

Children without parental care or at risk of losing it

Children with inadequate or no parental care are at risk of being denied a caring and protective environment. The State has the main responsibility to ensure that appropriate legislative, political and financial measures are undertaken in order to provide adequate alternative care options “with priority to family- and community- based solutions”. According to the particular needs of individual children, different forms of care should be provided.

The EC-Communication points out the fact that children living with poor parents or who cannot live with their parents are particularly exposed to poverty, exclusion and discrimination. It also stresses that parental poverty and social exclusion are factors which seriously limit the opportunities open to children and their access to their rights. It also underlines the right of children to maintain relations with his/her parents. Without mentioning out-of-home care, the Communication states that the places where children live influence their situation but it also underlines the right of children to maintain relations with his/her parents. Regarding OVC and HIV-AIDS, it states 140 million children are orphans and that this number is growing, due to HIV/AIDS.

In the framework of the future EU strategy on children, SOS Children’s Villages urge the European Institutions to take action to improve the situation of children without parental care, both in Europe and in the EU’s external policies.

Recommendations for line of action:

The best possible environment for children’s development is the family. On that basis, all stakeholders should ensure efforts to sustain and empower families to exercise their functions to care, protect and empower children.

In situations where it is in the best interest of the child to be separated from his/her family, the most appropriate form of out-of-home care should be identified and provided.

When alternative care is provided, qualitative standards should be applied, to ensure the respect of the child’s fundamental rights, as enshrined in the UN CRC.

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1. Framework

The UNCRC provides a key framework to guide programme and policy interventions with and for children without parental care. The preamble of the UNCRC emphasises the role of the family as *'the fundamental group of society and the natural environment for the growth and well-being of all its members and particularly children.'* Articles within the convention seek to prevent separation of children (article 9), to support family re-unification (article 10), to provide alternative care for children when required (article 20), with regular reviews of care plans to ensure attention to their individual needs and development (article 25), and children's own views (article 12). Taking account of the key principles of the CRC, care responses must always be made in the child's best interests (article 3), tailored to the individual needs and characteristics of each child. Action to fulfil the CRC also enables a focus on some of main causes for children's separation from the families, namely poverty (article 27), maltreatment (article 19), discrimination (article 2), armed conflict (article 38) and disability (article 23).

2. Situation of children without parental care

2.1 Definition

Children may be without parental care for a variety of reasons (ISS & UNICEF, 2004). However, groups of children living without parental care include:

- Children who have lost one or both parents as a result of HIV/AIDS, conflict, illness or other cause
- Children living in child headed households
- Children who have been separated from parents, usually in the context of armed conflict or natural disaster,
- Children living in residential institutions (including those children who have been abandoned by their parents, for economic or other reasons),
- Children who have been placed in an alternative care setting as a result of an administrative decision (by a welfare or protection body) or a court ruling that removal from parental care is in the child's best interests,
- Unaccompanied children who arrive in another country seeking asylum or immigration, or as a victim of trafficking,
- Children who are left without care for the majority of the day/night for different reasons (including: parents illness, disability or alcoholism; parents away working long hours; parents imprisonment).
- Children who live and work away from their home (e.g. child domestic workers)
- Children associated with armed forces
- Children who leave their family home, including runaways and children living on the streets.

One child can be found in more than one of the categories mentioned above (e.g. street children can also be disabled and/or orphaned).

2.2 Main causes leading to children falling out of family care

To identify the causes leading to the situation of children without parental care, children must be considered in their broader context, as a range of socio-political, cultural and economic factors impact upon their and their families' lives.

Among the root causes, poverty, discrimination, HIV/Aids, violence and wars/emergency situations are to be stressed, even though they are far from being exhaustive and are very often interlinked.

POVERTY

Poverty is not limited to developing countries. One in every six of the rich nation's children is living in poverty. In total, approximately 47 million children in the nations of the OECD live below their national poverty lines (UNICEF Innocenti Report Card, 2000). In different regions of the world, poverty is repeatedly described as the first reason for families resorting to institutional care or alternative care placements for their children.

