence and increase the number of children who are removed from their families.



9

**Financing of the
institutional care system
and analysis of its efficiency**

The system follows the principle “more children means more money” with staff members of institutions being key beneficiaries

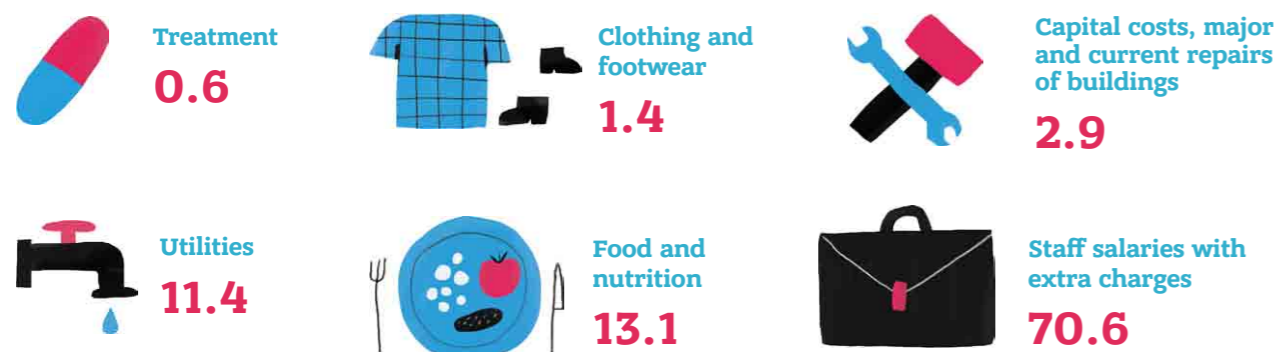
“We do everything for children. For them it is much better to be here than at home. The main problem today is that they stopped sending us children.”

Interview with the chief physician of a baby home

In 2014 the total budget to maintain residential facilities at all levels reached UAH 5.1 billion. During the first nine months of 2015 the total amount of funding spent on institutional care was UAH 4.8 billion. If we divide this amount by quarters, it can be estimated that the total expenditure on institutional care in 2015 reached

UAH 6.4 billion.

Average structure of expenditure of residential facilities



The structure of expenditure of residential facilities by type

IN 2014 AS % OF FUNDS ON STATUTORY ACTIVITIES

	Expenditure on clothing and footwear per child	Expenditure on medical treatment per child	Expenditure on food and meals per child
Children's home	1.63	0.43	11.41
Education and rehabilitation centre	0.50	0.24	8.82
Educational complex	0.39	0.08	4.86
Specialised boarding school	0.25	0.08	4.79
Sanatorium boarding school	0.09	0.19	6.19
Special boarding school	0.85	0.24	7.03
Boarding school of general education	0.76	0.17	5.85
Children's care home	1.61	1.34	11.86
Baby (infant) home	5.52	2.14	9.87



“Our funding depends on the number of children. As their numbers have dropped we receive less money. We do not work to our full capacity; the occupancy is about 60%. They do not send us children even though the demand for our services in villages is very high. You know, there are so many neglected children there.”

Interview with the director of a special boarding school

The mechanisms for financing institutions in Ukraine have remained the same since Soviet times and are based on a set of norms. These only include quantitative indicators, which are used to plan budget expenditure to maintain institutions. Generally speaking, funding depends primarily on the number of children. The scheme is very simple: “more children mean more money”, as put by one headmaster. This approach risks encouraging administrators of institutions to find ways of increasing the number of their residents.

“How do parents learn about our facility? We travel around villages and rayons, visit schools; we tell teachers, parents and workers of village councils about our services. It is teachers who mostly recommend us.”

Interview with a social pedagogue from a special boarding school

Direct costs to meet the basic needs of a child (food, healthcare, clothing and footwear) account for only 15.1% of the funds allocated by the state to institutions. The distribution of expenditure per child is almost identical regardless of whether a child is an orphan or is placed in the facility at the request of their parents who retained their parental rights. Given these figures, it is interesting that expenditure on salaries accounts for 70% of the total budget. Therefore we can assume that **staff members of institutions are the main beneficiaries of the system.**

In addition to funding from the government, institutions receive substantial funding and material support from non-governmental sources such as sponsors and charities. Analysis of this type of assistance indicates that it has increased consistently.

Amount of sponsor support for residential facilities, UAH

Funding	2013	2014	9 months of 2015
Direct financial assistance from non-governmental sources (sponsors, charity, etc.)	103,792,005	122,708,426	130,504,370
Non-state assistance in the form of services and material benefits (building repairs, organisation of leisure time, events for children, toys etc.)	46,174,571	47,794,158	43,915,069
Total	149,966,575	170,502,584	174,419,439

The cost of keeping a child in different types of institutions varies significantly. It is interesting to note that the monthly cost per child in institutions for orphans and children deprived of parental care is the same (or lower) than in other types of institutions where children resident in them still have parents.

Financing per child varies not only in terms of the type of institution but also between regions. For example, the cost per month per child in a baby home in the Chernivtsi oblast is UAH 5,640, while in the Odessa oblast it reaches UAH 11,862.

Monthly allowance per child in different types of residential facilities (UAH)

Type of institution	2013	2014	9 months of 2015
CHILDREN'S HOME	6,793	6,956	7,833
BABY HOME	11,480	14,357	16,365
CHILDREN'S CARE HOME	7,070	6,963	7,466
SPECIAL BOARDING SCHOOL	6,318	6,736	7,588
EDUCATION AND REHABILITATION CENTER	5,904	6,343	8,309

An example of a special boarding school for general education (Kirovohrad oblast): of the total amount (UAH 6.4 million) allocated during the first nine months of 2015 to support 140 children more than UAH 1 million was spent on utility bills.

Therefore, we can conclude that in the case of the institutional network the Ukrainian state actually finances jobs and maintenance costs instead of meeting the needs of children.

Institutions are economically important in the regions as they create jobs for local people

"During our visit a man, who introduced himself as a member of the village council, approached us and asked: "Are you the people who arrived to close down our internat (institution)? You cannot do this! It is an important resource for us as many people from our community work there. Other employment opportunities are very limited!"

Study in a boarding school for general education

"There are 89 individuals working in the school. We were surprised by how many of them are relatives. There were at least seven married couples working in the institution and three of them even brought their children on board. The explanation is simple – no other employment opportunities in the village. Everyone's extremely concerned about the possible closure as this institution is the only income for many families."

