

Razvoj usluga za djecu i mlade s problemima u ponašanju i njihove obitelji

23. i 24. ožujka 2023.

 **SKRB**
2023





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Ministarstvo rada, mirovinskoga
sustava, obitelji i socijalne politike



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Međunarodna znanstveno- stručna konferencija

„SKRB2023”

Razvoj usluga za djecu i mlade s
problemima u ponašanju i njihove obitelji“

23. i 24. ožujka 2023.



Sustav
Koji
Razumije i
Brine

Međunarodna znanstveno-stručna konferencija „SKRB2023”

- Razvoj usluga za djecu i mlade s problemima u
ponašanju i njihove obitelji



Aaron Greenberg
regionalni savjetnik za
zaštitu djece
Regionalni ured UNICEF-a
za Europu i Srednju Aziju



Deinstitutionalization process in Europe and Central Asia

Aaron Greenberg, Regional Advisor, Child Protection
UNICEF Europe and Central Asia Regional Office

Croatia
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IMPACT OF INSTITUTIONALIZATION ON CHILD'S PRESENT AND FUTURE

Institutionalization seriously impacts child's well-being and their future ability to develop to their full potential.

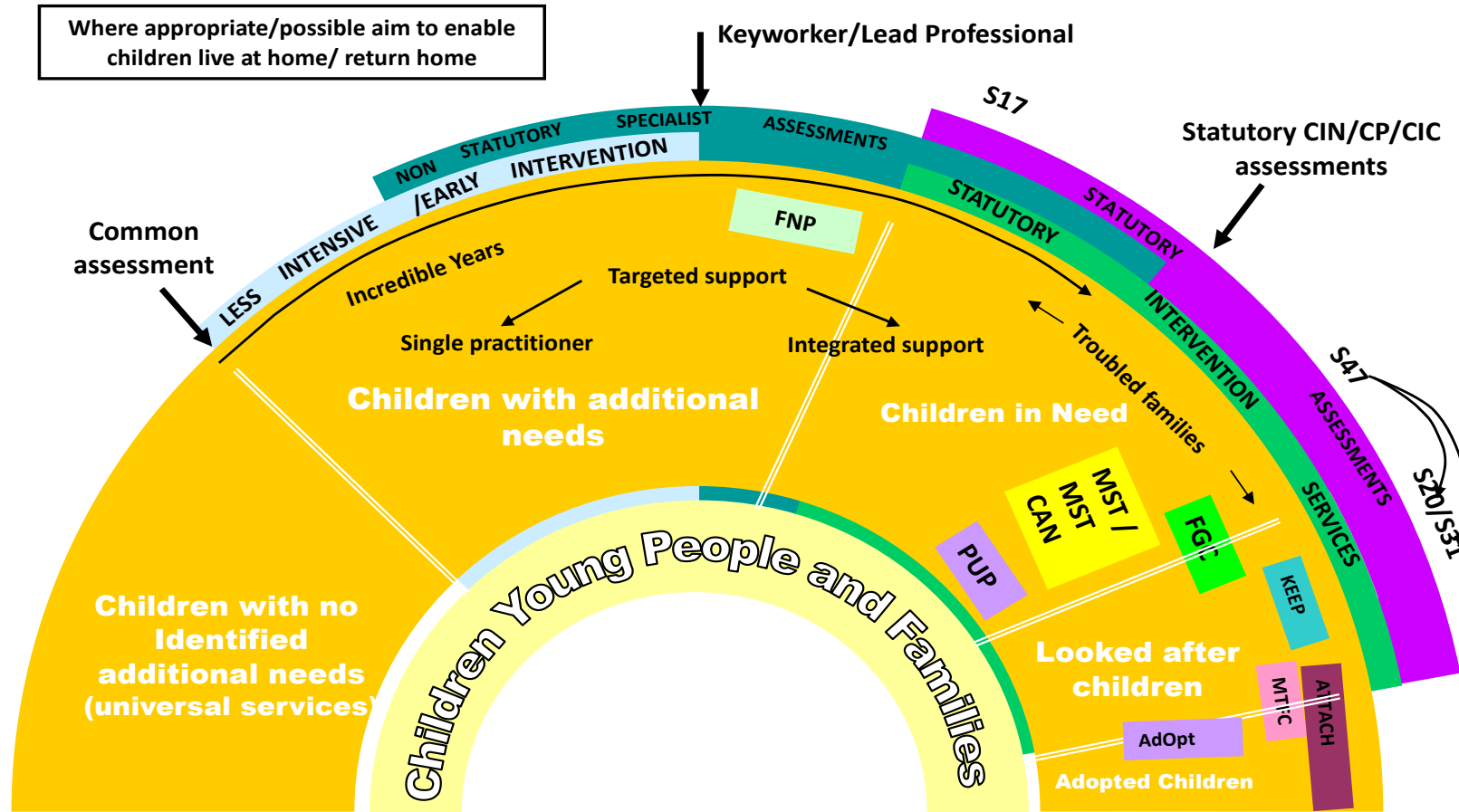


The Convention on the Right of the Child

- The child should grow up in a family environment, in an atmosphere of happiness, love and understanding.
- It is the primary responsibility of parents to raise their children
- It is the responsibility of the state to support parents
- Where the family cannot provide the care they need, despite the provision of adequate support by the state, the child has the right to substitute family care

