



TRANSFORMING CARE SYSTEMS THROUGH EU EXTERNAL ACTION

ABOUT LUMOS

Lumos, an international non-profit organisation founded by J.K. Rowling, is dedicated to ending the institutionalisation of children by 2050 – a practice that decades of research have shown is harmful to child development.

We work with governments, UN agencies, civil society, community, families and children to ensure the right of every child to family life and transform the lives of estimated eight million children currently living in institutions.

We help countries transform education, health and social care systems for children and their families, preventing family separation, and help move children from institutions to family and community-based care. By advocating at all levels, collaborating widely and running evidence-based demonstration programmes that prove reform can work, we are able to achieve maximum impact from our funding to benefit some of the most vulnerable children in the world.

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ABBREVIATIONS

COHOM: EU Council Working Party on Human Rights

CRC: United Nations Convention on the Rights of the Child

CRPD: United Nations Convention on the Rights of People with Disabilities

CSO: Civil Society Organisation

DCI: Development Cooperation Instrument

DG DEVCO: Directorate-General for International Cooperation and Development

DG ECHO: Directorate-General for European Civil Protection and Humanitarian Aid Operation

DG EMPL: Directorate-General Employment, Social Affairs and Inclusion

DG NEAR/ NEAR: Directorate-General for Neighbourhood and Enlargement Negotiations

DG REGIO: Directorate-General for Regional and Urban Policy

DI: Deinstitutionalisation

EC: European Commission

EDF: European Development Fund

EEAS: The European External Action Service

EIDHR: European Instrument for Democracy and Human Rights

ESIF: European Structural and Investment Funds

EU: European Union

ExAC: Ex-ante conditionalities

SDGs: Sustainable Development Goals

ODA: Official development assistance

OVC: Orphans and vulnerable children

EXECUTIVE SUMMARY

The European Union (EU) has played a leading role in supporting vulnerable children and driving the transition from institutional to family and community-based services. Through its policies, technical support and resources, the EU has provided a framework which has enabled a significant focus on care transformation in a number of countries across Europe.

Building on its practice and expertise, there is a real opportunity for the **EU to become a worldwide leader in ending the institutionalisation of children** and ensuring that no child is left behind. Events such as the 30th anniversary of the Convention on the Rights of the Child, and the negotiations around the 2030 Agenda for Sustainable Development, create momentum for advancing care transformation on a global level and ensure that no child is left behind.¹

The scale and harm of institutionalisation

Millions of children live in institutions, including so-called 'orphanages' globally.² However, the majority of these children are not orphans. Around 80% have at least one living parent and, with a little additional support, most children could live with their birth or extended families.³ Over 80 years of research from around the world has demonstrated that living in institutions, deprived of loving parental care, can cause significant harm to children's health and development.⁴ The prevalence of physical and sexual abuse in residential care is higher than in other forms of care, even in countries where residential care is better resourced with smaller numbers of children per facility.^{5 6} Institutions can also severely limit the life chances of the children who grow up in them.⁷ Young adults leaving institutions are especially vulnerable to these risks because they have had fewer opportunities to develop the social skills and networks they need to live successfully and independently in the community.⁸ These poor outcomes for children result in high potential social and economic costs to society.⁹

Nevertheless, many children continue to be placed in institutions across the globe; due to poverty, war, natural disaster, discrimination, disability and social exclusion.¹⁰ A lack of services and support in the community often means parents are forced to place their child in an institution.¹¹ The EU has the potential to drive care transformation across the world by supporting children, families and communities through the effective use of overseas development assistance (ODA). This will ensure that children realise their right to live in a family in the community, and that no child is left behind.

1. United Nations (2015) Transforming our world: the 2030 Agenda for Sustainable Development <https://sustainabledevelopment.un.org/post2015/transformingourworld> [accessed 31 January 2019]

2. The number of residential institutions and the number of children living in them is unknown. Estimates range from more than 2.7 million ('tip of the iceberg') in Petrowski, N., Cappa, C. & Gross, P. (2017). Estimating the number of children in formal alternative care: Challenges and Results. *Child Abuse and Neglect*, 40, 388-398. <https://doi.org/10.1016/j.chiabu.2016.11.026> [accessed 27 April 2018]. to 8 million (Cited in: Pinheiro, P. (2006). *World Report on Violence against Children*, UNICEF, New York). These figures are often reported as underestimates, due to lack of data from many countries and the large proportion of unregistered institutions.

3. Csáky, C. (2009). *Keeping Children Out of Harmful Institutions: Why We Should be Investing in Family-Based Care*. London, UK: Save the Children, p7.

4. Berens, A. E. & Nelson, C. A. (2015). The science of early adversity: is there a role for large institutions in the care of vulnerable children? *The Lancet*.

5. Behal, N., Cusworth, L., Wade, J. et al. (2014). *Keeping Children Safe: Allegations Concerning the Abuse or Neglect of Children in Care*. <http://www.york.ac.uk/inst/spru/research/pdf/Abuseincare.pdf> [accessed 2 May 2018].

6. Euser, S., Alink, L.R., Tharner, A., et al. (2014). The prevalence of child sexual abuse in out-of-home care: a comparison between abuse in residential and in foster care. *Child Maltreatment*.

7. Csaky, C. (2014). op. cit.

8. Delap, E. (2011). *Scaling Down: Reducing, Reshaping and Improving Residential Care Around the World*. Positive Care Choices. London: EveryChild. As cited in: Csaky, C. (2014). op. cit.

9. Congressional Coalition on Adoption Institute [CCAI] (2011). *The Way Forward Project Report*, p29. <http://www.law.harvard.edu/faculty/bartholet/The%20Way%20Forward%20Project%20Report.pdf> [accessed 8 March 2016].

10. Csáky, C. (2009). op. cit.; Chaitkin, S. et al. (2017) *Towards the right care for children - Orientations for reforming alternative care systems Africa, Asia, Latin America*. Luxembourg: Publications Office of the European Union.; EveryChild and Better Care Network (2012). *Enabling reform. Why supporting children with disabilities must be at the heart of successful child care reform*. New York: Better Care Network.; UNICEF. (2010). *At Home or in a Home: Formal Care and Adoption of Children in Eastern Europe and Central Asia*.; Carter, R. (2005). *Family matters: a study of institutional childcare in Central and Eastern Europe and the former Soviet Union*. London, EveryChild.; Tinova, M, Browne, K.D. and Pritchard, C. as cited in Browne, K. (2009). *The Risk of Harm to Young Children in Institutional Care*, Save the Children, London.

11. Chiwaula, L. et al. (2014). *Drumming together for change: A child's right to quality care in Sub-Saharan Africa*. The Centre for Excellence for looked after children in Scotland (CELCIS); Csáky, C. (2009). op. cit.

This research aims to identify how much EU ODA funding has been spent on supporting transforming systems of care, sometimes referred to as ‘deinstitutionalisation’,¹² and how much – if any – was spent on supporting institutions, either directly or indirectly. It also provides case studies of recent practice, and assesses some of the key challenges in managing and monitoring funding in this area. It makes recommendations for future expenditure overseas and policy changes needed to bring about a well-planned, adequately resourced and safe transition to family and community-based services and away from the use of institutions for children.

