

Children in Institutions



INTERNATIONAL DEVELOPMENT COOPERATION



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Foreword

Growing up in an institution is not good for children. We know this both from experience and from well-documented research findings. Being separated from one's parents in childhood leaves scars. Other unfavourable factors are the isolation of institutions from the rest of the community, the understimulation and the lack of contact with adults, which mean that children's basic needs are not met. Many people who have grown up in isolated institutions have difficulty, as adults, in being integrated into society—and this may result in their continued institutional life in adulthood.

In Sweden institutions for children were set up at the beginning of last century. It was seen as a great step forward, and a satisfactory option for abandoned children. Since the postwar period institutional care in this country has decreased, partly because it has found to have an adverse impact on children. The main reason for the dismantling of institutional care was, however, the decreasing need for children to be taken care of in public institutions. Efforts to combat poverty in Sweden had begun to yield results. The emergence of the welfare state, based on an active family policy, was the main reason why children no longer had to grow up in institutions.

We bring this experience to bear in our international development cooperation. We know that over 90 per cent of children who grow up in institutions around the world have one or both parents alive. The fundamental reason why children are taken into institutional care is poverty. Poverty reduction is thus, at the same time, a struggle for better conditions for children to grow up in.

Implementation of the United Nations Convention on the Rights of the Child imposes requirements for international development cooperation. It calls for long-term, general inputs that pave the way for children's development. It also calls for special inputs for disadvantaged children, such as those in institutional care.

This publication is a revised version of a strategy drawn up as part of an overview of child issues in Swedish international development cooperation. The aim is to devise a coherent policy for issues relating to children and to develop a systematic perspective of the rights of the child in international development cooperation based on the UN Convention on the Rights of the Child, the commitments made at the major UN conferences and the objectives of development assistance.

Particular attention is paid to disadvantaged children, and strategies for six categories of these children have been drawn up. This report lists objectives and strategic measures required of international development

cooperation with respect to children and institutions. It covers children who grow up in various types of institutions. Children in prison, on the other hand, are not covered; for them, other inputs are required.

Stockholm, May 2001

Maj-Inger Klingvall
Minister for Development Cooperation

Ten million children in institutions

In every continent, children are sent to children's homes or other types of institutions, where they spend much of their childhood. Many children and adolescents spend their lives alternating between institutions and the street. Poverty, broken families, illness and death in the family may be reasons why children are placed in institutions.

Families' scope for looking after their own children is a matter, ultimately, of a country's social and economic development. It depends on men's and women's capacity to find ways of supporting themselves, and the degree of equality between the sexes and between various groups in society. It is also bound up with the fact that some babies born are unwanted, and that people lack the knowledge and ability to engage in family planning. Fundamentally, it is a matter of society's inputs or lack thereof to support families.

There has long been scientific evidence that children are harmed by institutional life. Although this is a known fact, there are between eight and ten million children in the world today living in various types of institutions. The trend of placing children in institutions appears to be growing, rather than declining.

Consequences of institutional care for children

Children placed in an institution are separated from their parents, and also often from their siblings and friends. This separation leaves a deep mark on their development and may affect them up to adulthood. In addition, institutional care as such has an adverse impact on children. Institutions' seclusion from the community, their organisation and their often inadequately trained staff mean that many of the children's basic needs are not satisfied.

Individual children manifest in different ways the risks of the adverse development conditions that institutional life involves. They may, for example, exhibit mental disturbances and an inability to feel empathy for others. They are commonly unable to develop trusting relationships with others.

Many children who have grown up in isolated institutions have difficulty in becoming integrated members of society in adulthood, and this may result in their continuing to live in institutions as adults. Many of those who, for example, go to prison prove to be former institutional inmates. Many of those found in institutions for the physically disabled and mentally handicapped also prove to have been inmates of institutions in their childhood as well. And many of the parents who leave their

What is an institution?

No general definition of the concept of a 'children's institution' exists. However, the feature institutions for children have in common is that they offer round-the-clock residential care in which children live apart from their families. The size and organisation of these institutions, and the content of institutional care, vary widely.