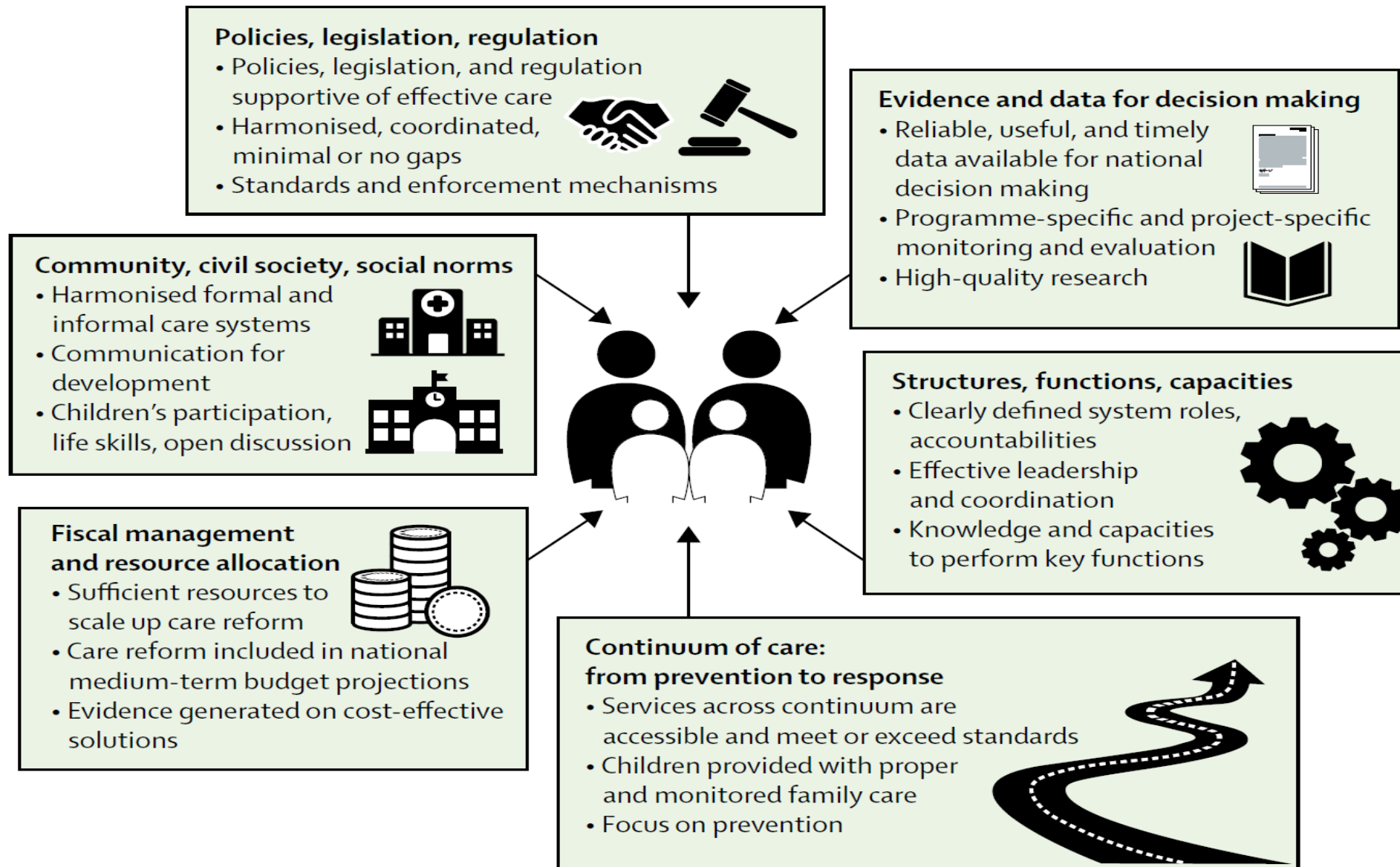
Continuum of needs and interventions model – at the basis of system strengthening

Prevention and Support Model: Continuum of need and interventions



FNP= Family Nurse Partnerships; PUP= Parents Under Pressure; FCG= Family Group Conferences; MST= Multisystemic Therapy; MST CAN = Multisystemic Therapy Child Abuse and Neglect; MTFC= Multidimensional Treatment Foster Care; KEEP= Keeping children with foster parents

UNICEF support to governments to implement child care system reforms



IMPACT OF INSTITUTIONALIZATION ON CHILD'S PRESENT AND FUTURE

Young adults leaving institutional care are more likely to end up in vulnerable living conditions.