Overseas Development Assistance supporting transforming systems of care

The EU - together with its Member States – makes up the world’s leading international development donor, providing over **50% of all global development aid**,¹³ – a total of **€75.5 billion in 2016**.¹⁴ The EU alone is the fourth-largest global donor, with net official ODA at US\$16 billion in 2017, in the form of projects, budget support, technical assistance, grants, financial assistance and multi-lateral funding.¹⁵ However, the broad range of activities which support the transition from institutions towards family and community-based care, such as poverty reduction, education, access to health, makes it difficult to quantify the support provided to transforming systems of care for children.

This report provides an analysis of EU ODA focusing mainly on the period from 2013 to the beginning of 2018. Historical data from 2008 – 2013 which supports care transformation is also used to gain a more comprehensive picture. This includes development aid which addresses some of the key drivers of institutionalisation – including access to health, education and overall poverty. The report considers development funding from both outside Europe and within the European neighbourhood region¹⁶

EU expenditure on child rights and transforming systems of care

According to an EU briefing on its funding for ‘child rights’ between January 2011 and March 2017, the EU supported at least 4,001 actions relevant to children’s rights in 142 countries, with a total EU contribution of €8.49 billion. EU classifications suggest that just over €5 million each year is spent on children in institutions.¹⁷ However, this figure does not specify what type of activities this is spent on, whether it is supporting institutions or programmes focused on the transition to family and community-based care.¹⁸

Based on a request for information, 117 actions from 2013 to 2018 were identified by the key Directorates-General (DEVCO, ECHO and NEAR) as being related to ‘deinstitutionalisation’ (care transformation).

Summarising the figures from the responses from the three Directorates-General (DGs), (and excluding all projects which had been listed in more than one response) the total amount came to just over **€45 million** being spent on ‘deinstitutionalisation’ in external action from 2013 until 2018.

12. The term ‘care transformation’ is also used throughout the document

13. EU DCI, European development policy. https://ec.europa.eu/europeaid/policies/european-development-policy_en

14. EC Press release (11 April 2017), EU Official Development Assistance reaches highest level ever. http://europa.eu/rapid/press-release_IP-17-916_en.htm [accessed 2 May 2018].

15. (in 2016 prices) DevTracker: https://donortracker.org/country/eu?gclid=EAlaIqobChMjZqIv-Wm2wIVYb7tCh0bZABMEAAAYASAAEgJDCvD_BwE

16. The European Neighbourhood region includes both members states of the EU and the 16 east and southern neighbouring states. EC, Countries of the region. https://ec.europa.eu/neighbourhood-enlargement/neighbourhood/countries_en

17. Around 6% of projects and some 3% of the funding (of the 13% spent on ‘particularly vulnerable children’) = around €31.89 million or an average annual figure of around 5.3 million was directed at institutionalised children. #EU4Children, Overview of EU operational support to children’s rights (January 2011-March 2017) op. cit.

18. #EU4Children, Overview of EU operational support to children’s rights (January 2011-March 2017) op. cit.

However, given that this included a large project in Zimbabwe for €6 million¹⁹ and the project in Kyrgyzstan for €26 million,²⁰ both of which cover a range of objectives, it can be deduced that this figure does not accurately reflect the actual funding aimed at children in institutions, let alone a figure for deinstitutionalisation. The absence of detail in the figures available makes it difficult to accurately assess the level of funding towards the transition from institutional to family and community-based care.

EU funded ODA programmes have the potential to generate high-quality and coordinated support to keep families together, strengthen alternative care, and reduce the number children in institutions in a range of cultures and contexts. It is clear the EU is committed to ensuring that all children have a better life, through the funding of an extensive range of projects and programmes across many funding streams and instruments. However, while there is substantial investment in the rights of the child – both in terms of development rights and social protection and participation, these actions are not guided by an explicit strategy addressing the needs of children in institutions.

In practice, this can mean that programmes miss the opportunity to include these children and overlook the potential to address institutionalisation in their overall strategies. While there are a considerable number of EU funded projects addressing vulnerable children and the drivers of institutionalisation, there are very few examples of programmes which are specifically working towards the transition from institutional care to family and community-based care for children.

Barriers to progress

This research demonstrates that the EU is providing support to countries in the process of implementing child protection reform which includes a focus on family and community-based care and is cognisant of the need to support the family in its response to emergencies. However, there are two key barriers which have been hindering progress towards greater care transformation of children in ODA recipient states.

First, many funded projects working on related issues do not take into consideration the need to ensure a commitment to, and vision for, the overall transformation of the care system. This risk missing opportunities to coordinate actions and ensure approaches are complementary.

Second, the EU has not prioritised or explicitly specified its objectives on children in institutions in its external funding. This has led to:

- Only a very limited number of projects which specifically focus on ensuring that children in institutions benefit from ODA
- Instances where institutions appear to be directly funded
- The absence of transparent data on what is being funded, where, and what it has achieved

In the new proposed Regulation governing the Neighbourhood, Development and International Cooperation Instrument (NDICI) for the 2021-2027 funding period, for the first time in the EU external action financing instruments, the transition from institutions to community-based care has been specifically mentioned as a priority area of intervention. This offers a real opportunity to address the above-mentioned barriers, in particular by ensuring that EU external action in areas related to children is carried out in line with a clear steer towards promoting family and community-based care.

19. The EU allocates 6 million Euros to support the National Action Plan (NAP) for Orphans and Other Vulnerable Children (OVC) of Zimbabwe (23 March 2010). https://ec.europa.eu/europeaid/sites/devco/files/aap-financing-zimbabwe-spe1-pr-20110329_en.pdf [accessed 2 May 2018].

20. The main objective of the two-year project is to support the government and civil society to reduce poverty, to ensure access to social services for vulnerable sectors of the population and to enhance public accountability, good governance and transparency in public spending https://eeas.europa.eu/delegations/kyrgyz-republic/18949/eu-launches-new-project-support-social-protection-sector-kyrgyzstan_en [accessed 2 May 2018].

SUMMARY RECOMMENDATIONS

It is recommended that the EU ensures:

- **EU funding is directed away from institutions** and instead prioritises services that support children to live in families in the community. These include: family support, early childhood development, inclusive education, health and social services, high-quality alternative care and strengthening child protection systems.
- **Funding is increased** to programmes supporting the transition to family and community-based care and the development of high quality universal and targeted services. Outline a vision for the next funding period to ensure that sustainable care transformation is prioritised and that all programmes supporting vulnerable children and child rights have to assess and monitor their impact on preventing family separation and institutionalisation.
- **Monitoring and transparency of how EU funds are spent.** Any investment directed to children should be in line with the international and the EU human rights legislation and enhance child protection and welfare.
- **Invest in rigorous monitoring and evaluation of reform processes.** Ensure that practice reflects the plans and policy intentions, that health, development and quality of life outcomes for children and young people are monitored, and that systems are put in place to assess the long-term impact. Ensure that learning is captured and disseminated.
- **Data collection and disaggregation is improved** to ensure all children are counted, by taking measures to improve and expand data collection methodologies so that children living outside families are represented in disaggregated data.
- **Experience and expertise are shared.** The EU recognise and share good practice, encouraging other donors to invest in supporting the transition from institutional to family and community-based care, family support, child development, inclusive education and child protection services.
- **Capacity to undertake reform is strengthened.** The capacity of staff across all levels of the system is built to ensure they are equipped with the right skills and support to deliver.
- **Children and civil society are enabled to actively participate** in all stages of the programming process, including the design, implementation, monitoring and evaluation of programmes. Children's views must be taken into account for any programmes and projects that concern them.
- **The EU leverages its influence in promoting and addressing care transformation for children globally.** In line with the EU Action Plan on Human Rights and Democracy (2015–2019), which commits the EU to strengthening cooperation with regional Human Rights and Democracy mechanisms,²¹ the EU utilise its leverage with national governments, regional and international bodies and other donors to prioritise care transformation for children globally.