Characteristics of the 'total institution'—a term used to describe the most closed and isolated institutions—are that the child's entire life, i.e. education and work, leisure and sleep, takes place there, and that the institution is very much cut off and isolated from the rest of the community.

Family

'Family' is a dynamic concept that depends on the epoch and culture in which we live. The notion of the family often has ideological connotations in various cultures. Social institutions, laws and welfare policy reflect the family concept that serves as the desirable norm to which people's lives are expected to conform. The family is thus a key arena in the interface between individuals and the communities in which they live.

Families come in many shapes and forms. They may be extended (i.e. include several generations) or nuclear (comprise the parents and children alone). In many countries, it is increasingly common for families to consist of a lone parent and one or more children (the one-parent family), or to include children from previous marriages (the 'stepfamily'). In the wake of the Aids epidemic, the number of families in countries hit hard by Aids that consist of children only (the 'child-headed family') has risen. When parents and other relatives pass away, older siblings are obliged to look after the younger ones.

children to grow up in institutions were once themselves children in institutional care.

Why are children sent to institutions?

The old word 'orphanage', meaning a home for children with no parents, is misleading. Evidently, the children in institutions who have no parents make up only a small proportion. Surveys of the family circumstances of children in children's homes in both Asia and Latin America show that 90 per cent have one or both parents alive. In Eastern Europe, only an estimated 2-3 per cent of children in institutions are orphans. The exception is countries where war or natural disasters have caused the death of one or both parents.

Some children who grow up in institutions have lost one or both parents, then, but the majority are placed there for other reasons. Some of these reasons are as follows.

- *Poverty*

Poverty is the most common reason for children living in institutions. The United Nations Development Programme (UNDP) estimates that a fifth of the world's population subsist on less than one US dollar a day. Of this group of poorest people, some 600 million were children. However, poverty does not mean only a lack of economic resources. Poverty is also a matter of diseases, epidemics and ill-health. Poverty is violence and insecurity. Being poor means having little or no scope for creating a secure future for oneself and one's children.

A study carried out in Southern Africa can serve as an example to show the connection between poverty and institutional placement as a child. The findings of this study showed that, broadly speaking, there were two reasons why parents placed their children in institutions: poverty and the fact that the institution offered education. The parents were poor and unable to support their children. Nor did they see any scope for giving their children a better future than they themselves had. The institution, on the other hand, was able to offer both subsistence and basic education for the children. The parents' primary intention was not to abandon their children, but to give them better living conditions than they themselves were able to provide.

- *War and social unrest*

In the chaos that arises in war, civil war, natural disasters and political unrest, when people are forced to flee from their homes, children are affected most severely. They may lose one or both of their parents, and they may be separated from their parents and relatives. These children land in a situation in which they are in acute need of care. This is usually provided through temporary solutions adopted by the authorities, such as making use of existing institutions or opening new, temporary ones to provide, at least, shelter for the children.

- *HIV and Aids*

The number of children who lose one or both parents to Aids exceeded 13 million in 2000. Most of these children live in Africa, where family cohesion is still strong and the number of children's homes small. The majority of these children are still cared for by their grandparents, aunts and other relatives. Only 1 per cent have ended up on the street or in institutions. This social network is now like a rubber band that is stretched to breaking point. The older generation can no longer cope with looking after more children; aunts sometimes bear responsibility for 15-20 children, and many people consider that it is only a matter of time before the network collapses. These countries now face the task of developing community care of children whose parents die of Aids.

- *Rapid social change*

One general trend in most countries worldwide is urbanisation. People are increasingly migrating from rural to urban areas. Poverty, unemployment and poor urban housing conditions are exacerbating the pressure on families. The number of divorces is rising, which in turn also means that a growing number of one-parent households. All over the world, single women are among the destitute.

The old structures for social security—relatives and neighbours—are disintegrating and leaving a vacuum. Families are increasingly on their own, and some parents cannot cope with this new situation. Children are abandoned, or themselves desert their families.