DI is based on the realisation that:

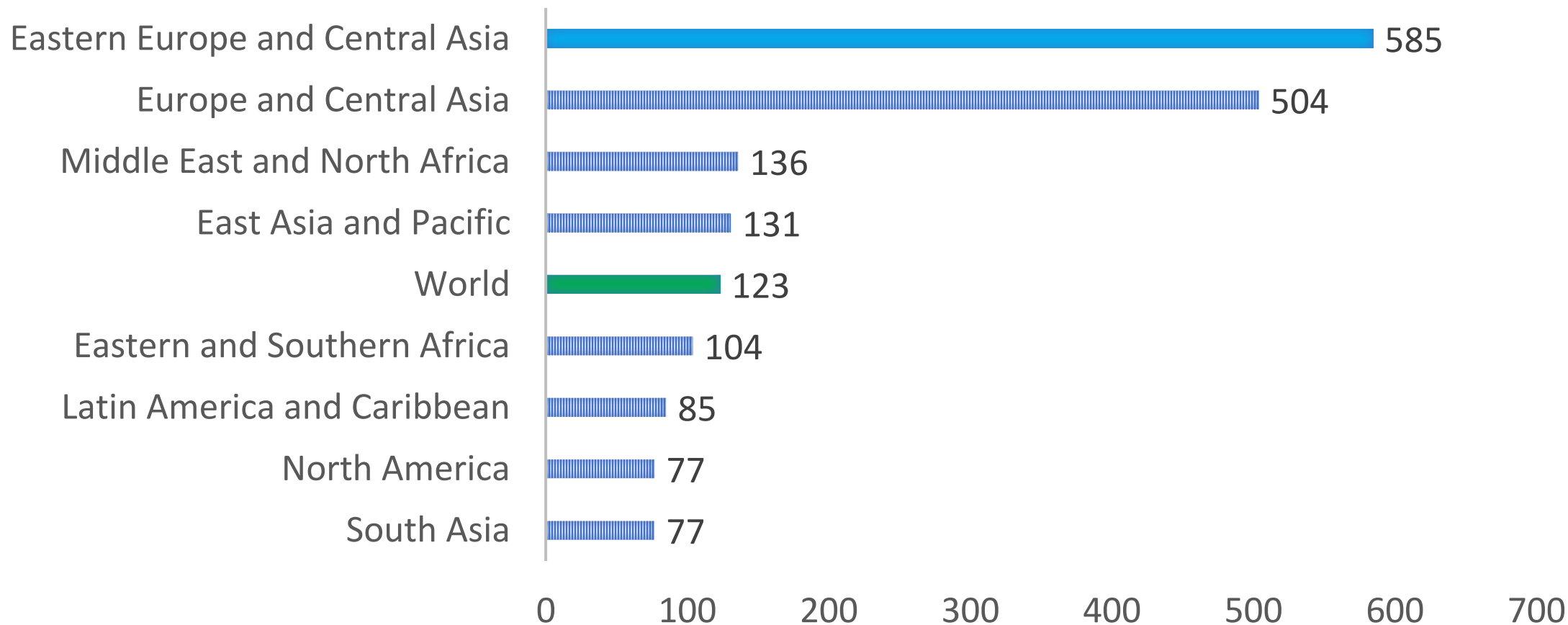
Institutional care is harmful, ineffective, an unethical solution which violates human rights

Families carry out crucial socializing, protective, economic, mediating and nurturing functions for children

These functions are essential for improving developmental outcomes, which are in turn supportive of long-term human and social capital development.