21. Council of the European Union (July 2015), Council Conclusions on the Action Plan on Human Rights and Democracy 2015 – 2019, <http://data.consilium.europa.eu/doc/document/ST-10897-2015-INIT/en/pdf>. [accessed 2 March 2018].

- **Care transformation strategies plans are encouraged and supported in ODA recipient states.** Formal political dialogue and long-term, coordinated and complementary technical support from a range of donors is vital to ensure consistency in the implementation of reform.

It is recommended that the European Commission and the EEAS ensure:

The Directorate-General for International Cooperation and Development (DG DEVCO) ensures that the EC's commitment to support the transition from institutions to family and community-based care in EU external action results in increased funding of projects and budget support for this process. It is essential to coordinate with other donors and partners in-country to ensure that the transition to family and community-based care is prioritised and not harmed by conflicting project objectives.

The Directorate-General for European Civil Protection and Humanitarian Aid Operations (DG ECHO), in all its work in emergencies and humanitarian assistance, continue to ensure that its first response prioritises the adequate protection of children by tracing and reunifying families and offering family-based or family-like solutions for children for whom family reunification is not possible.

The Directorate-General for Neighbourhood and Enlargement Negotiations (DG NEAR) ensure that increased funding for work on transforming systems of care within the European region and neighbouring states is prioritised and in particular that all projects, related to children, include an explicit commitment to the transition towards family and community-based care for children.

The European External Action Service (EEAS) champion the reform of child protection and care systems as a human rights priority and ensure that all relevant EU external policy initiatives and instruments prioritise children in institutions, children in alternative care and children at risk of being separated from their families. Reform of child protection and care systems, including the transition from institutional to family and community-based care, is routinely addressed in political and human rights dialogues with partner countries.

PURPOSE

The European Union (EU) has recognised that the transition from institutions towards family and community-based care needs to be prioritised for children globally. However, the process of transforming systems of care is complex and securing its quality implementation with EU funding may be equally intricate. As a leading and influential international development donor, the EU has the potential to drive forward successful care transformation for children across the world.

This report sets out the evidence about the harm that institutions can cause and presents the case for prioritising family and community-based alternatives to institutional care. It outlines EU expenditure on transforming systems of care, highlighting positive examples, as well as instances where a stronger focus on the transition from institutional to family and community-based care could have resulted in better outcomes for the target group. It also explores the barriers that have been hindering progress towards greater care transformation globally and makes recommendations for change.

It is hoped that this report will be of use to:

- EU institutions, executive agencies consultative and advisory bodies
- governments across the world
- multilaterals, civil society and other stakeholders.

METHODOLOGY AND LIMITATIONS

This report is based on desk research undertaken between November 2017 and May 2018. While the focus has been on the current programming period 2014-2020, the research has also drawn on material and projects funded prior to 2013 in order to provide a more comprehensive overview and further insight into EU funding of activities related to children in institutions.

A written request for details of all projects specifically working on the care transformation using the terminology 'deinstitutionalisation of children' from 2013 onwards was made through the website AsktheEU.org.²² A further request for information on funding figures was sent with responses from DGs DEVCO, ECHO and NEAR.²³ Follow-up requests for further specific information were sent to EU Delegations in a variety of countries as well as to NGO partners. Information was also sought directly with EU staff members.

Over 350 projects were reviewed for relevance and details. Of these, around 50 projects were selected and reviewed in more detail based on their direct relevance to the research focus and their potential to highlight both good practice and room for further improvements; with relevant case studies included in the report. As much as possible, cases were triangulated with official EU project data, external reports (often from CSO partners), local government and media reports and any formal evaluations or studies.

In some cases, there was limited detail available regarding expenditure, making it difficult to accurately assess the level of funding directed towards transforming systems of care.

22. AsktheEU.org is website developed by civil society organisation to streamline public requests for information from EU bodies. For more information see: <https://www.asktheeu.org/en/help/about> [accessed 7 May 2018]. Request entitled "EU funded projects related to the deinstitutionalisation of Children" made on 2 February 2018. Details here: https://www.asktheeu.org/en/request/eu_funded_projects_related_to_th#incoming-16247

23. Request entitled additional information on "EU funded projects related to the deinstitutionalisation of Children" made on 6 June 2018. https://www.asktheeu.org/en/request/eu_funded_projects_related_to_th?nocache=incoming-17662#incoming-17662

The research does not claim to have audited all EU projects related to care transformation, child protection and relevant areas of work (such as poverty alleviation, education work etc.) up until 2018 – this would need a far greater amount of resources and the involvement of hundreds of EU departments and CSO partners. However, the findings do represent the result of a thorough and systematic strategy, used to identify EU funding related to children in institutions, the development of family and community-based care systems, child protection and wider development projects that have an impact on the progress of care transformation and the extent of institutionalisation in ODA recipient states. For further details on the methodology, see Annex 1.

POLICY CONTEXT

The EU's commitment to transforming systems of care

The European Union (EU) has played a leading role in supporting vulnerable children and driving the transition from institutional to family and community-based systems of care in a number of countries across Europe. Through its policies, technical support and resources, the EU has provided countries with a framework promoting care transformation and family and community care for children.²⁴

In 2013 the EU took a momentous step towards encouraging its Member States to shift away from institutional care through the introduction of an ex-ante conditionality on social inclusion 9.1 in the 1303/2013 Regulation for the use of the European Structural and Investment Funds (ESIF). This ex-ante conditionality ensured that ESIF could not be spent on institutions and transition towards community-based care must be prioritised in Member States. The guidelines accompanying the ESIF explicitly state that "building or renovating long-stay residential institutions is excluded, regardless of their size" and emphasise that any new measures should allow for the possibility of inclusion in the community and high-quality care.²⁵

This landmark decision has resulted in approximately €2.7 billion being allocated towards reforming systems, shifting away from institutions to community-based care, making a positive impact on some of Europe's most socially excluded citizens.²⁶

The European Commission's (EC) commitment to transition from institutional to family and community-based systems of care has been reiterated in the draft Cohesion Policy Regulations for the next programming period 2021-2027. Moreover, for the first time the EC has included the promotion of the transition from institutional to community-based care for children in its proposal for Regulation on the Neighbourhood, Development and International Cooperation Instrument (NDICI), under both the geographic and thematic programmes.²⁷ This comes as a natural continuation not only of the declared position in the EU's internal action but also of the EC's previous initiatives concerning care transformation for children in EU external action. In February 2018, the first Development Cooperation Instrument (DCI) call for proposals specifically focused on transforming systems of care was published, with a total EU budget contribution of €13 million.²⁸ This followed the tender 'Study on the institutionalisation of children and possible alternative care solutions in Asia, Africa, Central and South American countries', published by the Directorate-General for International Cooperation and Development (DG DEVCO) in 2015 "in order to strengthen the knowledge of the European Commission on the nature, the extent and scope of institutionalisation and feasibility for de-institutionalisation (alternative care for children)".²⁹

24. Crowther, N., Quinn, G. & Hillen-Moore, A. (2017). Opening up communities, closing down institutions: Harnessing the European Structural and Investment Funds. Community Living for Europe: Structural Funds Watch. https://eustructuralfundswatchdotcom.files.wordpress.com/2017/11/cle-sfw_opening-up-communities-november-2017_final.pdf [accessed 24 May 2018].