Study in a boarding school for general education

Residential facilities in rural areas and small towns often serve as major employers. In some cases they are the only place of employment. That is why institutions are viewed by some as "economic objects". During the study, we identified many examples of members of one family, and even several generations working in the local institution.

During the study we came across situations where the institution artificially created the 'need' in the area where it is located.

In one special boarding school for general education, all 88 residents have been diagnosed with "mild mental disabilities". Sixty of these children were born in the village and in the surrounding areas; 23 children have parents who were also raised in the school. This is just one example of how children from low-income families are purposely misdiagnosed and forced to live in special institutions. According to the school's headmaster, close to 60% of their graduates find themselves in difficult life circumstances when they leave the institution.

Additionally, there is an example of a boarding school for general education for children requiring social assistance with 149 residents; 107 of these children live in the village where the institution is located. Only 54 children return home overnight.

Although by placing a child in a residential facility the state wants to help children in difficult life circumstances or children with special educational or health needs, the institutions themselves have turned into employment opportunities for adults at the expense of children.

Based on the above, it can be argued that the current system of institutions fail to meet the real needs of children, families and communities. It is focused on preserving the system as it is. Inadequate legislation and financing mechanisms are used primarily to maintain the buildings and provide salaries for the staff, generally ignoring the needs of the child.

Financing of institutions is an ineffective use of taxpayers' money compared to the development of services for children and families



For comparison during the study, information was also requested on regional support programmes for children and families. According to the regional statistics and the data from the Kyiv city state administration, funding of such programmes in 2014 slightly exceeded UAH 500 million.

As mentioned earlier, one of the drivers behind the placement of children in institutions is the lack of specialists and inclusive forms of education and development in schools for general education and kindergartens within local communities. Introducing inclusive education, as well as training and providing staff, requires significant financial resources, which, according to the heads of departments of education are sorely lacking at a local level. Moreover, local officials are already being forced to reduce the number of schools by closing down rural schools to save resources.

The average cost of keeping a child in an institution exceeds UAH 7,000 per month, while the cost of establishing inclusive education per child in a regular school, as reported by the heads of rayon and city departments of education, is on average UAH 1,300 per month. Not only would the latter approach be far more effective and efficient for a child, but it is also five times less expensive for the government and the taxpayer than institutional care and, most importantly, it would mean children would not have to be separated from their families.

The experience of Hope and Homes for Children has shown that the cost of social guidance of children and families in the community, based on one specialist supporting ten families, is around UAH 5,000 per family. This amount includes salaries, travel costs and the procurement of materials for sessions with parents and children. The cost of rentals and utilities do not need to be included as this type of service is conducted at a family's place of residence or on the premises of an existing educational or cultural service in the local community.

As part of the research activities and in collaboration with local authorities of two rayons in the Kyiv and Dnipropetrovsk oblasts, we developed and implemented a model of support services for children and families with the concurrent closure of two institutions. More specifically, we were able to close down two residential facilities and establish comprehensive centres of social support for children and families. All services were tailored to meet the needs of local residents, taking into account the existing infrastructure.

Through this integrated approach, combining services for both day and round-the-clock care as well as the introduction of new working practices for specialists, focusing on performance, alongside a greater emphasis on working with families and the prompt reunification of children from institutions with their families, we were able to significantly increase the effectiveness of the services while keeping their costs down. An analysis of the expenditure under this approach demonstrated that the total cost of the service per child per month providing round-the-clock care is about UAH 2,000. Day care, including consultations with specialists and development classes costs as low as UAH 300 per month.

During 2015 the centre of social support for children and families ("It Is Good at Home") in the Dnipropetrovskiy rayon provided services to 1,112 individuals (562 children and 550 adults). Maintenance and service costs were covered by the rayon budget at a cost of UAH 2.7 million; the total number of staff employed is 39.

The most expensive provision provided by the centre is the Early Intervention Service (EIS) designed for children with health limitations or special educational needs, up to the age of seven, and their parents. During the year, this service supported 46 children and 54 parents. The EIS helped to prevent 16 children from being placed in baby homes or special boarding schools, and the children were able to stay with their parents and continue their studies in pre-school facilities and schools in their respective communities. During an entire 12 month period the EIS cost up to UAH 20,000 per child.

Comparisons of the effectiveness and cost of institutional care versus community-based services prove the need and importance of services to support children and families in the way that guarantees the right of a child to grow up in a family and to receive educational, health and social services at their place of residence. The establishment of community-based services also ensures the right of parents and families to receive assistance from the state, especially in situations of risk or difficult life circumstances.

From the viewpoint of the state and society, the development of services in communities can reduce a family's dependence on external assistance, thus increasing a parents' capacity to raise and care for their children. Under this approach, the state does not take over the functions of education or care but helps parents to perform their parental duties.

This approach is more effective both in terms of realising the rights of children and in ensuring an efficient investment of resources which in the long-term will reduce the burden on budgets at all levels.

Long-term effect

International research shows that a high proportion of children growing up without parental care do not attain their potential in terms of education and life skills, thus failing to contribute to the economy and, worse, many go on to have serious problems exacerbated by their experience in care that require expensive state intervention into and throughout their adult lives. Generally, children leaving care are more likely to be dependent on the state and other service providers for their own well-being and survival.

Moreover, funding institutional care rather than the alternatives is misguided when the relative costs are considered. Analyses of children of all ages in Moldova, Romania, Russia and Ukraine show that institutional care is six times more expensive than providing social services to vulnerable families or voluntary kinship carers; three times more expensive than professional foster care, and twice as expensive as community residential/small group homes.

The rights of vulnerable children under the age of three.
United Nations High Commissioner for Human Rights
(ROE OHCHR), 2011¹⁶



¹⁶ United Nations High Commissioner for Human Rights (2011) The rights of vulnerable children under age of three. www.europe.ohchr.org/Documents/Publications/Children_under_3_web-version.pdf.



10

Analysis of Ukrainian legislation consistency with international standards and promoting the implementation of child protection reform

While analysing Ukrainian legislation we examined how it defines the categories of children requiring protection of the state and the mechanisms of their support; the distribution of powers and responsibilities of government authorities and social service providers; the role of government in prioritising the right of a child to be raised in a family; the role a child plays in decisions affecting him/her; and the function of existing financial mechanisms for implementing child protection reform.