In Western Europe 69% of younger children are placed in care due to abuse and neglect, 23% for social reasons (family ill health, parents in prison), 4% abandonment and 4% disability. In comparison in other parts of Europe 32% are abandoned, 25% social orphans (family ill health and capacity), 23% due to disability, 14% abuse and neglect and 6% orphans (Browne et al, 2005). Thus, as suggested by Carter (2005) the reasons for institutionalisation are associated with poverty and social changes in countries experiencing social transition. Browne et al (2004, 2005) have found that countries in Europe with lower GDP and health expectations have larger proportions of younger children in institutions.

DISCRIMINATION

As underlined by the EC Communication, over 200 million children live with serious disabilities and in this regards it must be underlined that in some cultural contexts, discriminatory attitudes towards children with disabilities contribute to increased trends of institutionalisation, as children are segregated from families and communities. Links between disability and poverty are well established in both developing and developed countries (UNICEF Innocenti Insight, 2005).

Discrimination of children from minorities also result in increased institutionalisation of children, separating them from their parents.

Many children are also stigmatised and discriminated against if they are born out of wedlock. In Central and Eastern Europe single parenthood and very young parenthood are precipitating factors contributing to children being abandoned and placed in institutional care (Carter, 2005). One in ten births worldwide is to a mother who is still herself a child. More than 9 out of 10 of these births take place in developing countries. In many parts of the world particularly in contexts where strong religious beliefs are prevalent (Islamic, Christian or Hindu) the situation affecting unmarried mothers and care of their children is of particular cause for concern.

HIV/AIDS

In Sub-Saharan Africa, parts of Asia, Latin America and Caribbean there are increasing numbers of children being orphaned as a result of HIV/AIDS (UNAIDS/UNICEF/USAID, 2004). There are growing HIV/AIDS epidemics in Eastern Europe, Central Asia and East Asia. Pakistan and Indonesia may be on the verge of a serious epidemic. In Latin America low national prevalence rates is disguising epidemics in urban centres and among certain populations. In countries in the Middle East and Northern Africa are being overlooked, in part due to cultural inhibitions. The epidemic continues to intensify in Southern Africa. However, infection rates are dropping in some parts of Eastern Africa (UNAIDS/WHO, 2005).

Within Sub-Saharan Africa the majority of orphans are being cared for by their relatives, but with insufficient support (UNAIDS/UNICEF/USAID, 2004; Save the Children 2005; World Vision, 2005). Fostering is a deep rooted practice in Africa in the form of kinship systems and family networks that provide safety nets for children, not just orphans (World Bank/UNICEF, 2002). However, the HIV/AIDS epidemic is tearing away at the social, cultural and economic fabric of families, the first line of protection and provision for children that safeguards against exclusion and exposure to harm (UNICEF, 2005b). Disproportional burden falls on elderly, female headed, child headed and poor households, yet with insufficient support from governments and other agencies, a negative cycle of child rights violations faced by children may increase (World Bank/UNICEF, 2002; Tolfree, 2005).

VIOLENCE

Emotional, physical and sexual abuse faced by children within the home is one of the main reasons why children may be removed from family care (by State authorities) or choose to run away from their family (International Save the Children Alliance, 2005; Martin and Parry-Williams, 2005; SOS-Kinderdorf International, 2005). Girls face increased risk of sexual abuse, whilst boys face increased physical violence (International Save the Children Alliance, 2005).

WARS/ EMERGENCY SITUATION

Refugee and internally displaced children may become separated from their families, lose their homes and find themselves living in poor conditions that jeopardize their health and education. The loss of family protection can leave them at significant risk of military recruitment by armed groups and forces, abuse and sexual exploitation. Girls are especially at risk of abduction, trafficking and sexual violence including rape which is used as a weapon of war (UNICEF, 2005b).

2.3 Child Rights violations faced by children without parental care

When children are without parental care they often enter a negative cycle of marginalisation, discrimination, abuse and exploitation.

As a result, all groups of children without parental care face increased risk of abuse, exploitation and violence, including sexual exploitation, risk of being trafficked and recruitment to the armed forces (Yuster, 2005; World Vision, 2005; UNICEF/World Bank 2002; UNICEF, 2005b).