- *Violence and assault*

Sometimes children leave their families. Not infrequently, this applies to girls subjected to sexual assaults or other domestic violence, or children who are exploited in other ways. Abuse, mental-health problems or inadequate parental care may be other causes. These children leave their families and find their way to the big cities, where they often embark on a life on the street or are placed in institutions.

Children's own behaviour may then serve as the grounds for intervention on the authorities' part. Crime, alcohol and substance abuse and asocial behaviour are reasons why children may be sent to institutions.

- *Children with disabilities*

Of all babies born, around 7 per cent have disabilities. This group of children accounts for a disproportionately high share of the children placed in institutions. There are many reasons why parents have their disabled children placed in institutions. In some cultures, it is a stigma to have given birth to a disabled child. Social isolation is one of the consequences that affect the parents and child alike when the latter has a disability. The parents do not expect to receive any help, for either the child or themselves. In many parts of the world, there are great difficulties in obtaining access to education for children with disabilities, other than by having them placed in institutions.

- *The attraction of institutions*

Institutions represent both a resource and an option in poor countries. For parents, having their child placed in an institution is often a survival strategy that they use as a way out of a desperate situation. At the institution children are given supervision, food and education. The institution relieves the parents' burden of supporting a family, thus enhancing the survival capacity of the child's siblings who remain at home.

The role of the institution as a workplace and source of income for employees is another factor that works for the preservation of institutions. In countries where unemployment is high in the population, the institutions have an additional key role in the community: that of providing job opportunities. Although work at institutions has low status and pay rates are meagre, employees are guaranteed a continuous livelihood. In this way, the staff, local politicians and others who exercise power may have an interest in the institution's continued existence—an interest that clashes with the rights of the child.

- *Institutions are some donors' favourite projects*

Organisations and private donors frequently opt to support children through institutional care inputs. Projects are thereby created that, in a practical manner, can be linked to the donors since these projects are well defined and visible, thanks to their buildings and their capacity to assemble and care for children. Another reason for concentrating on institutions is the widespread view that institutional care is cheap and efficient. In reality, however, institutional care of children is expensive and inefficient. In financial terms, this form of care is up to six times as expensive as care in a family home.

The view of institutions enshrined in the Convention on the Rights of the Child

A child is entitled to grow up in a family. In the preamble to the Convention on the Rights of the Child, the family is emphasised as the natural setting for a child's development and wellbeing: 'the child, for the full and harmonious development of his or her personality, should grow up in a family environment, in an atmosphere of happiness, love and understanding'.

That children need and have a right to their parents is a theme of the entire Convention. Parents 'have the primary responsibility for the upbringing and development of the child' (Article 18:1), and the state 'shall respect the responsibilities, rights and duties of parents or, where applicable, the members of the extended family' (Article 5). When it comes to solitary refugee children, the child's rights to its parents is expressed in terms of the obligation of the host country to trace the child's parents or other family members, for the purpose of reuniting the family (Article 22:2).

The Convention on the Rights of the Child thus confirms the knowledge and research finding concerning children and child development that emerged in the 20th century: that children's relationship with their parents is their most fundamental need. Throughout their upbringing, children depend on their parents and on interaction with them. This interaction and parent-child bonding form the basis of the child's entire development. It is thus in close contact with parents that are capable of providing the security and care the child needs that the rights of the child assume a genuine meaning.

A parallel line throughout the Convention is the state's obligation to assist and facilitate parents' exercise of responsibility for the child's upbringing. To this end, the state must 'take all appropriate legislative and administrative measures' (Article 3:2). These measures are described in several of the subject articles of the Convention, such as those concerning social security (Article 26), healthcare (Article 24) and the right to a reasonable standard of living (Article 27).

In the event of children not being permitted to remain in the family for their own good, or being temporarily or permanently deprived of their family environment for other reasons, the state has an obligation to intervene. In such cases, the child is entitled to special protection and assistance. Such care may, for example, include foster placement, adoption or, if necessary, placement in a special institution for the care of children (Article 20).