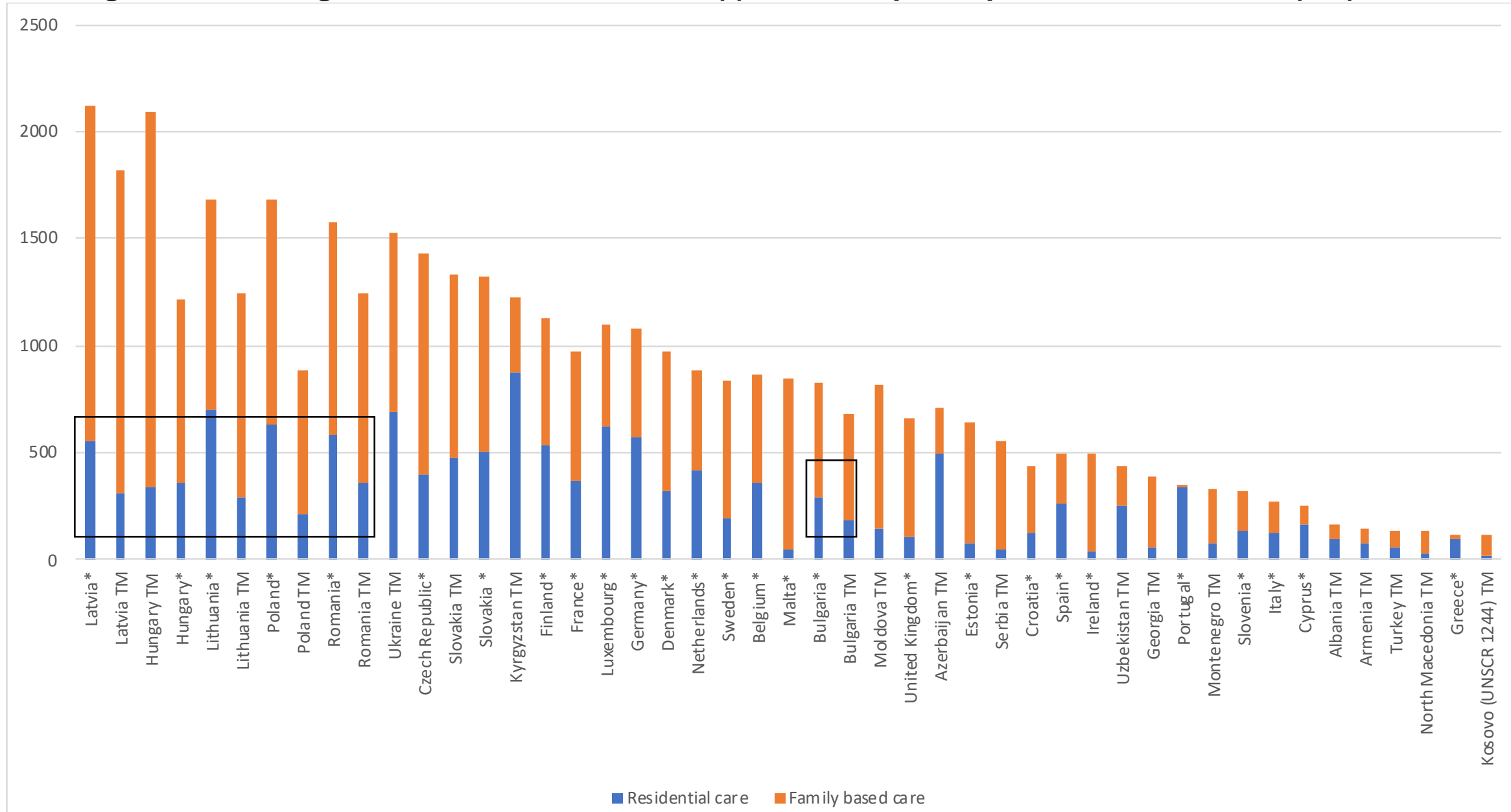
Social policies that strengthen families will improve education and health status and have positive impacts across generations

Number of children in residential care in different regions and the world per 100,000 child population aged 0-17 years (data from 2010 to 2021)