Separated children seeking asylum, children living on the streets, as well as other groups of children without parental care may enter similar negative cycles of marginalisation characterised by violation of their rights to survival, protection, development and participation.

Moreover, in different parts of the world, there is evidence that children without parental care and/or placed in care face educational disadvantages¹.

Children who are orphaned or made vulnerable by HIV/AIDS experience a wide range of rights violations (World Vision, 2005; Williamson, 2000) including: deprivation of parental care (article 9), stigmatisation and discrimination (article 2); lack of food, shelter and clothing (article 27), lack of access to health care (article 24). Furthermore, children are forced to drop out from school to help care for ill parents, or siblings and/or to earn an income to contribute to the diminished family livelihood - thus depriving them of an education (article 28, 32). Girls are more likely to be forced to drop out to care for family members, including siblings; and are at increased risk of sexual exploitation (article 34, 35) and HIV/AIDS infection (Human Rights Watch, 2005; Firelight Foundation et al, 2005). Overall, the HIV/AIDS epidemic has a significant negative impact on the education system for children, as in addition to school drop out, schools are becoming dysfunctional in the hardest hit countries as significant numbers of teachers are lost due to illness and death (UNAIDS/UNICEF 2005a MFoA). The legal rights of orphan children also need protecting, as children are at high risk of being separated from their siblings, losing their rights to family property (article 8) and being mistreated by caregivers who may not have their best interests (article 3) at heart (Firelight Foundation et al., 2005).

The violations of rights facing many children because they live in institutional care have also been widely reported (Save the Children, 2003; Carter, 2005; Williamson, 2004a; Tolfree, 1995; Tolfree, 2003; Williamson, 2004b; Cantwell, 2005). Many features of residential care are an abuse of children's rights and pose a serious threat to their normal developmental processes (Save the Children, 2003). Children in institutional care are more likely to suffer from attachment disorders, developmental delay and deterioration in brain development (Johnson et al., 2006). Brain studies have revealed how the right hand side of the brain concerned with emotional behaviour and responses develops in the first 3 years. Thus, during this period quality interaction between the child and at least one main carer is critical (Carter, 2005). Children in residential institutions are denied rights to parental care (article 9) or to family reunification (article 10). They often live in over-crowded, poorly resourced premises (particularly in CEE/CIS region and developing countries) - thus violating their rights to a decent standard of living (art 27). Bureaucratic regimes within institutions often deny children their rights to play (article 31), and freedom of expression (article 12 and 13). Furthermore, children are likely to lose their identity (article 7, 8) and may be forced to change or adopt a religion that was not their own (article 14). Children from

¹ In the UK, children in care perform less well in school (Social Exclusion Unit, 2003). In HIV/AIDS affected countries illness and death within a household has a negative impact on enrolment, attendance and performance of a child in school (World Bank/UNICEF, 2002). In Mozambique only 24% of children who have lost both parents attend school compared with 68% of children whose parents are alive (Currah and Whaites, 2003).

institutions often face discrimination and stigma from the wider community (article 2). The prevalence of neglect and abuse including physical, emotional and widespread sexual abuse of children (article 19, 34, 35) within residential institutions has been established in the West, as well as in developing countries (Cantwell, 2005; UNICEF, 2005). Children in institutions are often neglected, excluded from decision making processes (article 12), without effective care planning or reviews processes (article 25), such that their placement is not in their best interests (article 3). Furthermore, children who have grown up in care without access to family care - may face an abrupt entry into adult life, with increased risks of poverty, homelessness, alcoholism, drug use, violence and abuse, economic, sexual and criminal exploitation (UNICEF Innocenti Insight, 2005; Save the Children, 2003).