The UN Committee on the Rights of the Child, which is the authoritative interpreter of the Convention, interprets Article 20 as stipulating that institutional placement of children should be seen as *the very last resort*, when no other options are available.¹ The Convention proposes the following alternative solutions for children who, for one reason or another, cannot be cared for by their parents. First, a solution in the child's extended family environment should be sought; that is, the child should be looked after by relatives or others who are close to the child. Secondly, an alternative family environment—i.e. placement in a foster home or adoption—should be sought. Finally, as a last resort, placement in an institution should be opted for.²

1. In its concluding observations for Italy, for example, the UN Committee on the Rights of the Child referred to institutions as a last resort. 'Comprehensive measures should be provided for responsible parenthood and for support for needy families, in order to assist them in their child-rearing responsibilities in the light of articles 18 and 27 of the Convention, thus limiting of institutionalized children and limiting the recourse to institutionalization to a measure of last resort' (Italy IRCO, Add. 41, para. 17).

2. *Implementation Handbook for the Convention on the Rights of the Child*, page 259. UNICEF, 1998.

With the UN Convention on the Rights of the Child as a starting point, the objectives for measures aimed at children who live in, or risk being sent to, institutions are that:

- No child should need to grow up in an institution.
- Measures for children should be provided mainly within the family framework.
- Children living in institutions should be guaranteed the rights due to them under the Convention.

The main thrust of international development cooperation should therefore be to minimise the number of children placed in institutions by giving families the kind of support that enables them to meet children's needs of shelter and care. Most institutions for children should thus be *abolished*. In order for an abolition of institutions to result in development favourable to children, however, there must be parallel emergence of alternative forms of care for children.

Even if the objective of closing the majority of institutions is achieved, there will probably always be certain situations for children in there are no feasible options other than institutional placement. Existing institutions should therefore be *improved* in such a way as to safeguard the rights of the child.

What are the implications, for children in institutions, of the basic principles of the Convention on the Rights of the Child?

- In all actions concerning children, the best interests of the child should be a primary consideration. This principle, combined with the specific stipulations of the Convention, means that measures should be primarily used to support parents to enable children to grow up in their own families. If the child is not looked after by the family, a solution should be sought primarily among the child's relatives, while the option of foster placement or adoption should be secondary. Finally, placement in an institution should be a last resort.
- Under the principle of non-discrimination, all children have the same rights, without discrimination of any kind, regardless of race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or status in other respects. Accordingly, society's measures must cover all children, and no child may be excluded from the support and the service that is offered on a general basis.
- Children are entitled to life and development. Society has a responsibility to safeguard, to the utmost resources available, the child's right to life and development. Regardless of whether children live in their families, risk being sent to institutions or live in institutions, they should be entitled to schooling, healthcare, social security and other benefits. The right to protection against abuse is paramount to institutional children's right to development.
- Measures should be provided in such a form as to enable children themselves to take part in the planning. The UN Committee on the Rights of the Child emphasises the importance of children's active participation in the measures affecting them. Studies show that measures based on close cooperation with the children themselves have proved to be the most effective ones.

Abolishing institutions and developing other forms of care

No child should be placed in an institution on unclear terms or for an unlimited period. The foremost aim must be to minimise the number of children in need of institutions, through preventive measures and by developing other forms of care that correspond better to children's needs.

- *Social and family policy for child welfare*

An overwhelming majority of institutional children in poor countries, as we have seen, have one or both parents alive. What with their poverty and other privations, and in the absence of support and help from the community, many of these parents feel that they have no other alternative. Abolition of institutional care for children in poor countries is therefore intimately associated with poverty reduction.

Economic development that generates growth and resources, combined with a social distribution policy, reduces the need for institutions for children. An active family policy based on gender equality is a vital cornerstone of this policy. In addition, healthcare for all, free and compulsory universal education, accessible child-care services and support for particularly disadvantaged groups are important factors. This kind of focus on social and economic policy paves the way for attaining the objective that families themselves should manage to support their own children, and therefore not need to place them in institutions.