A rights-based national child protection system is made up of components that, when properly coordinated, work together to strengthen the protective environment around each child and its family:

- Child protection laws and policies, including customary law, are all compliant with the UNCRC and other international and regional standards and good practice, and a plan of action exists to prevent, protect and respond to all forms of violence against children;
- There are coordination mechanisms across government, with civil society, human rights bodies and mechanisms, international organisations and between sectors at different levels, with a framework for reporting and referral of child protection issues for each agency involved in working with children's rights and well-being, in emergency as well as development contexts;
- A centralised data collection system ensures regular information on both prevalence and knowledge of child protection issues, and good practices;
- Services and responses are effectively regulated, including through accreditation and licensing of care providers, enforced minimum standards of care institutions and independent oversight of these;
- There is a range of preventive and responsive child-friendly services that recognise the need to support and strengthen the role of families in the care and protection of their children, and which can intervene when families are unable or unwilling to fulfil their role appropriately;
- A skilled and committed child protection workforce has the mandate to respond effectively to issues faced by children, their families and communities;
- Adequate and appropriate resource allocation underpins effective children's and family services at all levels, including within the child's community;
- Children have genuine opportunities to express their views and be involved in responses and interventions deployed to protect them and in the development of policies and services relevant to their protection and the fulfilment of their rights;
- An aware and supportive public is engaged and involved in efforts to prevent harm to children and respond to child protection issues in their communities and neighbourhoods and in wider society.

Child Protection Initiative: Building rights-based national child protection systems: a concept paper to support Save the Children's work, 2010

Within this study, we analysed child protection legislation from five European countries (France, Poland, United Kingdom, Romania and Germany). Based on the findings it can be concluded that in conceptual terms the child protection system in international practice is viewed as a system that places a child at the centre of public policy, taking into account his or her views and preferences. To ensure the rights and needs of a child, it provides funding and staff, introduces services, adopts necessary regulations, develops relevant policies and carries out monitoring and data collection.

Under Article 9 of the Constitution of Ukraine, international treaties that are in force, agreed to be binding by the Verkhovna Rada of Ukraine, form part of the national legislation of Ukraine; therefore they should be applied to all areas of life as well as to people affected by them. They should also be followed when finding solutions to issues which are covered by them. Currently, fundamental international legal instruments such as the Convention on the Rights of the Child (CRC) and the Convention on the Rights of Persons with Disabilities form an integral part of Ukraine's legislation. To enforce these international legal acts, the Ukrainian legislature has to implement a set of measures (adoption of laws, bylaws etc.) aimed primarily at ensuring the rights and needs of a child with due consideration of his or her best interests.

Despite the fact that the Law of Ukraine "On the State Programme 'National Action Plan on the Implementation of the UN Convention on the Rights of the Child' until 2016" requires that the country has a fully functioning integrated system which protects children's rights in accordance with the CRC and the development goals, established by the Millennium Declaration and the outcome document of the United Nations Special Session on Children "A World Fit for children", the **definition of the child protection system was not conceptually fixed**. Furthermore, Ukrainian legislation includes roughly 200 legal documents in the area of child protection, from the Constitution of Ukraine and international instruments ratified by the Verkhovna Rada of Ukraine, to sectoral regulatory acts. Despite the number of acts, the conceptual framework still lacks a clear and understandable definition of the child protection system.

The child protection system in the UK is a collection of laws and actions of duly authorised bodies and individuals in the area of policy making, activities and reporting for child protection based on facts, statistics and analysis of each individual case (The Children Act, 1989¹⁷).

The Romanian child protection system is an effective child-centred system aimed at raising children in a family environment and ensuring community-based support of families (Legea 272/2004 privind protectia si promovarea drepturilor copilului, republicata 2014¹⁸).

The child protection system in Germany is tri-polar, providing support to a child, a family and a community (Gesetz zur Stärkung eines aktiven Schutzes von Kindern und Jugendlichen, 2011¹⁹).

In the meantime, two legally established concepts coexist in Ukraine:

- **Protection of childhood** is a system of state and public measures aimed at ensuring the full development of the child, all-round education and development of the child and the protection of his or her rights (the Law of Ukraine "On Protection of Childhood").
- **Social protection of children** is a set of measures of a social, economic and legal nature to ensure the realisation of the rights of the child to life, development, care, education, health and material support (the Law of Ukraine "On Bodies and Services for Children and Special Facilities for Children").

These definitions contain the phrases "a system", "a set of measures" but fail to explain the elements of this system and whether they are aimed at introducing an integrated framework within government policy to ensure and protect the rights of a child in all areas of life.

Current legislation in Ukraine also defines specific measures and fundamentals of state policy to ensure the rights of specific categories of children (the list below is not exhaustive):

- Social protection of orphans, children deprived of parental care and persons with relevant status²⁰;
- Social protection of homeless children²¹;
- Social support of children affected by the Chernobyl nuclear accident²²;
- Social protection of children from large families²³;
- Social support of children affected by HIV and children with other incurable or serious diseases²⁴;
- Social support of children-victims of human trafficking²⁵, violence²⁶ etc.;
- Social protection of children with disabilities²⁷;
- Social protection of children from low-income families²⁸;
- Social support of children in difficult life circumstances²⁹.

¹⁷ www.legislation.gov.uk/ukpga/1989/41/contents

¹⁸ www.dreptonline.ro/legislatie/legea_protectiei_copilului.php

¹⁹ www.bagkjs.de/media/raw/BGBI_BKischG_28_12_2011.pdf

²⁰ The Law of Ukraine "On Ensuring Organisational and Legal Conditions for Social Protection of Orphaned Children and Children Deprived of Parental Care".

²¹ The Law of Ukraine "On Fundamental Principles of Social Protection of Homeless Adults and Children".

²² The Law of Ukraine "On the Status and Social Protection of Citizens Affected by the Chernobyl Nuclear Accident".

²³ The Law of Ukraine "On Protection of Childhood".

²⁴ The Law of Ukraine "On Prevention of Diseases Caused by Human Immunodeficiency Virus (HIV) and Legal and Social Protection of People Living with HIV".

²⁵ The Law of Ukraine "On Combating Trafficking in Human Beings".

²⁶ The Law of Ukraine "On Prevention of Domestic Violence".

²⁷ The Law of Ukraine "On Fundamental Principles of Social Protection of Persons with Disabilities in Ukraine".

²⁸ The Law of Ukraine "On the State Social Assistance to Low-Income Families".