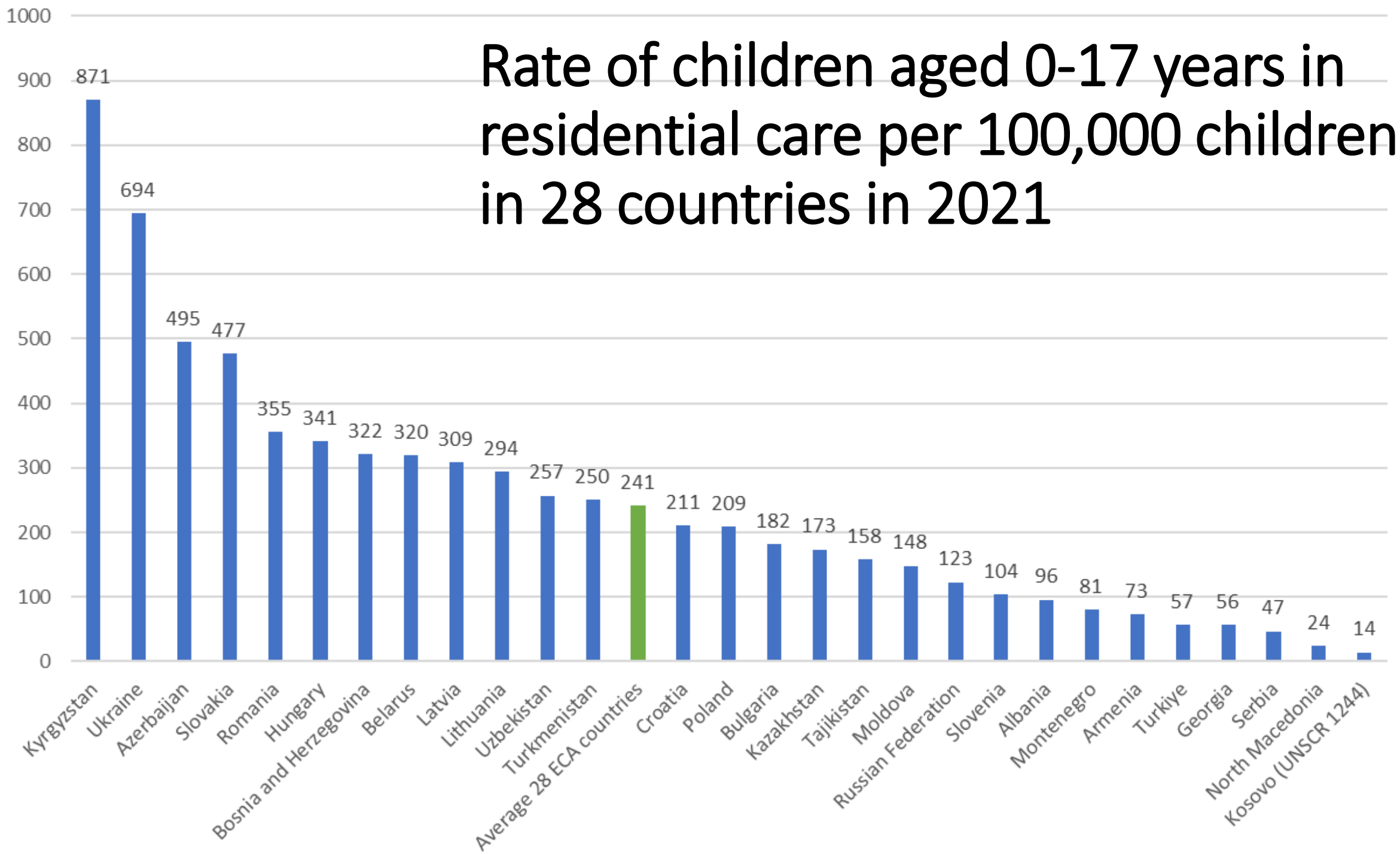


Source: UNICEF data, [December 2022 accessed here](#)

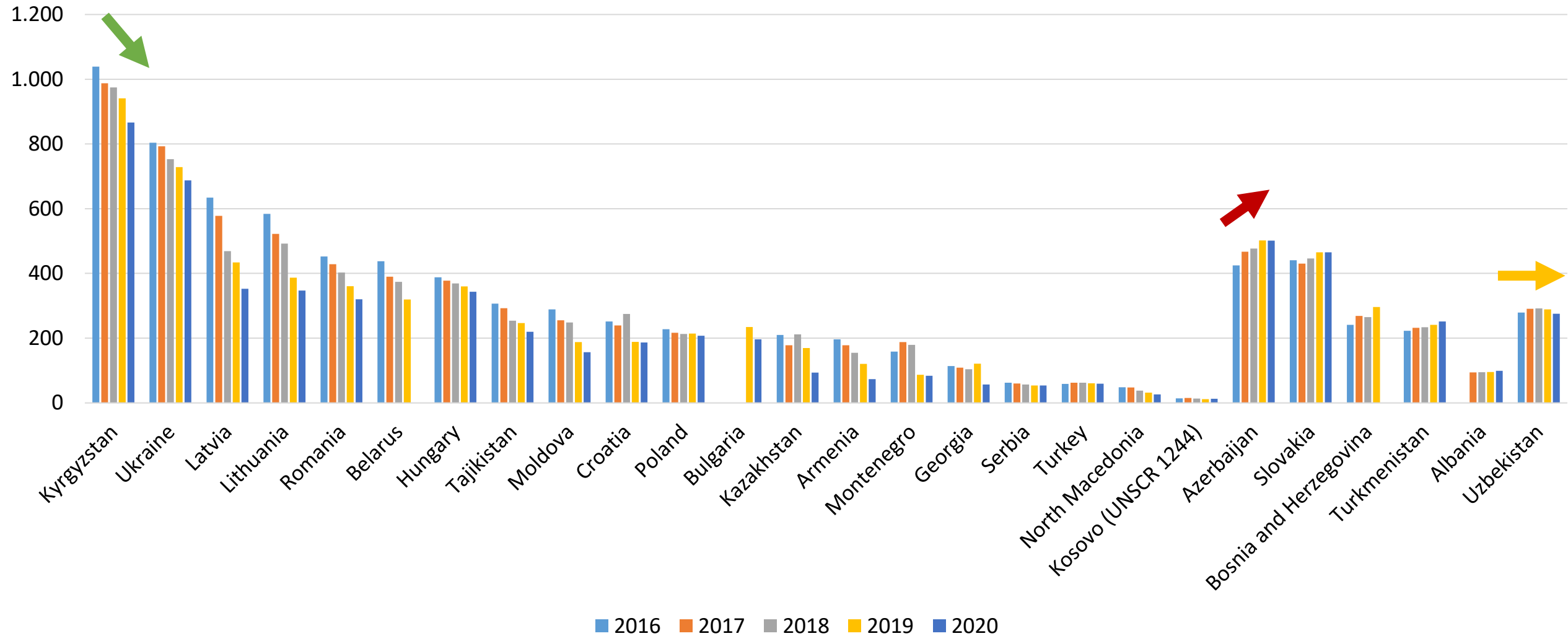
. Rate of children in formal residential and family-based care at a given point for 27 EU countries and the United Kingdom including 7 DataCare EU countries (*) that also participate in TransMonEE (TM)