- *Universal education*

One basic factor is the development of compulsory and free state schools. Many of the world's children are placed in institutions because their parents cannot afford to send them to school. Not only term fees, but also the costs of books and other school materials, are obstacles to these children's schooling. Lack of clothes and difficulties in covering the costs of children's school lunches may also be impediments. Another reason why children do not go to school is that parents do not, or cannot, give priority to education since the child's labour is needed to help meet the family's acute subsistence needs. Girls' education is often, in this context, a particularly low priority.

- *Access to child care*

Findings of modern research indicate that, in preventing problems, child care is among the key measures for children and families. Day nurseries are also developing forms for working with the child's family where this is

needed. Many of the children sent to institutions could stay in their families if there were scope for good child care to offer the requisite relief and support for parents. The existence of day nurseries in an urban district may have a favourable influence and become an important hub of the local community.

In Thailand, both women and men move from the countryside to the major cities. They move round in the cities, looking for work, and have their children with them. Their temporary homes are unsatisfactory and the surroundings are hazardous for the children. To tackle the problem of child supervision a Thai organisation, the Foundation for Better Life of Children, has initiated a programme of mobile day nurseries. These offer traditional day-nursery activities, work training and leisure activities for the child. In the evenings, the staff hold courses in healthcare and family planning for construction workers. Corresponding programmes have also been developed in India.

- *Integration of children with disabilities into education and child care*

In some developing countries, the attitude that institutional care is best for children with disabilities persists. Offering means of relieving the burden on parents enables them to keep their children at home. Places in day nurseries for disabled children make it possible for parents to be gainfully employed, so that their finances no longer dictate the decision to send the child to an institution. Integrating children with disabilities into local schools is a preventive measure of great importance in reducing institutional care for children in this category.

- *Developing preventive measures*

In many countries, there are no social workers. In countries where a social-welfare sector with trained social workers exists, training in preventive work is often needed. This training should focus on influencing and moving away from the dominant view of institutional placement as a solution, and towards the aim of focusing efforts on identifying families in the risk zone and giving them support to enable them to look after their own children better.

To prevent families from breaking down and children being sent to institutions, parental training can be another source of support. In Jamaica, voluntary organisations have started training programmes involving both parents that deal with what adulthood means, how to acquire social skills and how to build relationships in the family. Another example—albeit one involving mothers only—may be taken from Macedonia, where a women's organisation is working with Roma. The women meet once a week and are given lessons by doctors, psychologists, social workers and other experts. The instruction covers such matters as hygiene, family relationships, sexuality, the importance of children going to school, and other central subjects to make everyday life workable. To induce the women to attend

the lessons, donations in the form of flour and other necessities are distributed after each lesson.

- *Support for young lone parents*

Children of teenage mothers represent a major category of children placed in institutions around the world. One way of preventing these children from being sent to institutions is to give the young women concerned support, assistance and training to enable them to keep their children. Influencing their situation by changing public attitudes towards young lone mothers in the community at large is an important part of this work. However, the basic need is to generate better financial prospects for lone mothers.

- *Right to family planning*

Every year, roughly 15 million teenage girls become pregnant and give birth. These young and often unmarried women have, in most cases, received neither information about contraception nor access to contraceptives. On the basis of the International Conference on Population and Development in Cairo in 1994 and the United Nations Fourth World Conference on Women in Beijing in 1995, where women's reproductive rights were affirmed, greater efforts should be made to fulfil these rights.

To prevent teenage pregnancies, contraceptive advisory services and sex education in schools are crucial. However, this is a sensitive area in many developing countries, where both religious and other considerations impede any increase in openness concerning sexuality and married life.

- *Special support for children*

Children who live in poor, socially disadvantaged environments need special support, as do children who alternate between life on the street, in institutions and at home with their families. These groups of children need focused support of a material, educational and psychosocial nature. Both in South America and in Eastern Europe, there are examples of social work with street children to break this pattern of alternating between ways of life.

- *Mobilising the child's network*

One alternative to institutional placement is to develop the support available to children in their immediate surroundings. This involves mobilising the networks that surround the child, any relatives that may exist or the support that community social structures may provide. Cooperation between village communities, urban district associations, social-welfare authorities if any and voluntary organisations can generate new forms of readily available and flexible open forms of care as alternatives to the institutions.