25. Draft Thematic Guidance Fiche for Desk Officers Transition from Institutional to Community-Based Care (Deinstitutionalisation-DI) Version 2 – 27/01/2014 available: http://ec.europa.eu/regional_policy/sources/docgener/informat/2014/guidance_deinstitutionalisation.pdf

26. Gîrlescu, O. (2018) Inclusion for all: achievements and challenges in using EU funds to support community living. Community Living for Europe: Structural Funds Watch. https://lumos.contentfiles.net/media/documents/document/2018/11/SFW-Digital_-_2018.pdf [accessed 2 February 2019]

27. European Commission (2018), Proposal for a REGULATION OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL establishing the Neighbourhood, Development and International Cooperation Instrument. COM/2018/460 final, 14.06.18. ANNEX II AREAS OF COOPERATION FOR THE GEOGRAPHIC PROGRAMMES, Article 2(d), p. 3 and ANNEX III AREAS OF INTERVENTION FOR THEMATIC PROGRAMMES, Article 4.3(b), p. 12

28. European Commission (2018) Call for Proposals: 'Quality alternative care for children and de-institutionalisation'. EuropeAid/158557/DH/ACT/Multi

29. Chaitkin, S. et al. (2017) Towards the right care for children - Orientations for reforming alternative care systems Africa, Asia, Latin America. Luxembourg: Publications Office of the European Union, p. 6

Funding for transforming systems of care

This research aims to identify how much EU official development assistance (ODA) funding has been spent on supporting the transition from institutional to family and community-based care and how much – if any – was spent on supporting institutions, either directly or indirectly.

This report also assesses some of the key challenges in managing and monitoring funding in this area, to support the EU to continue to generate high-quality and coordinated support to keep families together, and improve policy and practice where needed.

The potential scale of this funding support is significant. Together with its Member States, the EU is the world's leading international development donor, providing over 50% of all global development aid,³⁰ – a total of €75.5 billion in 2016.³¹ The EU on its own is the fourth-largest global donor, with net official development assistance (ODA) at US\$16 billion in 2017, in the form of projects, budget support, technical assistance, grants, financial assistance and multi-lateral funding.³²

However, the EU does not currently provide data specifically on its work on transforming systems of care,³³ so-called 'deinstitutionalisation'. There is also no disaggregated data on either funding of institutions or on funding for the transition from institutional to family and community-based systems of care. An estimated €5.5 million is spent on 'children in institutions', as outlined below.³⁴ However, this figure, drawn from EU sources, does not specify what type of activities this is spent on, whether it is promoting transition to family and community-based care, or institutionalisation. Therefore, further analysis is required to gauge the current funding level towards transforming systems of care as well as future funding.

This report provides an analysis of EU ODA focusing mainly on the period 2013 to May 2018. Historical data from 2008 – 2013 which supports transforming systems of care is also used to gain a more comprehensive picture. This includes development aid which addresses some of the key drivers of institutionalisation – including access to health, education and overall poverty. This funding supports a wide range of activities on poverty, health, education as well as conflict, migration and civil society.³⁵

It is clear that EU funded ODA programmes have the potential to generate high-quality and coordinated support to keep families together, build communities and strengthen alternative care in a range of cultures and contexts, ensuring that no child is left behind. Looking at development funding outside Europe and within the European neighbourhood region³⁶ across relevant funding streams, the report highlights a selection of examples of good practice as well as areas for improvement. It makes recommendations for future EU expenditure overseas and the policy changes needed to bring about a well-planned, well-resourced, and safe transition to family and community services and away from the use of institutions for children.

30. EU DCI, European development policy. https://ec.europa.eu/europeaid/policies/european-development-policy_en

31. EC, Press release (11 April 2017), EU Official Development Assistance reaches highest level ever. http://europa.eu/rapid/press-release_IP-17-916_en.htm

32. In 2016 prices. DevTracker: https://donortracker.org/country/eu?gclid=EAlaIqObChMljZqlv-Wm2wIVYb7tCh0bZABMEAYASAAEgJDCvD_BwE

33. The term 'care transformation' is also used throughout the document

34. This calculation is based on the % the EU provided in #EU4 children: around 6% of projects and some 3% of the funding (of the 13% spent on 'particularly vulnerable children') = around €31.89 million or an average annual figure of around €5.3 million was directed at institutionalised children. #EU4Children (2017) Op. cit.

35. Work which could support ending the institutionalisation of children can also be found in programmes working on topics ranging from agriculture and climate change to infrastructure support. It can be difficult therefore to locate the exact amount of funding for more specific work.

36. The European Neighbourhood region includes both members states of the EU and the 16 east and southern neighbouring states. EC, Countries of the region. https://ec.europa.eu/neighbourhood-enlargement/neighbourhood/countries_en

THE CONTEXT OF INSTITUTIONALISATION OF CHILDREN

The scale and scope of institutionalisation

Millions of children live in institutions globally.³⁷ The exact figure is unknown due to a lack of reliable data on children outside families. Many countries do not routinely collect data on these children, and they are not covered in other current mainstream data collection processes, which rely on household-based surveys.³⁸ Even where countries are collecting administrative data related to institutionalisation, it is common, especially in Low and Middle-Income Countries, that a majority of institutions are unregistered or unrecorded. Research in Haiti for example suggests that 85% of institutions are unregistered.³⁹ This increases the risk that these children are excluded from regular data collection, resulting in them being left behind as they are not considered in service planning. The EU has recognised both the risk to children if they are not included in data collection, as well as the effect on policy. A recent report on this issue notes that for strategies to be implemented effectively, accurate data (including disaggregated data) is necessary.⁴⁰

It is clear that a majority of children in institutions, including so-called 'orphanages' are not orphans.⁴¹ On average 80% have at least one living parent and, with a little additional support, most children could live with their birth or extended families.⁴² Nevertheless, many children are placed in institutions due to poverty, war, natural disaster, discrimination, disability and social exclusion.⁴³ The lack of services and support in the community means that parents are forced to leave their child in an institution.⁴⁴ Children may also be admitted to institutions for the purpose of exploitation⁴⁵ and can be actively 'recruited' for orphanages, often using false promises of education or food, in order to attract volunteers, donations and other funding. This form of exploitation is increasingly being recognised as 'orphanage trafficking'.⁴⁶

37. The number of residential institutions and the number of children living in them is unknown. Estimates range from more than 2.7 million ('tip of the iceberg') based on administrative data in Petrowski, N., Cappa, C. & Gross, P. (2017). Estimating the number of children in formal alternative care: Challenges and Results. *Child Abuse and Neglect*, 40, 388-398. <https://doi.org/10.1016/j.chiabu.2016.11.026> [accessed 27 April 2018]. to 8 million (Cited in: Pinheiro, P. (2006). *World Report on Violence against Children*, UNICEF, New York). These figures are often reported as underestimates, due to lack of data from many countries and the large proportion of unregistered institutions.

38. Carr-Hill, R. (2017). Improving population and poverty estimates with citizen surveys: Evidence from East Africa. *World Development*. Volume 93, pp 249 -259. <http://dx.doi.org/10.1016/j.worlddev.2016.12.017> [Accessed 30 March 2017].