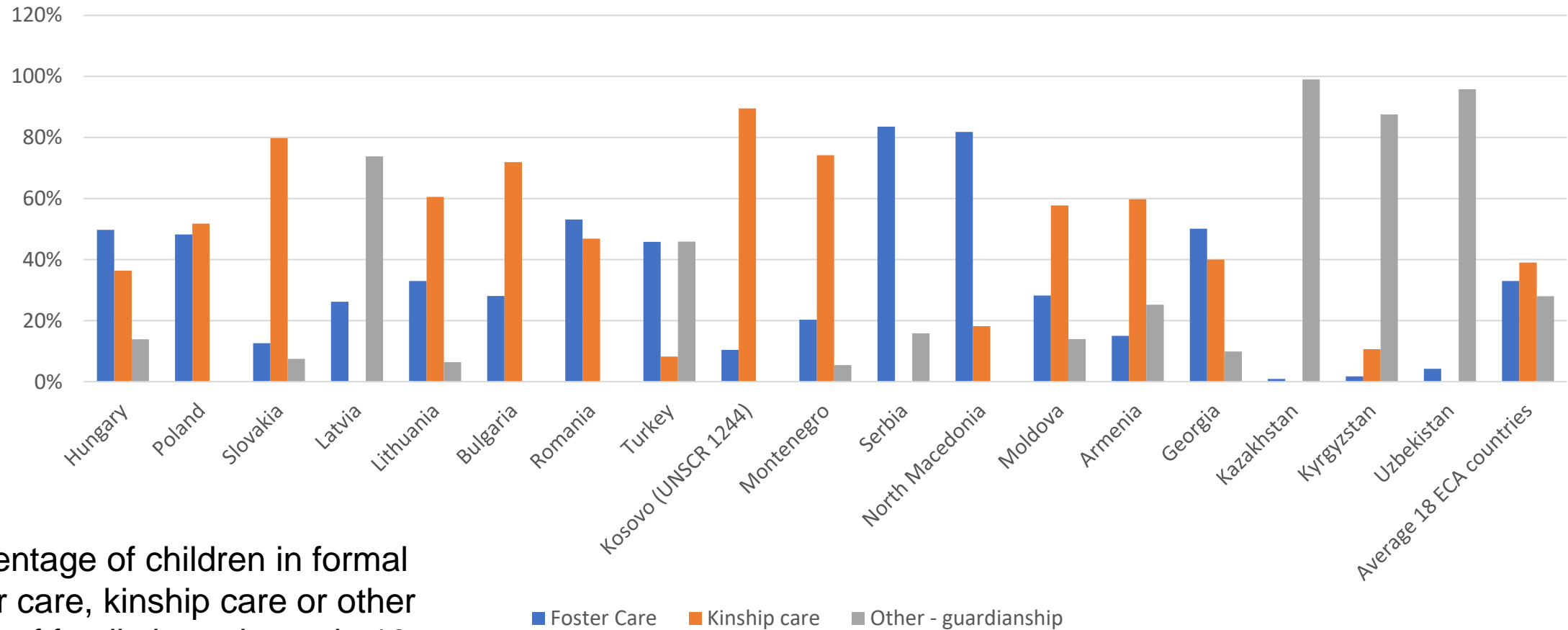
Rate of children aged 0-17 years in residential care per 100,000 children in 28 countries in 2021



RATE OF CHILDREN IN FORMAL RESIDENTIAL CARE AT THE END OF THE YEAR IN 26 COUNTRIES IN THE REGION (PER 100,000)



Use of formal foster care has increased in some countries, while formal guardianship and kinship care continue to represent a significant part of formal family-based care provision across the region



Percentage of children in formal foster care, kinship care or other types of family-based care in 18 countries – 2021



Main trends in DI and child care reforms

- Institutional care is decreasing gradually
- A shift towards small-scale residential care (SSRC), foster care and prevention
- A worrying trend of children with disabilities and 'difficult to place children' being left behind in institutions or 'trans-institutionalized' in SSRC
- Groups of children experiencing difficulties to transition to family and community-based care
 - Children under 3 in institutions and at risk of separation
 - Children with severe and profound disabilities in residential care or education
 - Children placed in residential education due to poverty and complex needs
 - Children with complex emotional needs difficult to be accommodated in family-based care
 - Children at high risk of separation (effective family strengthening and statutory family support services lacking in some countries)
 - Children and young people leaving care
 - Children living in unregulated residential facilities, including small group homes

DI is defined as closure of institutions and simultaneous development of community services, including prevention of institutionalisation and requires

- Early identification of and response to risks of family separation
- Establishing of gate-keeping mechanism, introducing case management, including multidisciplinary response to child's needs
- Development of family support services
- Re-integration of children living in residential institutions
- Development of family based alternative care services
- Creating and strengthening of the social service workforce to work in the continuum of service.
- Continuous monitoring and assistance of children in families and in alternative care
- Closure / transformation of residential institutions