Networks can also be developed as an instrument in social work with

various groups of children and families at risk. Experience of using networks in the form of family consultations, as tried out in various parts of the world, may contribute to the work of finding alternative forms of care for children.

- *New view of institutions as a form of care required*

Knowledge and sharing of experience concerning the impact on children of growing up in institutions are instrumental in efforts to develop a new view of institutions as a form of care. Politicians, the authorities, parents and voluntary organisations must obtain access to existing knowledge of the disadvantages of institutional care. This is as much a matter of attitudes towards children as of knowledge about the rights of the child. At the same time, examples of how forms of care that represent alternatives to institutional care can help disadvantaged groups of children and families should be brought to the fore.

Even in existing institutions, a change of attitude must be brought about. The key figures in this kind of work are the members of staff at the various institutions. Working in a children's institution has low status in many countries, and the staff have little or no influence over their work situation and low incomes. To break the vicious circle of staff with a low level of training and little commitment to their work, staff training is a key strategic issue. If staff are given influence over their work situation and their knowledge of the rights and needs of the child is increased, the care available at existing institutions can be improved.

- *An alternative family may be a solution*

Notwithstanding family support, there are children who are abandoned by their parents or who, for various reasons, have to be taken into care by the authorities. Under the Convention on the Rights of the Child, a solution should be sought primarily in the child's extended family environment. If children are unable to return to their birth families or relatives, adoption may give them a new permanent family to grow up in. The primary option to explore is whether a family can be found in the child's own country. This kind of solution requires an investigation of the child's situation and the prospective family's suitability, and also a decision by a competent authority or court of law on the basis of current legislation.

For children in need of temporary care, or for whom an adoptive family is not a feasible option, placement in a foster home may be a way of giving the child a chance to grow up in a family setting. This kind of solution requires follow-up and monitoring of the child's situation in the foster family.

Improving institutions

Although the main thrust of international development cooperation should be to work for an abolition of institutional care for children, the institutions' role in providing care for children will not become entirely obsolete. For some children in emergency situations, institutional care will be necessary in the future as well. This form of care must therefore develop in such a way as to fulfil the rights of the child under the Convention on the Rights of the Child.

Ensuring that institutions maintain high quality has been emphasised in the Convention as one of the basic principles. Article 3:3 lays down that the signatories must 'ensure that the institutions, services and facilities responsible for the care or protection of children shall conform with the standards established by competent authorities, particularly in the areas of safety, health, in the number and suitability of their staff, as well as competent supervision.'

Institutions should afford scope for checking, influence and control. Regulations for monitoring and controlling activities must be adopted. The quality of care should be regularly evaluated. There should be requirements concerning staff skills and training. Methods and routines to guarantee genuine influence for the child must be devised. The demands that must be imposed on institutional care may be specified in the following ten points.³

1. THERE SHOULD BE ADMISSION CRITERIA

Careful investigations and care plans must exist for every individual child. These should make it clear why institutional care is better for the child than any other option. Training and education to assist children's readjustment to their families, and as preparation for an independent life in the community, should be included as an important part of the treatment children receive.

2. THE CHILD SHOULD BE ASSURED OF HEALTHCARE⁴

Children with a background of poverty who are placed in institutions usually have a complex range of problems—physical, social and psychosocial—that characterise their life situation. Their situation may deteriorate if these problems are not remedied.

The healthcare offered to children should be provided not through the institution, but at the care establishments that exist for the community at large. Children in institutions should not be cut off from the community; rather, they should receive a natural share of the services offered outside the institution.

3. The international conference in Hong Kong in 1996 that was arranged by the International Council on Child Welfare, in which the *Guidelines for Practice on National and Intercountry Adoptions and Foster Family Care* were drawn up on the basis of the UN Convention on the Rights of the Child and the Hague Convention on International Adoptions, is also noteworthy. These guidelines describe the procedure that should be followed in the placement of children, and define the rights and obligations of all parties concerned—the birth parents, the child, the adoptive parents, the foster family, the organisations and the authorities.