Common Violations of Rights of Children Orphaned	
Survival:	Development:
Poverty (article 27)	Increased likelihood of school drop out and reduced performance in school (article 28)
Reduced access to food (article 24, 27)	Reduced opportunities to play (article 31)
Reduced access to adequate shelter (article 27)	Increased stigma and discrimination (article 2)
Lack of access to appropriate health care (article 24)	Psycho-social distress
Lack of social security (article 26)	Reduced guidance and love from adults (article 9)
	Identity and inheritance rights (article 7, 8)
Protection:	Participation:
Increased risk of neglect and abuse (article 19)	Lack of opportunities for expression and participation decision-making in alternative care settings (article 12, 13)
Increased risk of sexual abuse and sexual exploitation (article 33, 34)	Lack of opportunities for association (article 15)
Increased risk of child labour and economic exploitation (article 32) - increased household responsibilities	Lack of information (article 17)
Increased risk of living on streets, survival behaviour (articles 9, 10, 34, 37, 39)	
increases risk to coming into conflict with the law (article 37, 39)	
Increased risk of recruitment in armed forces (article 38)	
Lack of effective care planning or reviews (article 25)	

3. Setting up priorities

There is currently an unprecedented level of awareness of the need to respond to the rights of children without parental care due to: the scale of children orphaned by HIV/AIDS; awareness of bad conditions of institutions in many CEE/CIS countries; in-depth investigations of abuse in care facilities in Western Europe; and inappropriate responses by private foreign agencies in responding to children in emergency situations (Cantwell, 2005). Furthermore, among key players at a global level including UNICEF, UNAIDS and child focused international organisations (including International Social Services, Save the Children, SOS Children's Villages, EveryChild, Defence Child International, BICE, World Vision, Terres des Hommes, International Foster Care Organisation, International Federation of Social Workers) there is increased agreement and joint advocacy regarding the need to support State governments to develop effective care and protection systems at all levels (local, national, regional) based on the principles of children's rights, and to implement multi-sector strategies which address the root causes of separation including poverty, HIV/AIDS, conflict, discrimination and abuse (see UNICEF 2005, Tolfree 2005, Cantwell, 2005).

In this context, there is a global concern to redefine the residential care system and to support family based care models, including prevention work with biological families.

In May 2003 the **Second International Conference on `Children and Residential Care`** was held in Stockholm, supported by the Swedish Foreign Ministry and the Swedish International Development and Co-operation Agency. The "**Stockholm Declaration**", adopted by 600 individuals from governments, civil society and the research community from 71 countries reaffirmed State responsibilities to protect children's rights by ensuring: prevention work (including fighting discrimination and supporting families); use of institutional care only as a last resort and as a temporary response; more effective monitoring of care systems in line with CRC and agreed standards; and increased participation of the children and young people. Civil society organisations were encouraged to: assist in the development of strategies to deinstitutionalise children and create alternatives; to promote non-discrimination; to mobilise communities to support families to prevent children from being deprived of family care; to push governments to fulfil their commitments under the CRC to children in public care; and to support children's participation.

On that basis, SOS Children's Villages urges the European Union to take action and to include in its strategy on Child Rights the objective to improve the situation of children without parental care, both in Europe and worldwide, on the basis of the following three priorities:

- ***Prevention and family strengthening work (3.1)***
- ***Recognition of child rights standards by ensuring quality care for children in all processes of out of home care (3.2)***
- ***Deinstitutionalisation and promotion of family based care models (3.3)***

3.1 Prevention and family strengthening work

A significant number of national and international, governmental and non-governmental duty-bearers and stakeholders in the field of child care claim the need of strengthening families in order to support them to cope with difficult situations and in this way to prevent child abandonment. These efforts are based on an understanding that the best place for a child is in a secure, caring and protective family, alongside broader research (Carter, 2005, Save the Children, 2003, Desmond et al, 2002) that have shown that keeping a child in her/his family have long-term benefits for the society (fully integrated and active citizens able to contribute to the development of their communities, prevent unnecessary budget allocation for expensive residential care, etc.)

In the framework of the monitoring of the National Action Plan on Social Inclusion (NAPs/Inclusion) from a children's rights perspective, Eurochild reported that the need to support parents in their role as principal care-givers and educators of children is addressed within many NAPs/Incl. Nevertheless, the report reveals a concern that the approaches adopted in government policies increasingly focus on perceived behavioural problems, placing all the responsibility on parents rather than addressing structural problems (Eurochild, 2007).