39. IBESR. (June 2013). *Annuaire des Maisons d'Enfants en Haïti*. 2013

40. 'EU Guidelines for the Promotion and Protection of the Rights of the Child (2017) Leave no child behind' p24 https://eeas.europa.eu/sites/eeas/files/eu_guidelines_rights_of_child_0.pdf [accessed 28 May 2018]

41. Csáky, C. (2009). Keeping Children Out of Harmful Institutions: Why We Should be Investing in Family-Based Care. London, UK: Save the Children; Sherr, L., Varrall, R., Mueller, J., JLICA Workgroup 1 Members, Richter, L., Wakhweya, A., Kimou, J. (2008). A systematic review on the meaning of the concept 'AIDS Orphan': Confusion over definitions and implications for care. *AIDS Care*, 20, 527-536.

42. Csáky, C. (2009). Keeping Children Out of Harmful Institutions: Why We Should be Investing in Family-Based Care. London, UK: Save the Children, p7.

43. Csáky, C. (2009). op. cit.; Chaitkin, S. et al. (2017) op. cit.; EveryChild and Better Care Network (2012). Enabling reform. Why supporting children with disabilities must be at the heart of successful child care reform. New York: Better Care Network.; UNICEF. (2010). *At Home Or in a Home: Formal Care and Adoption of Children in Eastern Europe and Central Asia*; Carter, R. (2005). *Family matters: a study of institutional childcare in Central and Eastern Europe and the former Soviet Union*. London, EveryChild.; Tinova, M, Browne, K.D. and Pritchard, C. as cited in Browne, K. (2009). *The Risk of Harm to Young Children in Institutional Care*, Save the Children, London.

44. Chiwaula, L. et al. (2014). Drumming together for change: A child's right to quality care in Sub-Saharan Africa. The Centre for Excellence for looked after children in Scotland (CELCIS); Csáky, C. (2009). op. cit.

45. Doore, K.E.V. (2016). Paper orphans: Exploring child trafficking for the purposes of orphanages. *The International Journal of Children's Rights*. Volume 24, Issue 2

46. Joint Standing Committee on Foreign Affairs, Defence and Trade (2017) *Hidden in Plain Sight An inquiry into establishing a Modern Slavery Act in Australia*. Parliament of the Commonwealth of Australia http://parlinfo.aph.gov.au/parlInfo/download/committees/reportjnt/024102/toc_pdf/HiddeninPlainSight.pdf;fileType=application%2Fpdf [accessed 2 May 2018]

The harm caused by institutionalisation

Over 80 years of research from around the world has demonstrated that living in institutions can cause significant harm to children. They are deprived of loving parental care and can suffer lifelong physical and psychological harm as a consequence.⁴⁷ Babies in particular fail to develop as they should without one-to-one parental interaction, and research has demonstrated the severe impact of institutionalisation on early brain development.⁴⁸ Studies have shown that children who remain in institutions after the age of six months often face severe developmental delays.⁴⁹

Children in institutions in many countries experience various forms of neglect, abuse and maltreatment.⁵⁰ The prevalence of physical and sexual abuse in residential care is also higher than in other forms of care, even in countries where residential care is better resourced with smaller numbers of children per facility.^{51 52}

Children with disabilities in institutions are at even greater risk of abuse,⁵³ including of electroshock therapy without anaesthesia; and routine hysterectomies for young girls.⁵⁴ Even in institutions without harsh disciplinary regimes, children are often neglected.⁵⁵

Institutions can also severely limit the life chances of the children who grow up in them and young people leaving institutions often continue to face significant challenges.⁵⁶ A number of studies have shown that care leavers are more likely to be involved in criminal activity, that institutions are ineffective in preventing criminality,⁵⁷ and that young people leaving institutions are at increased risk of prostitution and suicide.⁵⁸ The risks of becoming homeless are approximately 50 times higher for those who have lived in institutions, compared with those who were placed in foster care.⁵⁹

47. Berens, A. E. & Nelson, C. A. (2015). The science of early adversity: is there a role for large institutions in the care of vulnerable children? *The Lancet*.

48. Nelson, C. & Koga, S. (2004). Effects of Institutionalisation on Brain and Behavioural Development in Young Children: Findings from the Bucharest Early Intervention Project. Paper presented at the International Conference on 'Mapping the Number and Characteristics of Children Under Three in Institutions across Europe at Risk of Harm' EU Daphne Programme 2002-2003 and WHO Regional Office for Europe, Copenhagen.

49. Berens, A.E. & Nelson, C.A. (2015). op. cit.

50. European Coalition for Community Living (2010). Wasted Time, Wasted Money, Wasted Lives ... A Wasted Opportunity? – A Focus Report on How the Current Use of Structural Funds Perpetuates the Social Exclusion of Disabled People in Central and Eastern Europe by Failing to Support the Transition from Institutional Care to Community-Based Services, p75. <https://www.opensocietyfoundations.org/sites/default/files/wasted-opportunity-20100325.pdf> [accessed 2 May 2018].

51. Behal, N., Cusworth, L., Wade, J. et al. (2014). Keeping Children Safe: Allegations Concerning the Abuse or Neglect of Children in Care. <http://www.york.ac.uk/inst/spru/research/pdf/Abuseincare.pdf> [accessed 2 May 2018].

52. Euser, S., Alink, L.R., Tharner, A., et al. (2014). The prevalence of child sexual abuse in out-of-home care: a comparison between abuse in residential and in foster care. *Child Maltreatment*.

53. UNICEF. (2007). Promoting the Rights of Children with Disabilities. *Innocenti Digest 13*. UNICEF. www.unicef-irc.org/publications/pdf/digest13-disability.pdf [accessed 28 May 2018].

54. Milovanovic, et al. (2013). The Hidden and Forgotten: Segregation and Neglect of Children and Adults with Disabilities in Serbia. *Mental Disability Rights International*, Belgrade. <http://www.mdri-s.org/wp-content/uploads/2013/10/the-hidden-and-forgotten-2013-12-17.pdf>. See also: Ahern, L. & Rosenthal, E. (2006). *Hidden Suffering: Romania's Segregation and Abuse of Infants and Children with Disabilities*. Mental Disability Rights International, Washington D.C. http://www.driadvocacy.org/wp-content/uploads/romania-May-9-final_with-photos.pdf

55. Behal, N., Cusworth, L., Wade, J. et al. (2014). Keeping Children Safe: Allegations Concerning the Abuse or Neglect of Children in Care. <http://www.york.ac.uk/inst/spru/research/pdf/Abuseincare.pdf> [accessed 2 May 2018].

56. Csaky, C. (2014). op. cit.

57. Greenwood, P.W. & Rand, S.T. (1993). Evaluation of the paint creek youth center: a residential program for serious delinquents. *Criminology*, 31.2: 263-279. Slot, N.W., Jagers, H.D., et al. (1992). Cross-cultural replication and evaluation of the Teaching Family Model of community-based residential treatment. *Behavioral Residential Treatment*, 7.5: 341-354.

Sunseri, P.A. (2004). Family functioning and residential treatment outcomes. *Residential Treatment for Children & Youth*, 22.1: 33-53. Lindquist, M.J., & Santavirta, T. (2012). Does Placing Children in Out-of-Home Care Increase their Adult Criminality? Swedish Institute for Social Research. Stockholm, Sweden.