4. 'States Parties recognize the right of the child to the enjoyment of the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health. States Parties shall strive to ensure that no child is deprived of his or her right of access to such health care services' (Article 24:1).

3. CHILDREN'S CONTACTS WITH THEIR FAMILIES SHOULD BE FACILITATED⁵

To the extent that it is reconcilable with their best interests, children should receive help from the staff of the institution to maintain close and continuous contact with both their parents and with other networks. If siblings are placed in the same institution they should be kept together, if this is possible and if they themselves so wish.

4. CHILDREN'S CO-DETERMINATION SHOULD BE ASSURED⁶

Children should be allowed to express their feelings and thoughts, and there should be scope for them to influence the care they receive. The older and more mature they are, the more influence they should exert. Children in institutions are at the mercy of the attitudes, measures and decisions taken by adults around them. An open, tolerant atmosphere in emotional terms at the institution allows the child to express, for example, grief and yearning for parents and siblings. Children should be invited to participate in decisions concerning rules in force at the institution, and be given influence over the decisions that are taken concerning their future.

5. THE RIGHT TO PROTECTION AGAINST ABUSE⁷

Experience of institutional care all over the world shows that the risk of neglect and exploitation is high. Children are helpless, and assaults both by staff and by other children at the institution have proved to take place. Studies show, for example, that for children with disabilities the risk of being subjected to assault of various kinds is particularly high.

The situation in developing countries has not been investigated in the same way as in the West, but it is probably the same. The relative isolation that institutional life involves and the often inadequate supervision in the form of official inspection and control are factors contributing to the risks of assault against the children. Openness, supervision, inspection, control and quality requirements are key words in this context.

6. REQUIREMENT OF TRAINED STAFF⁸

There is a connection between the quality of care and that of the leadership and organisational structures at institutions for children. Trained staff have a better capacity to see and meet children's needs. Highly trained staff and a high staff-child ratio help to ensure that the rights of the child are fulfilled in the institution. The content of treatment programmes must be adjusted to children's individual needs, and shaped in co-operation between parents, children and staff.

7. INDIVIDUAL TREATMENT PLAN

The institution should follow a treatment plan based on each individual child's particular situation and needs. The institution should promote

5. 'States Parties shall respect the right of the child who is separated from one or both parents to maintain personal relations and direct contact with both parents on a regular basis, except if it is contrary to the child's best interests' (Article 9:3).

6. 'States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child' (Article 12:1).

7. 'States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child' (Article 19:1).

8. 'States Parties shall ensure that the institutions, services and facilities responsible for the care or protection of children shall conform with the standards established by competent authorities, particularly in the areas of safety, health, in the number and suitability of their staff, as well as competent supervision' (Article 3:3).

close contact between children and one or more of the staff (contacts), so as thereby to enable the children to create secure relationships in their immediate surroundings. Contacts should, on the basis of children's ethnic, cultural and linguistic background, guide them and provide the knowledge necessary for living outside the institution in the future. This means that children should have their physical, emotional, social, cultural and spiritual needs met, and be given opportunities for an education adjusted to their background.

8. THE RIGHT TO BIRTH REGISTRATION⁹

Many children in the world are not registered as citizens at birth. Accordingly, they miss out on the rights that ensue from citizenship in a country. There are various reasons why children are not registered. The family may, for example, live a long way from the venue where registration takes place, the parents may be afraid of the authorities or the family may belong to a minority people that is discriminated against. Children may also lack identity documents owing to war and natural disasters in which the authorities' registers have been destroyed.

Every institutions should register all its child inmates and draw up documents providing information about their background and history, and also their development and progress during the period of care at the institution.

9. 'The child shall be registered immediately after birth and shall have the right from birth to a name, the right to acquire a nationality and, as far as possible, the right to know and be cared for by his or her parents' (Article 7:1).

10. 'States Parties recognize the right of a child who has been placed by the competent authorities for the purposes of care, protection or treatment of his or her physical or mental health, to a periodic review of the treatment provided to the child and all other circumstances relevant to his or her placement' (Article 25).