Under family strengthening measures include a range of interventions which support family life and help to diminish the risk of children needing care outside of the family.

In 2005, in the framework of the General Day of Discussion on children without parental care, the CRC committee reiterated the importance of prevention work and strengthening of families as 'the natural environment for the survival, protection and development of the child'. In this regard, the recommendations from the Committee stressed that:

- Where-ever possible children should be kept in their own families and in their own distinctive communities. Community protection networks should be supported as an active measure towards local monitoring and responding to a range of care and protection needs of girls and boys, supporting children and families at an early stage.
- State governments should develop national policies which strengthen families, by providing subsidies and material assistance, including access to social and health services, child-sensitive family counselling services, education and adequate housing.
- Local multidisciplinary teams working with the most vulnerable families are more likely to reach the

family and to find individual solutions based on the actual situation of the family.

- Local level authorities should be strengthened (with human and financial resources) to ensure children have access to basic services in their own communities.

In this framework, the draft UN Guidelines for the Protection and Alternative Care of Children without Parental Care states that: family preservation efforts should aim to empower families with attitudes, skills, capacities and tools to enable them to provide adequately for the protection, care and development of their children. Such efforts should draw on the complementary capacities of the State and civil society, including religious leaders and the media. They should include:

- a. family strengthening approach that may include parenting courses, the promotion of positive parent-child relationships, conflict resolution skills, and opportunities for income generating activities.
- b. Support services, including financial assistance and care facilities for parents and children together when necessary, designed to enable particularly disadvantaged and vulnerable families to fulfil their responsibilities to their children. Such services should be directly accessible at community level and actively involve the participation of families as partners.
- c. Youth policies aiming at empowering youth to positively face the challenges of everyday life and preparing future parents to make positive decisions with respect to their reproductive health and to fulfil their responsibilities in this respect.

Accordingly, UNICEF's mid term strategy 2006-2009, 'seeks to reduce the number of children separated from their families and strengthen national capacities to ensure access by poor families to services and safety nets needed to protect and care for their children'. UNICEF underlines that a human rights approach and gender equality is cross-cutting, and includes endeavours to support parents, caregivers and families to meet their responsibilities for upbringing, care and development of their children.

At the European level, the Report "Children in institutions: prevention and alternative care" prepared by the Working Group on Children at Risk and in Care of the Council of Europe (Strasbourg, 19 May 2004) also present a spectrum of different form of work which could be done to support families, like gate keeping as a mean to family support, partnership with families, enhancing Parenting Skills - Parent Management Training, developing competence and family services.

To respond to the challenges of HIV/AIDS, the 2004 Strategic Framework for protection, care and support to Orphans and Vulnerable Children Living in a World with HIV and AIDS also stressed the need to strengthen the capacity of families to protect and care those children.

In the NGO field, many organisations emphasise the need to take this family strengthening approach, among which: International Social Service, Save the Children, EveryChild, International Foster Care Organisation (IFCO) and the Global Better Care Network.

In this framework, and on the basis of its experience with children in the 50 last years, SOS Children's Villages has developed family strengthening programmes to address the situation of children who are at risk of losing the care of their biological family. Those programmes aim to prevent children from falling out of their family and community. This is done by supporting families to strengthen their ability to care for their children, and strengthening safety nets for vulnerable children and their families within the community.

3.2 Quality standards for children in out-of-home care

In recent years, many initiatives were undertaken at different levels to ensure guidelines and quality standards for children in out-of-home care.

1. Council of Europe

In 2005, both the Parliamentary Assembly and the Committee of Ministers of the Council of Europe adopted a set of standards for children in residential care, to ensure that children who are placed outside their families grow in dignity, in the best possible conditions, without being marginalised either during their childhood or in adulthood, and without obstacles to becoming fully-fledged citizens in European societies. For this, the Recommendations urged the governments of Members States to:

→ adopt such legislative and other measures as may be necessary, including national guidelines and action plans, to guarantee that the principles and quality standards of this Recommendation are complied with, with a view to achieving full implementation of the rights of children living in residential institutions, irrespective of the reasons for and the nature of the placement;

→ ensure, by appropriate means and action, a wide dissemination of this Recommendation to children and other relevant persons and bodies.