58. Cusick, L., Martin, A. & May, T. (2003). Vulnerability and Involvement in Drug Use and Sex Work. Home Office, 2003.

Coy, M. (2008). Young women, local authority care and selling sex: findings from research. *British Journal of Social Work*, 38.7: 1408-1424.

Pashkina, N. (2001). Sotsial'noe obespechenie, 11:42-45. Cited in: Holm-Hansen J, Kristofersen LB, Myrvold, T.M. eds. *Orphans in Russia*. Oslo, Norwegian Institute for Urban and Regional Research (NIBR-rapport 2003:1).

Cusick, L. (2002). Youth prostitution: A literature review. *Child Abuse Review*, 11.4: 230-251.

59. Research looking at the histories of clients of a centre for homeless people in Prague, run by the NGO Naděje, revealed that 286 out of the organisation's 3,000 homeless clients (9%) during the period 1993-2004 had lived in children's institutions, while only 6 of them grew up in foster care (Lumos' analysis of data was based on information from Univerzita Karlova. Centrum pro sociální a ekonomické strategie [Charles University. Centre for Social and Economic Strategies] (2010). *Klienti organizace Naděje 1993-2004 [Clients of the Organisation Naděje 1993-2004]*. Ver. 1.0. Praha: Český Sociálněvědní Datový Archiv, [citováno 21.7.2016]. DOI 10.14473/CSDA00036). Similar numbers of children were growing up in foster care and in children's institutions at that time. On average, 5,774 children lived in foster care between 1989 and 2003, and 4,435 children lived in children's institutions between 1997 and 2003. Calculations are based on data from Education System Statistical Yearbook (2016). www.w

Children placed in foster care are also more likely to attain higher levels of education and family stability, are less prone to substance abuse and are less likely to be arrested or convicted, than the children who grew up in institutions.⁶⁰

Young adults leaving institutions are especially vulnerable to these risks because they have had fewer opportunities to develop the social skills and networks they need to live successfully and independently in the community.⁶¹ These poor outcomes for children result in high potential social and economic costs to society.⁶²



What is an institution?

The size of the institution matters, but it is not the defining feature. Institutional care is any residential care that has an institutional culture. Institutional culture means that children are isolated from the broader community and have to live with other non-related children. These children, and their families, do not have sufficient control over their lives and decisions which affect them. Crucially, the requirements of the organisation itself tend to take precedence over the children's individual needs. This makes it almost impossible for children to develop a secure attachment and to receive sufficient stimulation and attention to develop as they should.⁶³

Institutions include: orphanages, reception centres for unaccompanied refugee children, residential health facilities and psychiatric wards, and residential special schools.

uiv.cz [accessed 16 June 2016]; and MPSV [MOLSA] (2005). Co Nejvíce Opuštěných a Ohrožených Dětí by Mělo Vyrůstat v Rodinách [When Possible, Vulnerable Children Should Grow up in Families]. <http://www.mpsv.cz/files/clanky/104/180205.pdf> [accessed 16 June 2016]. The findings suggest that the risk of becoming homeless is approximately 50 times higher for those who have lived in institutions, compared with those who were placed in foster care. This finding is unsurprising, given that foster families can offer ongoing individualised support for children that can help prepare them for leaving care, while those living in institutions do not benefit from this kind of one-to-one support. See also Prudký, L.A. & Šmídová, M. (2010). Kudy Ke Dnu: Analýza Charakteristik Klientů Naděje, o.s., Středisko Praha, Bolzanova [How to Get to the Bottom: the Characteristics of Clients of Naděje's Centra Prague Bolzanova]. Vyd. 1. Praha: Socioklub, dotisk, 135 s. Sešity pro sociální politiku.

60. Every Child (2011). Fostering Better Care. <http://www.everychild.org.uk/sites/default/files/docs/FosteringBetterCare.pdf> [accessed 16 June 2016].

61. Delap, E. (2011). Scaling Down: Reducing, Reshaping and Improving Residential Care Around the World. Positive Care Choices. London: EveryChild. As cited in: Csaky, C. (2014). op. cit.

62. Congressional Coalition on Adoption Institute [CCAI] (2011). The Way Forward Project Report, p29. <http://www.law.harvard.edu/faculty/bart-holet/The%20Way%20Forward%20Project%20Report.pdf> [accessed 8 March 2016].

63. European Commission. (2009). Report of the Ad Hoc Expert Group on the Transition from Institutional to Community-based Care.

The cost of institutions

There are many different funding models of institutions – some are resourced purely by the state, whereas others receive funding from diverse sources, including national and international charities, faith-based organisations and international tourism and donations. Many institutions are set up with good intentions but continue to exist for economic reasons. Some institutions operate on a 'local economy model', where they may be the only employer in a town, which results in a strong financial motivation to keep operating. Whereas at the other extreme, some institutions are involved in an 'organised crime model', where they are established specifically for the purpose of trafficking in children to for example exploit their labour or to sexually abuse them.⁶⁴ What they all have in common is that they put the economic interests of adults ahead of the best interests of the child.

Governments in many countries believe that providing care and protection to children through institutions is the most cost-effective option. However, research has shown that on average, institutional care is eight times more expensive than providing social services to parents and children; it is up to five times more expensive than foster care; and twice as expensive as community residential homes or small group homes.⁶⁵

IN THE KAGERA REGION OF TANZANIA

the World Bank reported that the cost of a child living in an institution was nearly **six times** higher than supporting a child to live in a foster family.⁶⁵



A CASE STUDY IN ERITREA

showed that the annual cost per child in residential care was \$1,900 USD, while the cost for family integration was below \$100 USD.⁶⁶



64. Mulheir, G & Gyllensten, L (2017) Institutionalisation and the commodification of children. How to ensure children regain their right to family life. In Dolan, P & Frost, N (eds.) The Routledge Handbook of Global Child Welfare, Routledge

65. Browne, K. (2009). op. cit. Carter, R. (2005). Family matters: a study of institutional childcare in Central and Eastern Europe and the former Soviet Union. London, EveryChild.; Csáky, C. (2009). op. cit.; Csáky, C. (2009). op. cit.

66. Better Care Network Secretariat. (2009). Global facts about orphanages, Better Care Network. http://handstohearts.org/wp-content/uploads/2011/04/Global-Fact-Sheet-on-Orphanages_BetterCareNetwork.pdf.

67. Prywes, M., Coury, D. Fesseha, G., Hounsounou, G. and Kielland, A. (2004). Cost of projects for orphans and other vulnerable children: case studies in Eritrea and Benin. Social Protection Discussion Paper Series. Available online: [http://www-wds.worldbank.org/servlet/WDSContentServer/WDSP/IB/2004/10/12/000012009_20041012101822](http://www-wds.worldbank.org/servlet/WDSContentServer/WDSP/IB/2004/10/12/000012009_20041012101822Prywes, M., Coury, D. Fesseha, G., Hounsounou, G. and Kielland, A. (2004). Cost of projects for orphans and other vulnerable children: case studies in Eritrea and Benin. Social Protection Discussion Paper Series. Available online: http://www-wds.worldbank.org/servlet/WDSContentServer/WDSP/IB/2004/10/12/000012009_20041012101822)

Despite the evidence, there is a lack of understanding of the cost of institutions and the harm caused by them. Many people think that institutions are a social good, or that better alternatives do not exist, so they continue to invest in and donate to these institutions.