Targeting cash transfers towards the most vulnerable families with children

Education sector: development of inclusive education,

Health sector: early detection & intervention in cases of disability

Poor gatekeeping - easy entries to and difficult discharge of children from institutions

1. **Easy access to institutions.** Often admission is a routine, 'easy' procedure usually taken by a single professional and approved by a senior officer
2. **A proper gatekeeping mechanism and procedures are missing** in many countries.
 - Decisions regarding the placement of the child into any form of care are often made without a thorough and professional assessment of the child
 - Decision on placements often made by the same SW working on the case.
 - Comprehensive child assessment procedures to ensure that children's needs are met are not in place
3. **Children spend years in institutional care** –the status of the child is not determined, parents are not deprived of parental rights, children are not eligible for adoption, spend the whole childhood in institutions
4. **Children stuck in institutional care** –the status of the child is not determined, parents are not deprived of parental rights, children are not eligible for adoption, spend the whole childhood in institutions
5. **Lack of purposeful work** in RCIs to support child development, early learning and language skills. This is linked to both professional attitudes and lack of training. Children were being linked to individualised goals warehoused in environments that offered little stimulation from adults or purposeful work for the child.



Poor universal services

1. Education sector: lack of meaningful inclusive education, linked component to a national or sub-national DI agenda
2. Health sector: lack of early detection & intervention in cases of disability, as a key factor to enable early intervention, and provision of specialized services and additional referral to family support services
3. Social Protection: low coverage of children with cash transfers and universal & targeted services, especially for children with disabilities; disability assessment in need of reform towards social & human rights-based approach to disability inclusion.



Lack of family support and reintegration services

1. Lack of family strengthening and support services to support children in need and statutory family support services to work with children at risk of separation
2. Lack of social workers specialising in family strengthening, statutory family support and reintegration services
3. Lack of effective parenting programmes for the most disadvantaged families and communities
4. Lack of incentives for SW to work on prevention. SW spend less efforts and time on placing children in institutions than they would spend on working to prevent separation and institutionalisation
5. Punitive approach in work with families
6. Reintegration of children is not prioritised, often no attempt to reassess families for reintegration



The foster care system is underdeveloped

1. Often governments recruit foster carers without building the system around them - to include legislations, budgets, processes and support services in place in order to allow for the child care/ social services systems to recruit and maintain foster carers able to deliver services to children with various care and protection needs.
2. Traditional foster care versus professional foster care
3. Long term placement in foster care versus diverse types of placements
4. Charity approach to foster care versus professional foster care
5. Poor capacities to undertake recruitment, training, support and supervision of foster carers
6. Poor opportunities for professional growth of foster carers
7. Lack of specialised workforces for foster care



Other factors impacting on institutionalisation in the region

Poor planning and silo working: Where progress is slow or in reverse it is too frequently related to poor planning and co-ordination between Ministries and national, regional and local services in developing appropriate alternative provision

Poverty: The amounts paid in allowances to families with children with disabilities, including foster families, are rarely sufficient to cover the significant additional costs of caring for a child with disability.

The poverty of expectation: It affects all children, but those with intellectual disabilities in particular. The perception that the children will not be able to progress in their development with the consequence that little thought is given to providing the quality of care.

Lack of effective social work and case management: A lack of an appropriately qualified social work profession is hampering change across the region as it is not possible to provide effective help to families across the early intervention and child protection spectrum.





Existing myths

- Children with profound disabilities or children with complex emotional needs remain in large or smaller institutions, “needing 24/7 care”
- It is better to invest in alternative care than to “re-educate/correct the families”
- Some institutions will always be needed to be maintained and used in crisis
- Children’s education comes first in detriment of the child’s living in a family environment
- Professionals come first in particular when deciding about the care and education of children with disabilities
- Foster care impossible for children with disabilities and ‘behavioral issues’
- Children with special needs need day care centres, which are a good alternative to schools



Transformation versus closure of institutions – myths

- All institutions should/ can be transformed into something else – to overcome resistance
- Institutions can transform themselves from inside
- If the institutions are closed – the workforce is not needed and will remain outside the job market
- Professionals (defectologists, speech therapists, psycho pedagogues, psychologists) can only work in institutions /building

What needs to be done?

- A **fundamental change** in the child care system is needed
- **Political will**, institutional commitment and ownership over the transformation process
- **Coordinated government approach** which ensures reforms, budget and attitude on all levels & sectors
- **Properly plan and finance change**, including wider investments in child care and protection systems
- **New organisational structures** and new methods of work
- **New services to be established, developed and resourced** - A full continuum of family & community-based services
- **Significant investments in and expansion of the social service workforce** as well as integrated case management systems
- Making **wider investments in child care and child protection and social services systems**
- **Development of necessary quality control mechanism** for the whole system: accreditation of service providers, inspection of care services, efficient financing mechanisms to ensure quality of care



THE ROLE OF THE CHILD CARE SYSTEM



1.
Supports families to prevent child separation and helps children reunite with the family



2.
Protects child rights, assists with an appropriate family alternative, supports institutionalized children



A coherent child-care system should always aim to ensure family care for ALL children

- All services developed as part of a comprehensive child-care system should aim to:
 - strengthen families to care for their children,
 - prevent unnecessary separation of children,
 - provide family-based care to children who are separated from their families and
 - prioritize child reintegration and family reunification at any stage of a child's journey in the care system.