2. United Nations

Following the General Day of Discussion in 2005, the CRC Committee recommended that a set of international standards for the protection and alternative care of children without parental care be developed, for adoption by the UN General Assembly.

These standards were meant to have a multi-track approach, i.e. to regulate the separation and placement into out-of-home care, to standardise the out-of-home care and the transition from the out-of-home care back to the family or into society and at the same time to seek measures how to prevent placement and institutionalisation. In this regard, the Committee underlined the need to hold consultations with children and their parents throughout the process.

The current draft international guidelines seek to ensure that, on the one hand, children do not find themselves in out-of-home care unnecessarily and, on the other, out-of-home care provided is of a type and quality that corresponds to the rights and specific needs of the child concerned. They are designed to promote, facilitate and guide the progressive implementation of the Convention on the Rights of the Child in this particular area of concern. The non-binding Guidelines, for adoption by the United Nations General Assembly in September 2007, address not only governments but also international bodies and organisations, civil society, professionals, voluntary organisations and the private sector to the extent that they are directly or indirectly involved with organising, providing or monitoring out-of-home care for children.

3. Various existing global and regional initiatives

In taking forward recommendations from the UNCRC committee to develop International Guidelines for the protection and alternative care of children a number of existing global and regional initiatives may be build upon including:

- ***Working papers developed by International Social Service/UNICEF***: A Call for International Standards and special papers concerning: kinship care, HIV/AIDS, and working in emergency contexts.
- ***NGO working group on children without parental care***, established to further advocate and implement international standards.
- ***Global Better Care Network***, which brings together organisations and individuals concerned about children without adequate family care
- ***Quality4Children***: joint initiative by FICE (International Federation of Educative Communities), IFCO (International Foster Care Organisation) and SOS Children's Villages to establish quality standards for children in care in European countries.
- ***Save the Children (2005) Raising the Standards***: A set of quality child care standards developed in east and central Africa, based on CRC and applicable to a range of care settings
- ***Changing Minds, Policies and Lives*** joint project by World Bank and UNICEF

3.3 De-institutionalisation and promotion of family based care models

During the 1960s and 1970s, a debate arose in the USA and in some European countries on freedoms, rights and guarantees to which children should be entitled. (...) This began to stimulate the doubt that the use of residential educational and care centres for children constituted a form of social exclusion, and at times of deprivation of freedom, which failed to comply with legal guarantees. In following years, a number of countries progressively cut back the use of residential institutions for children and resorted to more universal forms of development policies, aimed at ensuring that all children were given opportunities and rights within the sphere of normal family, school and community development. Families have become the core target of public policies as a result of a shift of emphasis from the danger of their incapacity, to the potential and capacity they have to assume responsibility and ensure the rights of children to live within a normal setting. (UNICEF, Innocenti, 2003)

Since the 1970s, there has been a decline in use of institutional care in Western Europe, with increased prevention work with families, gate-keeping and de-institutional care efforts. In the past 15 years de-institutional care processes have been supported by the World Bank, UN agencies, EU and INGOs in Central and Eastern Europe, the former Soviet Union, as well as in other parts of the world (see UNICEF Innocenti Insight, 2005; Bilson and Gotesan, 2002).

Despite all these efforts, there are still a relative high number of children in residential care in Western Europe. The significant difference with Central and Eastern Europe is done mainly by the quality of care and by the main reasons of institutionalisation: abuse and neglect in Western Europe and abandonment and disability in other parts of Europe. (Browne, 2006)

1990s, after the fall of the communists regimes, the international public opinion was confronted with the terrifying reality of children living in institutions and Central and Eastern Europe and former Soviet Union. The capacity of a child protection system based on residential care alternative become more and more questionable and the need for reform become very stringent. One of the key issues on the agenda was de-institutionalisation.

Over the past 15 years the de-institutional care processes in Central and Eastern Europe and the former Soviet Union have been supported by the main international and national governmental and non governmental organisations. The support covered a great range of forms (mainly logistical and financial support) and the national and international legal framework was considerably improved. The improvement of children's situation in residential care was defined as a criteria for admission to European Union (see the cases of Bulgaria and Romania) and special monitoring mechanism were implemented.