²⁹ The Law of Ukraine "On Social Work with Families, Children and Youth".

³⁰ The Law of Ukraine "On Education", Article 37.

The preamble to the Law of Ukraine "On Protection of Childhood" states that the "protection of childhood in Ukraine is defined as a strategic national priority, and to ensure the realisation of children's rights to life, health, education, social protection, full development and upbringing in a family environment, it establishes fundamental principles of state policy in this area, based on the best interests of the child". However, it should be noted that the protection of childhood is currently not given priority in activities across all areas of government, further deteriorating the situation. A reason for this is the fact that the Law of Ukraine "On Fundamental Principles of the National Security of Ukraine" does not include the protection of childhood in its system of priorities and factors in the context of threats to the national security of Ukraine.

In addition, the legislation of Ukraine which is intended to regulate specific areas related to the rights of a child (life, health, education, social protection, full development and growing up in a family environment, etc.) is not always based on common principles for the best possible protection of rights, freedoms and interests of the child. In particular, the laws of Ukraine concerning education, social protection and health, while ensuring rights to education and health, do not fully take into account a child's right to full development in a family environment. For example, the Law of Ukraine "On Education" provides for the establishment of boarding schools of various types for children requiring special assistance or physically or mentally disabled children³⁰. The Law of Ukraine "On Protection of Childhood" stipulates the option of setting up residential facilities for children with disabilities and children with mental or physical development disorders (Article 27). The same law, however, states that the central executive body responsible for state policy in the area of education and science shall ensure education in schools and special institutions of general education on the basis of relevant curricular, including at home, for all disabled children and persons disabled since childhood who need external care upon the consent of parents or guardians.

Therefore, the establishment of special schools for general education, sanatorium schools for general education, nursing homes for children with disabilities, pre-school and other facilities may be viewed as discrimination, namely a violation of the rights of children with physical or mental developmental disorders to grow up in a family environment and to access education and social services on equal terms with other citizens.

The legally established option of placing children with disabilities in institutions generally contradicts the fundamental provisions of the Law of Ukraine "On the Principles of Preventing and Combating Discrimination in Ukraine", and the requirements of Article 26 of the Law of Ukraine "On Protection of Childhood", which explicitly prohibits discrimination against disabled children and children with physical or mental developmental delays.

Functions of relevant authorities regarding protection and the realisation of the rights of children are blurred, inconsistent and sometimes duplicated

The inadequate definition of terms and concepts and duplications and gaps in defining beneficiaries of the system (e.g. categories of children in need of protection) are further weaknesses of Ukrainian legislation in the area of child protection.

According to international law, child-victims of violence, as well as children at risk of violence, separation from parents and institutionalisation are key beneficiaries of the child protection system. But does Ukrainian legislation define this category of children?

Ukrainian laws define the following categories of children:

- Children in difficult life circumstances (the Law of Ukraine "On Protection of Childhood");
- Children requiring special protection of the state (the Law of Ukraine "On Protection of Childhood");
- Children lacking the necessary conditions for growing and learning in the family (the Law of Ukraine "On Education");
- Children affected by the Chernobyl nuclear accident (the Law of Ukraine "On the Status and Social Protection of Citizens Affected by the Chernobyl Nuclear Accident");
- Children in need of social assistance (the Law of Ukraine "On General Secondary Education");
- Children with physical and mental developmental delay requiring health and social assistance and special care (the Law of Ukraine "Fundamental Principles of Health Legislation of Ukraine");
- Children requiring support for physical and/or mental development (the Law of Ukraine "On General Secondary Education");
- Children requiring special educational conditions (the Law of Ukraine "On General Secondary Education");
- Children with special educational needs (the Law of Ukraine "On General Secondary Education");
- Children left without parental care (the Law of Ukraine "On Local Self-Government").

It should be noted that there are no clear indicators or criteria in the current legislation for identifying children according to the categories listed above and, consequently, for identifying the state support and services to which they are entitled.

Similarly, the Law of Ukraine "On Social Work with Families, Children and Youth" defines the delivery of social work with families and children, as well as the provision of social services, but it does not explain in which cases such services become mandatory and are guaranteed by the state.

The Ukrainian child protection system is overly centralised; as a result, it is concentrated in the hands of the central authorities and their territorial structural units. However, in practice, we see that none of the agencies mentioned above bear responsibility for the blatant violations of children's rights. This is due to a complicated and confusing system of public policy development and the division of powers in the area of child protection.

The Ministry of Social Policy of Ukraine is the central executive body with primary responsibility for the formulation of state policy in the area of family and children, including social security, volunteer activities for families and children, rehabilitation and recreation for children, adoption and children's rights protection and prevention of domestic violence. Accordingly, the Ministry of Education and Science of Ukraine and the Ministry of Health of Ukraine develop and implement state policy in the areas related to the protection of children's rights.

All government ministries should develop child-related policy on the basis of "ensuring the realisation of the rights of the child to life, health, education, social protection, all-round development and upbringing in a family environment". However, as noted above, the issue of children's rights is treated or interpreted differently by different laws.

One example of this is that the Ministry of Education and Science of Ukraine and educational legislation only view institutions as educational facilities, even though children permanently live in these facilities and receive other services other than "education". Moreover, the extended residence of children in these institutions is not seen as institutional care.

"If the child lives in the institution for more than three months and is not cared for entirely by parents or persons who substitute them, this child should be considered as a child in "long-term institutional care", which is potentially very harmful".

The Risk of Harm to Young Children in Institutional Care.
Kevin Browne, 2009³¹

Regarding the issue of a child's placement in an institution, neither the Law of Ukraine "On General Secondary Education", nor standard provisions for different types of residential facilities include the important norm of the Law "On Protection of Childhood" (Article 23): "The competent authorities that carry out social work with families, children and youth, must immediately offer the child's family a range of services aimed at minimising or overcoming difficult life circumstances, and facilitate the return of the child to the parents or other legal representatives".

³¹Browne, K. D. (2009) The Risk of Harm to Young Children in Institutional Care. Save the Children. www.crin.org/en/docs/The_Risk_of_Harm.pdf

For example, the placement of children requiring social assistance in a residential facility is not viewed as separating a child from their parents and therefore it does not require mandatory social work with families to help them overcome their difficult life circumstances.

In other words, the absence of a child-centred approach as a necessary precondition of child protection legislation allows each ministry or agency to use their own acts and regulations as the priority for making decisions about the fate of a child. Therefore, education authorities prioritise a child's education, health authorities – medical care and the right of a child to a family is largely ignored.