A note on Terminology

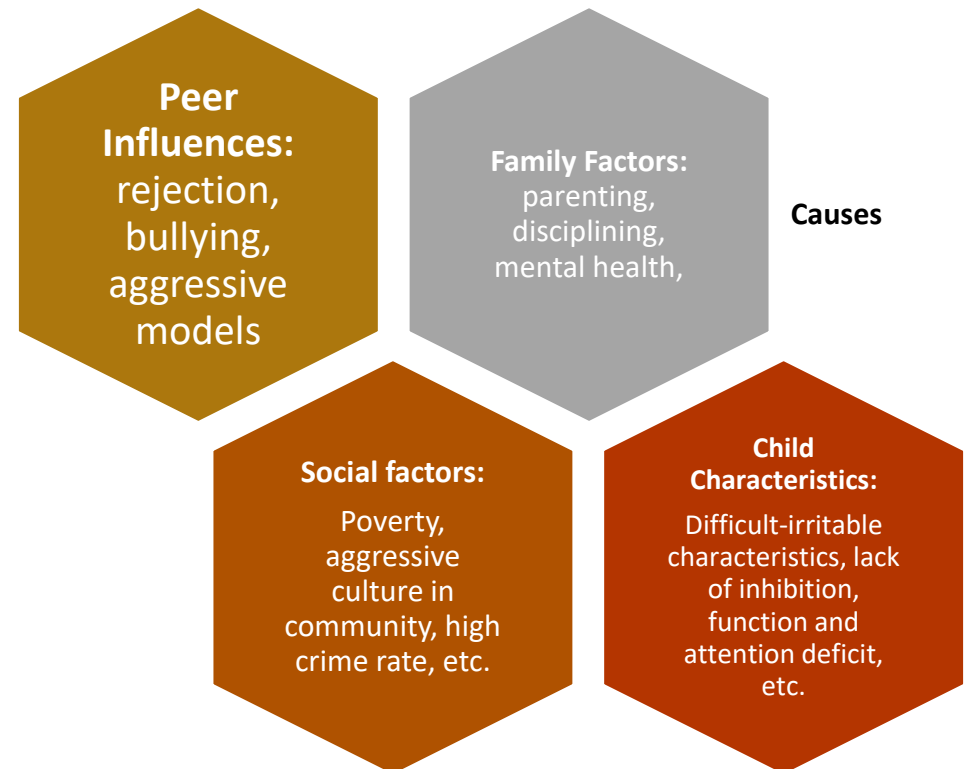
- Children and young people with behavioral problems/ disorders
- Children with anti-social or aggressive behavior
- Children with delinquent behavior



Preferred:

- Children with complex emotional / behavioural needs
- Externalised behavior:
“Externalizing behavior is problem behavior directed outwardly toward others or the social environment. It is characterized as an under-controlled and out-directed mode of responding. They stem from externalizing emotions like anger and hostility.”

Puts the focus on the child as the source of the problem.
Stigmatizing.
Shifts attention away from the root causes.



Anti/social Disrupting Behavior and Justice

- A continuum of behaviors : from Anti-social to Offending behaviours.
- A relatively unaddressed child justice issue so far is the treatment of **children under the minimum age of criminal responsibility (MACR)**
- MACR 14 years recommended by the Committee on the Rights of the Child
- Shift attention from the **Behaviour** to the **Vulnerabilities**
- Children under the MACR should **not be considered (alleged) child offenders** but, first and foremost, children in need of special protection
- Handled by **social workers through case management**

UNICEF 'Guidance Note on Systematic Responses to Children under the MACR who Have Been (Allegedly) Involved in Offending Behaviour'



Quote – Justice Renate Winter:

“I want to give a really strong message that never ever a child under the MACR can be transferred to a closed institution. The same goes for children above the MACR who have been involved in status offences or antisocial behaviour. They have not committed any penal offence and, therefore, cannot be deprived of their liberty. I do know that this will be difficult, especially as police and prosecution always want to have such children ‘out of the way’. And parents as well sometimes.”

Source: Roundtable on 29-11-2022.

Out-of-home placement

- Out-of-home placement should be organised by the social welfare system and used only as a **measure of last resort as well as for the shortest appropriate period of time.**
- Placement might be necessary, for example, when the child and/or his/her parents/ caregivers refuse to cooperate or to give consent to duly decided family/community-based measures.
- *“In the exceptional cases that require an out-of-home placement, such alternative care should preferably be in a family setting” (CRC, GC 24)*