Most of the countries in the region defined child care legislation which promote family-based forms of care and call for de-institutionalisation. Despite the lack of researches, there is a common understating that, in practice, the process is still very slow and not always properly implemented. The general lack of funding for the provision for children without parental care, the lack of rigorous application and funding of preventive policies and programmes, the shortcomings in all existing out-of-home care options, and the lack of alternative out-of-home care solutions which could be applied on a large scale, the shortage in well qualified human resources, the resistance to change of the residential care system in place, are only some of the factors which bring to a delay in the progress. Never the less, institutional care is still inappropriately promoted and supported by some western agencies, both private and faith based in non-western parts of the world, particularly in emergency contexts and in countries affected by the HIV/AIDS epidemic (Cantwell, 2005; Tolfree, 2005).

De-institutionalisation policies tend sometimes to deny the need for residential care at all, and therefore risk stigmatising children and staff who work in residential care. Residential settings are for some children their "living environment" (even though in an ideal world this should not be necessary), which shall promote their needs and best interests, and it would be detrimental to label that as a priori undesired and negative.

Also, de-institutionalisation and the consideration of residential care as "temporary" has led to a general lack of permanency planning and frequently inappropriate provisional placements, where children undergo a number of temporary placements for extended periods of time. Little consideration is given to children's circumstances, and to defining criteria and time periods for

short-term care. Such placement experiences are damaging the child's ability to bond and develop.

It is important to emphasise that the de-institutionalisation process may further damage children if the transition is too rapid, as observed in Romania (Mulhair et al, 2004) or if the needs of the children are not considered or treated as a priority.

In this framework, it's crucial to stress that de-institutionalisation is essentially the process of moving away from a care system based on large institutions, but not only by closing them down, but by developing modern and effective care services for children and families.

This process is widely regarded as consisting of three components (Hope & Homes, 2004):

1. Preventing both unnecessary admissions to and stays in institutions;
2. Finding and developing appropriate alternatives in the community for the housing, treatment, training, education and rehabilitation of children who do not need to be in residential care;
3. Improving the conditions, care and treatment for those who do require public care.

Managed well it can be both the catalyst and the funding source for improved and more sensitive childcare services. The de-institutionalisation debate and programme must be based on an understanding of the different policy elements involved in providing children's service, including prevention, maintaining an appropriate balance of provision and ensuring that all substitute care is of a high standard (Hope & Homes, 2004).

4. Recommendations to the EU

In the framework of the European Strategy on Children, we urge the European Union to take action to improve the situation of children without parental care or at risk of losing it.

In this regards, we recommend to the European Parliament to underline in its Opinion on the European Commission's Communication "Towards an EU strategy on the Rights of the Child", the need for the European Union to:

1. Support and encourage the development of policies and actions aimed at strengthening the capacity of families to care for their children

As a matter of principle and where-ever possible: children should remain in their own families and in their own distinctive communities.

Family preservation efforts should aim to empower families to provide adequately for the protection, care and development of their children and such efforts should draw on the complementary capacities of the State and civil society.

To ensure this, State governments should develop national policies which strengthen families, by providing subsidies and material assistance, including access to social and health services, child-sensitive family counselling services, education and adequate housing.

Concern must be raised, regarding the fact that children living in poverty are over-represented among the children separated from their parents, both in the developed and developing countries. In this regards, national capacities must be strengthened to ensure access by poor families to services and safety nets needed to protect and care for their children. Programmes aimed at preventing children from falling out of their family and community must be supported.

Local multidisciplinary teams working with the most vulnerable families are more likely to reach the family and to find individual solutions based on the actual situation of the family. Thus, services should be directly accessible at community level and actively involve the participation of families as partners, supporting in particular the participation of children and women, with a view of empowering them.