What does transforming systems of care entail?

Transforming systems of care is the transition from institutional to family and community-based care, sometimes referred to as 'deinstitutionalisation'. It involves the transformation of services to ensure that children are able to live with their families, or in family-based or family-like care in the community. It typically involves:

- Providing community services that prevent family separation and give vulnerable children the opportunity to remain with their birth parents, or with other family. Such services might include access to health care, inclusive education, or targeted services to help 'at-risk' families who might need additional support in times of need.
- Ensuring that appropriate alternatives are available when it is not possible for children to remain with their families. Following a thorough assessment of a child's needs, there may be occasions when it is not in the best interests of the child to remain in his or her family. In these instances, it is vital that alternative forms of care, such as kinship care or foster care, are in place to ensure children continue to benefit from the love and support of a family and remain in their community.
- Dismantling the institutional system. This is a complex and sensitive process that involves moving children from institutions to families or family-based care, and eventually closing down institutions. Throughout this process it is vital to ensure that each child has a placement that best meets his or her needs.
- Redirecting resources. Institutions are expensive. The money and other resources currently invested in institutions should be redirected towards community-based health, education and social services that keep families together. In this way, the alternatives to institutionalisation become sustainable for the long term, providing assistance to many more children than the institution could.

Reform is complex and requires a well-planned approach. Care transformation does not mean closing institutions overnight. Children can only leave institutions once the relevant support and alternatives are in place. The creation of new services is a critical component of the process. Fundamentally, it is about inclusion – making sure that the right support services are in place to enable all children are able to live with their families, in their communities.

A CHILD'S RIGHT TO A FAMILY – THE INTERNATIONAL FRAMEWORK FOR TRANSFORMING SYSTEMS OF CARE

A number of international, regional and European instruments all support the family as the primary caregiver for children to ensure their protection and well-being.

UN Convention on the Rights of the Child (CRC): All children have a right to live with their families. It is the responsibility of parents to raise their children and the responsibility of the state to support parents to fulfil that responsibility.⁶⁸ The CRC Implementation measures call on states to ensure the appropriate budgets, data, monitoring, policies and services are available to enable this.⁶⁹

UN Guidelines for the Alternative Care of Children: States must ensure families have access to services which support them in their caregiving role⁷⁰ and institutions are not a suitable option. If institutions still exist, “alternatives should be developed in the context of an overall deinstitutionalisation strategy with precise goals and objectives, which will allow for their progressive elimination.”⁷¹

UN Convention on the Rights of Persons with Disabilities (CRPD): People with disabilities have equal rights to live in the community and states must ensure that children with disabilities have equal rights to family life.⁷² If the immediate family is unable to care for a child with disabilities, states must provide alternative care within the wider family or in the community in a family setting.⁷³ This also includes redirecting funding towards support for community-based living. “States parties should ensure that public or private funds are not spent on maintaining, renovating, establishing, building existing and new institutions in any form of institutionalisation. Furthermore, states parties must ensure that private institutions are not established in the guise of ‘community living.’”⁷⁴ Significantly, the EU itself has ratified the UN Convention on the Rights of People with Disabilities.

2030 Agenda for Sustainable Development: The family plays an essential role in achieving the principle of leaving no one behind. Greater disaggregation of data is needed to meet the needs of the most vulnerable, including children.⁷⁵

Inter-American Convention on the Elimination of all Forms of Discrimination Against Persons with Disabilities; and the Arab Charter on Human Rights: All children have the right to live, where possible, with their families. Children with disabilities have the right to be included in society.

The African Charter on the Rights and Welfare of the Child (ACRWC): Children separated from their parents should get special protection and be provided with alternative family care. All possible steps should be taken to trace and reunite children with their parents.⁷⁶

The European Convention on Human Rights (ECHR): Family life is protected from unlawful interference, and children and families have the right to not be separated unless it is both necessary and proportionate.⁷⁷

68. UN (1989) UN Convention on the Rights of the Child. See articles 9, 7 and 18.

69. UN Convention on the Rights of the Child, General Comment No. 5, General measures of implementation of the Convention on the Rights of the Child (Articles 4, 42 and 44, para. 6) CRC/GC/2003/5, 27 November 2003.

70. UN CRC (1989) Article 18; UN Guidelines for the Alternative Care of Children (2009) Article 3.

71. 2009, UN Guidelines for the Alternative Care of Children, A/RES/64/142, paragraph 23. http://www.unicef.org/protection/alternative_care_Guidelines-English.pdf [accessed 28 July 2017].

72. UN Convention on the Rights of Persons with Disabilities, A/RES/61/106), Article. 19.

73. UN Convention on the Rights of Persons with Disabilities, A/RES/61/106), Article. 23.5

74. UN Committee on the Rights of Persons with Disabilities, General Comment 5 on Article 19 of the UNCRPD and Article 2.

75. UN (2015) Transforming Our World: The 2030 Agenda for Sustainable Development. <https://sustainabledevelopment.un.org/content/documents/21252030%20Agenda%20for%20Sustainable%20Development%20web.pdf>. Para 48.

76. African Charter on the Rights and Welfare of the Child (adopted 1990), Article 25. <http://www.achpr.org/instruments/child/>

77. European Convention of Human Rights. Article 8. http://www.echr.coe.int/Documents/Convention_ENG.pdf and *Wallova and Walla v. The Czech Republic* [2006] ECHR 23848/04.

Arab Charter on Human Rights asserts that the state and society shall ensure the protection of the family and the strengthening of family ties and provide adolescents and young people with the best opportunities for physical and mental development.⁷⁸ Article 40 requires the States Parties to ensure persons with disabilities can have a decent life that guarantees their dignity, enhances their self-reliance and facilitates their active participation in society.

EU LEGISLATION AND GUIDELINES ON THE TRANSITION FROM INSTITUTIONAL TO FAMILY AND COMMUNITY-BASED SYSTEMS OF CARE

The EU has integrated many international standards and recommendations on the importance of the family and the need to ensure the rights of all children, including those most vulnerable – are enabled to live, as much as possible, within their families or family-like care.

The ex-ante conditionality on social inclusion in the 1303/2013 Regulation for the use of the European Structural and Investment Funds (ESIF) prioritises the “transition from institutional to community-based services.”⁷⁹ The European Commission (EC) Staff Working Document; The Value Added of Ex ante Conditionalities in the European Structural and Investment Funds concluded that it: “ensured a direct link between the investments co-financed by the ESI Funds and EU level policies”, and that: “had it not been for ExAC, these changes and reforms might not have happened in some Member States or might have happened at a much slower pace.”⁸⁰

The EC ‘10 Principles for Integrated Child Protection Systems’ outlines care for children in line with international standards, including the recognition that every child is a rights holder, with non-negotiable rights to protection and that families are supported in their role as primary caregivers.⁸¹

EU Recommendation ‘Investing in children: breaking the cycle of disadvantage’⁸² recognises children in alternative care as a vulnerable group and encourages EU Member States “to stop the expansion of institutional care settings for children without parental care and promote quality, community-based care and foster care within family settings instead...”⁸³

European Consensus on Development ‘Our World, Our Dignity, Our Future’ (2017)⁸⁴ aligns EU development policy with the 2030 Agenda for Sustainable Development, and commits the EU to implementing a rights-based approach to development cooperation and intensifying efforts to “provide a safe and nurturing environment for children”, especially the most vulnerable and marginalised.⁸⁵

78. League of Arab States, Arab Charter on Human Rights, May 22, 2004, reprinted in 12 Int'l Hum. Rts. Rep. 893 (2005), entered into force March 15, 2008. Article 33

79. The 1303/2013 Regulation for the use of the European Structural and Investment Funds (ESIF)

80. European Commission (2017), Staff Working Document: The Value Added of Ex ante Conditionalities in the European Structural and Investment Funds, 3 March 2017, SWD (2017) 127, p19

81. European Commission (2015), ‘Coordination and Cooperation in Integrated Child Protection Systems’, Reflection Paper for the 9th European Forum on the Rights of the Child. 30 April 2015.