The right of a child to be raised in a family is regulated in legislation that protects orphans and children deprived of parental care. Therefore, all relevant laws and bylaws clearly define the obligation of child welfare authorities to undertake measures aimed at placing these children in family-based forms of care³². According to Articles 11 and 12 of the Law of Ukraine "On Protection of Childhood" every child has the right to live in a family together with parents, in a family with either parent, and to be cared for by parents. The state provides assistance to parents or guardians in their fulfilment of parental duties, protects the rights of the family, and promotes the development of a network of facilities for children.

However, such legal norms are not always taken into account when deciding the placement of and providing a set of care services for a child and his or her biological family.

Inconsistencies in and the very general wording of Ukrainian legislation complicates the issue further and does nothing to secure, protect and ensure the rights of children by local executive bodies and local governments.

The Law of Ukraine "On Local Self-Government" includes only two paragraphs related to the execution of tasks on the protection of children's rights:

- "...according to current legislation, to address issues of full state support of orphaned children and children deprived of parental care in boarding schools, children's homes (including those of family-type), vocational and technical schools, as well as government support of individuals with physical and mental developmental disorders, who are unable to study in mass educational schools, in special educational facilities; of provision of benefits to maintain children in boarding schools, residential facilities at schools, as well as compensations for meals to children in schools (extended school groups);
- "...according to current legislation, to address issues of the provision of social services to individuals and families with

children in difficult life circumstances and require external support; of ensuring support and education for children in difficult life circumstances".

Such general statements lead to situations where officials often don't consider alternatives beyond the placement of a child in an institution (they issue a certificate, prepare the act of inspection, and make the decision on placement). Similarly, employees of residential facilities avoid matters relating to the establishment of the status of children deprived of parental care, working with parents or the placement a child in family-based care – they tend to shift these duties to child welfare authorities or services on children's affairs.

Legislative acts governing education, health, and social protection of children lack a single, child-centred approach and clear principles, which would combine prevention and support for families with children, provision of education, delivery of health and social services, addressing housing issues and the socialisation of children and young people leaving the institutional care system.

Despite having a considerable amount of legislation, it can be argued that Ukrainian law fails to serve as a coordinating mechanism to ensure the interaction and collaboration of agencies involved in children's rights protection. In fact what exists is a huge bureaucratic machine that has countless opportunities for transferring responsibility to other bodies and does not meet the real needs of children.

³²The Law of Ukraine "On Ensuring Organisational and Legal Conditions for Social Protection of Orphaned Children and Children Deprived of Parental Care".

Ukrainian legislation creates opportunities for parents to transfer or delegate their parental duties to the state

As mentioned above, the legislation of Ukraine recognises the importance of a child growing up in a family setting and a parents' duty to raise their children. However, it also provides parents with numerous opportunities to transfer responsibility for childcare and education to the state. Instead of introducing norms aimed at improving the material well-being of families and building parental capacity to ensure adequate care and development of children, the legislation offers parents a "relief" in the form of placing their children in institutions.

For example, the Law of Ukraine "Fundamental Principles of Health Legislation of Ukraine" stipulates that parents who have children with physical or mental disabilities who need health and social support and special care, can place them in *baby homes, children's homes and other specialised childcare facilities financed by the state*.

The Law of Ukraine "On Education" provides for the establishment of special facilities – boarding schools for individuals who need social assistance and rehabilitation:

- "Boarding schools for general education shall be established for children who have no necessary conditions for their study and upbringing in families";
- "Boarding schools, children's homes, including of a family-type, with full state maintenance, shall be established for orphans and children deprived of parental care";
- "Pre-school educational institutions, sanatorium-type boarding schools and children's homes shall be established for children who need long-term treatment";
- "Special boarding schools, schools, children's homes, pre-school and other educational institutions shall be established for physically and mentally disabled people who cannot study in mass education institutions. Such facilities shall be **maintained through state funds**".

These norms are contrary to the Constitution of Ukraine. Indeed, Article 52 of the Constitution stipulates that the state shall only support the maintenance and upbringing of orphans and children deprived of parental care.

The Committee notes with concern that the Family Code (Article 143, paragraph 3) condones the abandonment of children born with serious physical or mental disabilities and under other "circumstances of importance". The Committee is further deeply concerned at the insufficient number and poor quality of state services aimed at protecting and assisting families with children, and at the absence of a monitoring and evaluation system of such services.

UN Committee on the Rights of the Child.
Concluding Observations: Ukraine, para. 34, 2011

The legal requirement or priority for preserving a biological family for a child and the duty of relevant services to work towards the prevention of family separation, as well as to seek ways of reintegrating a child in the family remains purely declarative.

For example, the Family Code of Ukraine establishes that while making decisions on depriving parents of their parental rights or the removal of a child, the court "shall take into consideration information on the social guidance the family if such guidance was provided". In other words, working with the family to prevent the removal of a child is not mandatory, and therefore is only taken into consideration if such activity took place.

In the case of a child's placement in residential facilities, current sectoral regulations conflict with the provisions of the Family Code of Ukraine, Article 150 "The parents shall have the duty to care for the child's health, his/her physical, spiritual and moral development", and provisions of the Law of Ukraine "On Education", Article 59 "Raising a child in the family is the foundation for his/her development as a personality. Each of the parents bears equal responsibility for rearing, education and development of a child".

Regulatory acts governing the placement of children in institutions do not require agencies to work closely with parents to reduce the term of a child's stay in an institution and enable their return to their family as soon as possible. The absence of such norms leads to children living in institutions for years at the government's expense, and parents are relieved of duties to raise and develop their children³³.

³³ The Family Code of Ukraine, Article 150.

Ukrainian legislation lacks specific mechanisms for a child's participation and consideration of his/her views and best interests in cases of state intervention and in all matters that affect the child

Given international experience, the criteria for interventions of officials and social services in a family (up to forced removal of a child and deprivation or restriction of parental rights) should be based on a thorough analysis of each individual case and all relevant information. The placement decisions regarding children left without parental care should be taken individually, based on the needs and the best interests of a child, with due consideration of his or her views.

Many countries have updated their laws and legal procedures to take this into account. Policy guidelines include the flexibility of child and family support mechanisms, compliance with the individual needs of a child, and observance of his or her best interests. Each case of state intervention includes an in-depth study of a particular situation, development of an individual support plan, and due consideration of a child's views and opinions at all stages of decision-making.