2. Support the development of quality standards for children in out-of-home care at national level

To ensure that children who are placed outside their families grow in dignity, with full respect of their individuality and in the best possible conditions ensuring respect of their fundamental rights, quality care standards for children in out-of-home care must be ensured. They should comply with the existing international standards developed by the United Nations (UN Guidelines on children without parental care)², the Council of Europe (Recommendations on the rights of children in residential care³) and some NGO initiatives, like the "Quality childcare provision"⁴ developed by Save the Children in East and Central Africa, or the "Quality4Children" standards developed in Europe through a joint initiative of FICE, IFCO and SOS Children's Villages.

On that basis, States should adopt such legislative and other measures as may be necessary, including national action plans and guidelines and create national monitoring and evaluation procedures.

² Work on progress

³ Council of Europe, Committee of Ministers (2005) Recommendations Rec(2005)5 of the Committee of Ministers to member states on the rights of children living in residential institutions

⁴ Save the Children (2005) Raising the Standards: Quality Child Care Provision in east and central Africa. Save the Children UK

3. Support and encourage States towards de-institutionalisation

The de-institutionalisation debate and programme must be based on an understanding of the different policy elements involved in providing child care services, including prevention, maintaining an appropriate balance of provision and ensuring that all substitute care is of a high standard.

It is essentially the process of moving away from a care system based on large institutions, and involves restructuring the system of public care in order to diminish the use of institutions, develop alternative care approaches and strengthen effective family- and community-based preventive and protective social services.

In this regards, funds should be reallocated to prioritise preventive and family- and community-based alternative care options.

Action should also be taken to fight against discrimination that brings children into public care- in particular discrimination against children from minorities, children with disabilities, children with HIV/AIDS, etc.

General recommendations:

The three above mentioned priorities should be given to both European internal and external policies.

They should comply with the UN Convention of the Rights of the Child and always take a Child Rights approach.

Their implementation should be monitored by the European Union, in the framework of the new mechanisms established to support the EU strategy on children, e.g. the European Forum.

Partnerships between public authorities and NGO coalition should be encouraged to strengthen all actions and policies aimed at improving the situation of children without parental care or at risk of losing it.

Annex 1: Alternative care models⁵

(To be considered as a range of options and not a top-down list.)

There are different circumstances in which children may need, or find themselves in, an alternative care situation (Cantwell, 2005). According to the individual situation it might be or it might not be possible to foresee the child's return to parental care if appropriate support is provided. Only when all the measures of preventing child separation from their biological family or in the cases there are no realistically possibilities of re-integration in the biological family an option for one or another form of care is necessary.

In more stable "traditional" communities, the extended family is likely to be able to provide care for children who lost their parents, and when that is not possible the local community may find alternative ways of caring for them. Where the extended family is dispersed and/or where the community cohesion is weak (as in many industrialised countries and communities fragmented by conflict or forced migration) there the state or NGOs provide alternative living arrangements for children (Save the Children, 2006a).

It is widely agreed that three principles should guide decision regarding long-term substitute care for children once in need for such care has been demonstrated (Cantwell, 2005):

- family-based solutions are generally preferable to institutional placement;
- national (domestic) solutions are generally preferable to those involving another country;
- permanent solutions are generally preferable to inherently temporary ones.

In the context of a significant political, economical, cultural diversity, a variety of forms of alternative care was developed.

1. Family based care⁶ models

- Kinship Care (placement or reunification with the extended family)
- Child headed households
- Foster Families
- Adoption

2. Community based care models

Community-based care may be defined as a range of approaches which are designed to enable children either to remain with their own (or extended) families and to prevent the need for separation, or to be placed with an alternative family, if possible within his or her community (Tolfree, 2003).

3. Residential care/ Institutions

⁵ This term is used to refer to arrangements for the child to be looked after by people other than the birth family or other traditional care-givers. It implies not just physical and material care, but an appropriate response to the whole range of children's needs and rights, including emotional social, educational and spiritual (Tolfree, 2005).

⁶ Family-based care is the term used for all forms of out-of-home care which provide the child with a substitute family environment. (SOS, 2005)

Residential care (often referred to as institutional care) can be defined as a group living arrangements for children where care is provided by remunerated adults, who would not be regarded as traditional carers by society as a whole and who would normally work in shifts, and usually involves a building provided by the implementing agency (Save the Children 2006a).

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