9. CHECKING AND INSPECTION OF ACTIVITIES

The authorities are obliged to carry out regular checks of institutions in terms of organisation, finances, number of staff and content of activities. Similarly, inspections should be carried out to ensure that the children's physical environment fulfils the norms laid down by the authorities. Supervision of this kind should also include institutions under private management.

10. OVERVIEW OF TREATMENT PROGRAMME¹⁰

Continuous and regular evaluation of the content of care and its effects on the child should be carried out. This evaluation should minimise the period of care for the child. No one should need to spend the whole of his or her childhood in an institution. Care should be continuously adjusted to the child's development and needs. To permit overview, regular records of the child's development must be kept, and this documentation must be clear and complete.

National plan for abolition and development

In order for an abolition of children's institutions to be realised, measures at several different levels are required. There must be a conscious national plan, containing clear and scheduled targets, and with top-level political support.

Work to phase out existing institutions must be based on the view that children are entitled to their families and the associated networks. This means that the aims of the work—whether preventive, focused on risk groups or remedial in purpose—must always focus on children as individuals, their families and their networks. In other words, the work must be based on a child and family perspective. In this context, it is important to emphasise that the institutions that remain must also be permeated by a child and family perspective.

National statistics must be available as a basis for planning. The number of institutions, the number of children admitted, the grounds on which children are admitted and the period of care are particulars of the kind required to make children at institutions visible, and as the basis for political decisions.

The UN Convention on the Rights of the Child requires national legislation to be permeated by concern for child welfare and the rights laid down in the Convention. Laws with clear rules concerning the grounds for admitting children to institutions should be drawn up. The rules should clearly specify how an appeal can be lodged and what is required for the decision to be reviewed. Rules should exist concerning who is permitted to run an institution, and how the monitoring of care provided at institutions should take place.

Expanded knowledge and research

Knowledge of which children grow up in various institutions, why and how long they are there, and how they fare in later life is inadequate. How are measures to be applied when it comes to placement of children who are not cared for by their parents? Which models are good? Which documentation is needed for decisions, and how should follow-up take place? How should children's views be expressed? What characterises good institutional care? These are examples of key questions that statistics, research and documentation can answer. This kind of information is necessary as the basis for decisions on alternative measures and better care. Establishing networks for dissemination of information enables more people to benefit from others' experience. Through public debate children become visible, and politicians and decision-makers obtain documentation for their decisions.

Some examples of measures with Swedish support to prevent children from being sent to institutions are as follows.

- A range of measures are aimed at developing the social sectors in Central and Eastern Europe. In the Kola Peninsula in Russia, support is provided for work with young people who have problems. In the town of Apatity, a day centre for children and adolescents has been started. Support is also given to a pre-school in Murmansk for children with disabilities. In the city of Archangelsk, social workers undergo training. In St. Petersburg, a broad cooperative project is under way in the social sector that includes, for example, training of social workers and decision-makers in the social sector. In Moldavia, work is in progress to create alternatives to institutions for children with special needs.
- Within the framework of cooperation between Stockholm University and the Belarussian education ministry, decision-makers in the social-welfare sector have received further training. One input focuses particularly on families who suffered from the consequences of the Chernobyl disaster.
- A partnership between the schools of social work and public administration at the universities of Sarajevo and Stockholm has been established. Some 20 projects, mostly educational, have been implemented and are under way. Supervision of social work, family therapy as a method, and social work with the elderly is currently being introduced. The groundwork has been done for a school of social work and public administration to open in Banja Luka within the framework of this partnership.
- In many quarters, Sweden is supporting the establishment of ombudsman institutions, including children's ombudsmen, for the purpose of strengthening the rights of the child. Cooperation is, for example, under way to set up a children's ombudsman in Russia. The Swedish Children's Ombudsman and Save the Children Sweden have contributed their knowledge and experience.
- With Sida's support, the School of Social Work and Public Administration (also known as the Department of Social Work) at Stockholm University is running a research project to survey children's living conditions in the favelas of Rio.

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