The decisions on the amount and nature of interventions in the UK are made on the basis of the outcomes of the *Common Assessment Framework, CAF*³⁴.

The Civil Code of France includes specific provisions for hearing the views of the child in the process of considering a case that affects the child.

Poland has special family courts that deal with cases of children and families. When awarding the judgement, courts closely cooperate with social protection agencies or foster care organisations to assess the situation of each individual child.

Under Article 264 of the Civil Code of Romania (Codul civil al României/Noul Cod Civil³⁵, 2011), hearing the views of a child over ten years of age is mandatory in administrative processes and court hearings of cases involving a child.

In line with Ukrainian legislation and under Article 171 of the Family Code of Ukraine, a child has the right to be heard by his or her parents, other members of the family and officials in matters that relate to a child personally and to the family. In specific cases (Articles 152, 160 of the Family Code of Ukraine), a child's views shall be taken into account regarding the right to appropriate parental care and the place of residence. Article 14 of the Law of Ukraine "On Protection of Childhood" establishes that children and parents shall not be separated against their will, unless it is in the best interests of a child, or is a legal court decision. In actions, related to the separation of a child from either or both parents, or in other actions related

³⁴ www.education.gov.uk/consultations/downloadableDocs/ACFA006.pdf

³⁵ www.dreptonline.ro/legislatie/codul_civil_republicat_2011_noul_cod_civil.php

to a child, the court shall hear the views and preferences of a child according to established procedure. However, current legislation has no provisions and norms on how to consider a child's views when reviewing and making decisions on matters that affect him or her.

Judges should respect the right of children to be heard in all matters that affect them, or at least to be heard when they are deemed to have a sufficient understanding of the matters in question.

Guidelines of the Committee of Ministers of the Council of Europe on child-friendly justice, para. 44

The consent of a child (if he or she has reached the age and maturity to express it) should be mandatory for child adoption or placement in family-based care. However, legal acts regulating the placement of children in institutions provide for the "willingness of parents or guardians" or the decision of child welfare authorities. Due consideration of a child's views and his or her involvement in this process are not regulated; the same is true for other issues related to the removal of a child from his or her parents, return to his or her biological family and his or her placement in temporary care. There are no requirements for a child's personal file to include documentation regarding a child's participation in the decision-making process or their views or wishes. Similarly there is no requirement to include details of whether a decision is in line with a child's best interests.

Recently adopted law³⁶ provides a definition of the best interests of the child. However, guidelines for how this should be applied by all agencies and structures involved in making decisions regarding children (including courts) are yet to be outlined in relevant regulatory acts and documents. This means that a child is still not viewed as a bearer of rights and a person with individual qualities and needs that should be taken into account in decisions that may affect his or her life.

Regardless of whether a child is an orphan or deprived of parental care, lives in a disadvantaged family or in difficult life circumstances, has a disability or requires support for their mental or physical development – a child should be directly involved in decision-making and his or her best interests should always take precedence over interests of parents or guardians, representatives of government agencies or staff members of residential facilities.

³⁶ The Law of Ukraine "On Introducing changes to some legislative acts of Ukraine on strengthening social protection of children and supporting families with children". Official gazette "Vidomosti Verkhovnoyi Rady Ukrainy" 2016, #10, p.99.

Existing decentralisation legislation does not ensure the division of responsibilities concerning the provision of the rights of children, and does not encourage the development of community-based services

Decentralisation is common to all countries examined as part of the study. Results of the analysis show that these countries build their child protection systems around a clear division of responsibilities and powers between central and local authorities. Usually, all policies, mechanisms and standards for protecting the rights of children are developed centrally, whereas responsibility for delivery of services and activities directly related to children's rights rests with local authorities.

The UK Department for Education³⁷ is responsible for the protection of children in the United Kingdom. This government agency defines general standards and guidelines, and delegates responsibilities to local authorities, which, in turn, set up mechanisms and services tailored to local needs. Through the use of market mechanisms for the procurement of social services, there are many state and non-state service providers working in the country. The legislation also requires the appointment of a Director of Children's Services³⁸, but local authorities are free to determine the organisational structure of these services depending on local needs.

In Germany, according to the Children and Youth Protection Act (Kinder- und Jugendhilfe gesetz, SGB VIII³⁹), local governments have to set up services for the social protection of youth (Jugendamt). While working in administrative districts and large cities, these services respond to all cases of social protection of a child (including potential risks or violation of child well-being). They are also responsible for youth employment, social work with children, the arrangement of education in families, day care and the functioning of day care centres, educational consultations and support. Moreover, these services ensure social and pedagogical support of families, studying in day groups, as well as round-the-clock, short-term and supportive care.

In Romania, all issues related to child protection and adoption are regulated by the National Authority for Child Protection and Adoption (Autoritatea Nationala pentru Protectia Drepturilor Copilului⁴⁰). This agency functions at a national level, coordinating efforts in the area of children's rights. At a local level, each judet (the equivalent of a county or oblast in Ukraine) has the General Directorate for Social Assistance and Child Protection (Directia Generala de Asistenta Sociala si Protectia Copilului). These bodies are responsible for providing social services with a certain margin of discretion.

In 2015 decentralisation reform was launched in Ukraine. The overall goal of this policy is to abandon the centralised model of public administration; to build the capacity of local governments; and to develop an effective system for the distribution of powers and authority in Ukraine across all areas of government.

However, the legislation that was adopted or amended within the decentralisation process does not include provisions concerning the distribution of powers and budgets between different levels of government to ensure the protection of the rights of children or to encourage the development of community-based services for children and families with children.

For example:

- The Law of Ukraine "On Protection of Childhood" was recently amended to include a general provision for local authorities, which should ensure the "implementation of state policy on childhood protection, the development and implementation of sectoral and regional programmes aimed at improving the situation of children, supporting families and addressing other issues in this area"

- In the description of powers of local governments, the Law of Ukraine "On Local Self-Government" does not include obligations related to the protection of children's rights or the importance of supporting families in local communities. Among the list of delegated authorities there is only one clause that confirms the right of local authorities to consider the issue of creating services, rather than the obligation to ensure support to children and families with children
- The Law of Ukraine "On the Voluntary Unification of Territorial Communities" does not include an obligation for ensuring the rights of children and their protection or for providing support/services for children and families at risk or in difficult life circumstances. The law states that a "unified territorial community shall be the successor of all property, rights and obligations of communities that joined together, from the date of accession of relevant village, township or city council, elected by the community, to power", but considering the general statements in the Law of Ukraine "On Local Self-Government", the importance and priority of support services for children and families in communities are not mentioned there.

³⁷ <https://www.gov.uk/government/organisations/department-for-education>.

³⁸ <https://www.gov.uk/government/publications/directors-of-childrens-services-roles-and-responsibilities>.

³⁹ <http://www.sozialgesetzbuch-sgb.de/sgbviii/1.html>.

⁴⁰ <http://www.copii.ro/>.

Ukrainian legislation regulating the social sector does not include a dedicated minimum set of services or standards for children and families that must be provided at a local level. Similarly, the Laws of Ukraine "On Social Services" and "On Social Work with Families, Children and Youth" do not obligate local authorities to develop and ensure availability of services for children and families.

The plan for legislative support of the reforms in Ukraine, approved by the Verkhovna Rada of Ukraine Resolution No. 509-VIII as of June 4, 2015, does not include the adoption of relevant legislation on the mandatory creation of services in communities. The section "Youth Policy and Childhood Protection" only provides for approval of the concept of youth policy and revival of patriotic education.

The action plan, recently approved by the Cabinet of Ministers regarding local government reform, provides for the development of conceptual (general) proposals regarding changes to educational, health and social protection legislation⁴¹ - unfortunately, it does not include specific actions aimed at distributing powers or for clarifying functions at a local level.

Therefore, it would appear that the issue of ensuring children's rights and supporting families with children, especially in high-risk situations, "fell off the radar" of public administration reform, decentralisation and government priorities.

Financial mechanisms and budget legislation remain conservative and highly centralised, which discourages the development of services in communities and NGO involvement

The Budget Code of Ukraine is the main document that defines the legal basis of the country's budgetary system, its principles, process and intergovernmental fiscal relations, as well as responsibility for following budget legislation. According to the Budget Code of Ukraine, budgeting at all levels and follows clearly established procedures. Specifically, it includes funding for certain facilities for children, payments for children in family-based forms of care as well as monetary assistance to families with children. Only institutions or types of benefits defined in the Budget Code can be funded. The budget legislation does not view a child and his or her needs as priority items for effective support.

To ensure equal funding of health and education facilities regardless of the region, the system of financing was altered in 2015. All institutions receive financial resources within educational and healthcare subventions from the State Budget. The structure of expenditure established in these subventions covers all residential facilities.

This approach "reinforced" the positions of institutions and increased the interest of authorities in preserving their existence. Institutions receive funding regardless of how they address the needs of children and regardless of the quality of service provision. In the meantime, the funding of social services for children and families must be carried out by the founders, that is, local governments.

Accordingly, in situations of crisis and austerity, this approach to funding the country's child protection system actually increases the number of children in institutions and leads to a reduction of services and the number of relevant professionals at a local level and in communities. Budget legislation also precludes the redistribution of funds for their effective use. For example, when closing down a residential facility it is impossible to use funds, regularly allocated for its maintenance, for creating new services for children and families or in supporting other social facilities.

⁴¹ Directive of the Cabinet of Ministers of Ukraine No. 688-r as of September 22, 2016 "Specific issues of implementation of the Concept for reforming local self-governance and territorial organisation of power in Ukraine".

In accordance with Article 5 of the Law of Ukraine "On Social Services", social services shall be provided at a person's place of residence; at a child's residence; in the families of citizens who are contracted to provide services for the upbringing of a child (foster families, family-type children's homes, patronage families); in residential facilities and institutions; in day care facilities and institutions; in institutions and establishments of temporary or permanent residence; in community centres for social service provision; in other institutions of social support (care). This article confirms the domination of the state in the provision of services for children and families. This approach was introduced in the Soviet times and still exists today. While conversely, most service providers in the countries reviewed within this study, are non-governmental organisations.

In Germany, 32% of service providers are public organisations, while the remaining 68% are private organisations, mostly non-profit. Non-governmental organisations (NGOs) receive funds from the state budget following the agreement of a contract between the organisation and the relevant state agency.

Non-governmental, non-profit organisations in Poland can be involved in the provision of social services, including assistance for families and individuals in crisis, support of families and foster families as well as education and training. These organisations are selected through an open tender, which is regulated by special legislation. NGO involvement can occur on the basis of full coverage of expenditure on service provision, or partial payment to support the organisation.

French non-governmental organisations and foundations provide 50 – 90% of social services, depending on the service type. Decisions on non-governmental involvement in service provision are made at a local level on a competitive basis.

The selection process of private partners in Romania is based on the principles of transparency, efficiency and open competition. Specifically, it is implemented either through the agreement of reasonable business, or the state rental of services, formalised in a public contract, or by direct procurement of a service from the private provider by the local authority. The procedure of selecting providers can be conducted as a public auction or as individual public-private negotiations.

Ukrainian legislation is not focused on the involvement of NGOs in the provision of services for children and families. The procedure for engaging non-governmental entities or individuals in the delivery of social services, including to families and children, pursuant to the social commissioning process is regulated by Article 13 of the Law of Ukraine "On Social Services". In addition to this article, the Procedure for executing social commissioning, approved by the Cabinet of Ministers of Ukraine Resolution No. 324 of April 24, 2013, establishes the option of commissioning services at the expense of local budgets. But in a situation where institutions are funded from the State Budget, and there is a lack of financial resources at a local level, this norm does not work in practice and does not increase the access of NGOs to budget funds.

The lack of standards in the provision of social services for children and families (developed on the basis of international experience) is a serious deterrent both for involving NGOs as service providers and for improving the quality of services in general.

Furthermore, there is no unified approach to the financing of services. Educational establishments receive funding under the "financial ratio of budgetary provision"⁴². According to the approved State standards of social services⁴³, the definition of the cost of social service is quite general and

confusing: "The cost of a social service is calculated on the basis of its prime cost, administrative expenses and value added tax in accordance with the laws, or formed based on the financial capacity of local budgets".

The state support for families with children is provided according to the State Social Standards and Guarantees, and includes payments only, excluding other social services.

In the modern context the State Classifier of Social Standards and Norms, developed pursuant to Article 27 of the Law of Ukraine "On the State Social Standards and the State Social Guarantees", can already be viewed as obsolete because of its inconsistency with current requirements of providing social service provision as close as possible to local communities.

Innovative Ukraine 2020: the National Report, the national Academy of Sciences of Ukraine, 2015

⁴² The Cabinet of Ministers of Ukraine Resolution No. 435 as of June 26, 2015 "On approving the formula of distributing the educational subvention between local budgets".

⁴³ Order of the Ministry of Social Policy of Ukraine No. 514 as of May 18, 2005 "On approving the State standard of social adaptation" and other officially approved standards.

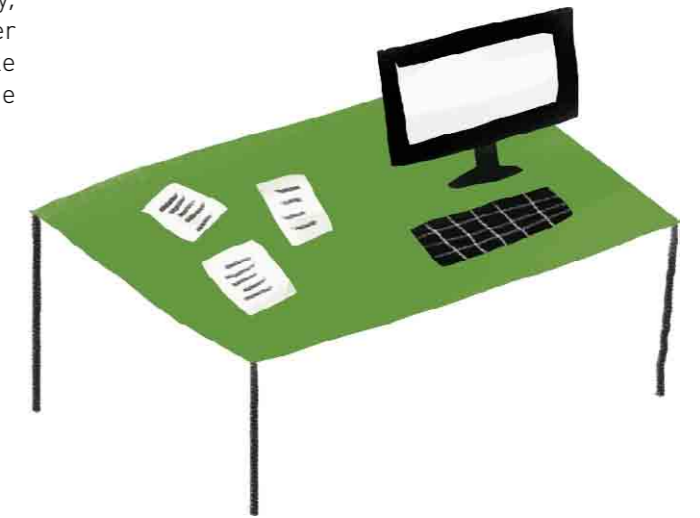
The United Kingdom has three levels of standards. The first one is represented by the National Minimum Standards that establish the framework and determine the outcomes of the service instead of standardising the service delivery process. The second level incorporates legislative regulations, e.g. registration of service providers, inspections, payment for services and the like. Specifically, the Care Standards Act, 2000⁴⁴ belongs to the second level. The third level deals with specific regulatory acts on services of relevant types – adoption agencies, family support centres, weekend centres for children with disabilities, etc. This level includes, for example, Fostering Services Regulations, 2011⁴⁵.

General minimum standards for social and socio-medical services in France are defined in the Code of Social Action and Families (Code De L'action Sociale Et Des Familles⁴⁶).

There are no common standards in Poland but standards exist for each individual service. The standard for social support centres serves as an example, as it is the only standard for a service that can be provided by local authorities, as well as by faith-based and non-governmental organisations or by individuals.

The standards of services in Romania were approved at government level and apply to public, private and public-private social services. The general standards of quality are defined in Art. 3 of the Order 383/2005 and represent a set of requirements organisational and material support, human and financial resources, integrated and tolerant attitude of all employees involved in providing social services to achieve the level of performance required for all providers of social services in Romania.

In practice, the lack of clear standards of service delivery, the absence of mechanisms for funding services rather than institutions and the lack of financial resources make adopted regulations on state social commissioning or the involvement of NGOs as service providers impracticable.



In summary, Ukrainian legislation does meet international standards in many aspects. Therefore, it requires a unified approach with clear definitions; it has to define functions and powers of government authorities and local governments in the context of the application of common standards which promote children's rights and protect their interests at all levels and in all areas.

The above necessitates adequate decision-making at the highest political level, and specific steps to ensure 1) drafting of legislation for the protection of children as a coordinating mechanism, and 2) the simultaneous development and reformation of all components of the child protection system.

⁴⁴ <http://www.legislation.gov.uk/ukpga/2000/14/contents>.

⁴⁵ <http://www.legislation.gov.uk/uksi/2011/581/contents/made>.

⁴⁶ <https://www.legifrance.gouv.fr/affichCode.do?cidTexte=LEGITEXT000006074069>.



**Ten priority steps
to implement
changes in the child
protection system**

1

To include the reformation of child protection and the protection of the rights of children in government programmes and action plans, as well as in the development of the strategies of Ukraine as a national priority. To approve the De-institutionalisation Strategy at a legislative level as a basis for implementing child protection system reform.

2

To establish a dedicated and authorised central executive agency for children and families. To transfer all residential facilities, services and organisations providing services to families and children and as well as the responsibility for coordinating the protection of the rights of children under its jurisdiction.

3

To distinguish mandates and to identify responsibilities of central and local authorities, executive bodies and local self-governments regarding the protection of children and family support.

4

To approve the state-guaranteed basic package of services that should be provided to children and families at a local level.

5

To change the mechanisms for funding child protection and family support systems across all levels of government. To approve: the procedure for the redistribution of financial resources that are "released" following the closure of residential facilities towards the development of services for children and families in communities; the procedure of financing services for children and families with children in communities - ensuring partial funding from the State Budget by introducing special subventions.

6

To introduce a single decision-making process concerning children at risk of losing parental care or being placed outside families, including institutionalisation. To ensure involvement of children in all stages of preparation and adoption of relevant solutions.

7

To develop the state order for training, advanced training and retraining of personnel providing services to children and families and for training specialists in child protection.

8

To introduce a clear process for involving non-governmental organisations in the provision of social services. To arrange social commissioning on the basis of standards of service provision.

9

To regulate the development of inclusive education and ensure funding is available for associated costs and training of specialists.

10

To attract funds for international technical assistance for de-institutionalisation and ensure coordination and monitoring of its targeted and intended use.



Hope and Homes for Children is an international organisation working in eight countries across the world and is a leading expert in de-institutionalisation and the reform of child protection systems.

Our mission is to be the catalyst for the eradication of institutional care across the world. We work to protect children from the harmful effects of institutional care and to ensure they have the opportunity to grow up in a secure and caring family environment and to fulfil their potential.

Hope and Homes for Children has been working in Ukraine since 1998. Our activities are aimed at creating the necessary conditions for reforming the country's childcare system and protecting the rights of children. This includes the development and implementation of family support services, the development of family-based forms of care for orphans and children deprived of parental care and the introduction of comprehensive models for the transformation/closure of residential facilities. Through our work and financial support, 65 family-type children's homes have been established in 13 regions as well as two social mother and child centers. We have developed a model for the reform of the child protection system at a community level. This involved the creation of two centres of social support for children and families - these facilities offer comprehensive services for families and are the first of their kind in Ukraine - and the closure of two institutions. Recently, we launched a comprehensive de-institutionalisation project at oblast level.

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