82. Commission Recommendation of 20 February 2013 Investing in Children: Breaking the Cycle of Disadvantage. OJ L 59, 2 March 2013. http://ec.europa.eu/justice/fundamental-rights/files/c_2013_778_en.pdf

83. Ibid. p.9

84. EU, (2017) The new European Consensus on Development, “Our World, Our Dignity, Our Future”, Joint Statement by the Council and the representatives of the governments of the members states meeting within the Council, the European Parliament and the European Commission. https://ec.europa.eu/europeaid/new-european-consensus-development-our-world-our-dignity-our-future_en

85. Lumos and Hope for Homes (2017), Putting Child Protection and Family Care at the Heart of EU External Action.

THE ROLE
OF OFFICIAL
DEVELOPMENT
ASSISTANCE
(ODA) IN
SUPPORTING
CHILDREN

Transforming systems of care

Transforming systems of care to ensure that children are able to live with their families, or in family-based care in the community, has significant benefits for the wider society and far-reaching development and economic dividends. It also acts as a catalyst for greater physical, emotional and mental well-being; and more inclusive communities. Being part of the community also provides increased access to employment opportunities and the ability to lead a more independent life with decreased reliance on the state.⁸⁸

As outlined earlier, creating the right conditions for care transformation includes responding to the key drivers of institutionalisation in each context. This includes poverty and disability, but also discrimination based on ethnicity, and issues of corruption, famine, war and conflict. Although these are broad challenges, there are significant ways that ODA can help start the process of transforming systems of care and ensure sustainable systems which focus on family and community-based care. These include:



**supporting families
in poverty**



inclusive education



**improving data
collection**



**building the capacity of states to support families and
children through effective and coherent
child protection strategies**



**developing local
infrastructure that
supports
communities**



**monitoring and
awareness of child
rights**



**improving
community support
for children with
disabilities**



creating economic opportunities for families



**supporting families with parental
mental health problems, or drug
and alcohol misuse**



**social service provision –
including training, budgeting
and consultation**

88. UNICEF (2012) A brief review of the social and economic returns to investing in children
https://www.unicef.org/socialpolicy/files/Investing_in_Children_19June2012_e-version_FINAL.pdf [accessed 31 May 2019]

Global events such as the 30th anniversary of the Convention on the Rights of the Child, the 10th anniversary of the UN Guidelines for Alternative Care of Children and the negotiations around the 2030 Agenda for Sustainable Development, create a momentum for advancing care transformation globally and ensuring that no child is left behind.⁸⁹ Ending the institutionalisation of children and achieving comprehensive care reform will make a significant contribution towards achieving key SDGs on poverty (SDG 1), health and well-being (SDG 3), inclusive and accessible education (SDG 4), inequality (SDG 10), ending abuse against children (SDG 16.2), trafficking (SDGs 5.2, 8.7 and 16.2) and forced labour of children (SDG 8.7).

Development aid supporting an end to institutionalisation therefore covers a wide range of challenges and a wide range of EU programmes and funding streams. The next section outlines an analysis of data from the EU on projects related to child rights, including child protection and children in institutions. It aims to provide an overview of what types of actions the EU has been funding as well as insight into the proportion of funding in the EU ODA spending that is devoted to projects related to ensuring children have family and community-based care.



EU FOCUS ON CHILD RIGHTS

In 2016, the EU published 'Towards an EU strategy on the Rights of the Child' which states that the EU has clearly identified the promotion of children's rights as a separate issue meriting specific action and that it is "vital that children's rights be recognised as a self-standing set of concerns and not simply subsumed into wider efforts to mainstream human rights in general."⁹⁰

The 2017 Revised Guidelines on the Promotion and Protection of the Rights of the Child make it clear that "EU policy on the rights of the child is strongly guided by the UNCRC" and in particular the four General Principles which guide the interpretation and implementation of all the other articles in the Convention and form the very basis of a child rights approach.⁹¹ These are: Non-discrimination (article 2), Best interests of the child (article 3), Right to life, survival and development (article 6), and Respect for the views of children (article 12).⁹²

In addition, the EU is committed to mainstreaming child rights through "systematically integrating the rights of the child in all policies and actions and programmes of the EU", extending the 'integration of the rights of the child beyond traditional child focused sectors, such as nutrition, health and education, to other sectors such as energy, agriculture, transport, trade and investment, development cooperation, humanitarian aid, infrastructure, climate change or environment.' "There are very few, if any, child-neutral policies or programmes: most have impacts on children directly or indirectly, positively or negatively."⁹³

89. United Nations (2015) Transforming our world: the 2030 Agenda for Sustainable Development <https://sustainabledevelopment.un.org/post2015/transformingourworld> [accessed 31 January 2019]

90. EC, (2006), Towards an EU Strategy on the Rights of the Child. https://ec.europa.eu/anti-trafficking/sites/antitrafficking/files/com_2006_367_strategy_on_the_rights_of_the_child_en_0.pdf

91. EC (2017) Outcomes of Proceedings, Revision of the EU Guidelines for the Promotion and Protection of the Rights of the Child (2017) Leave No Child Behind. Annex: Revision of the EU Guidelines for the Promotion and Protection of the Rights of the Child (2017) Leave No Child Behind. p7 https://eeas.europa.eu/sites/eeas/files/eu_guidelines_rights_of_child_2017.pdf [accessed 24 July 2018]

92. Ibid. p11

93. Ibid.

EU EXTERNAL ACTION FUNDING

The total EU external action funding allocation for the funding period 2014 – 2020 is more than €82 billion,⁹⁴ or €11.77 billion annually.⁹⁵ However, it is not clear how much of this will be spent, or has been spent, on supporting the transition from institutional to family and community-based care, or even on children's rights more generally.

According to the EU, the core of their approach to child rights in external action is the “integration into all actions and practical measures of the four fundamental principles contained in the CRC, namely: non-discrimination, best interests of the child, survival and development, and respect for the views of the child”.⁹⁶ However, the EU and the different departments responsible for ODA categorise their work into different themes and objectives depending on the focus areas, current priorities or funding streams.

These principles may be addressed in a wide range of actions with various key priorities and focus. For example, key DEVCO themes which may contain projects relevant to children in institutions include: children and youth, civil society, education, democracy and human rights, gender and governance.

Other funding streams may include child rights or child protection as thematic sub-categories of activities on, for example: local government support, budgets, violence against children, migration, economic development, peace and security, social inclusion and social protection. All of these sectors may contain relevant projects for children and there is no specific category on care transformation.⁹⁷ Therefore, it is difficult to uncover exactly how much the EU is spending on funding actions which support transforming systems of care. Specific challenges include:

- The broad range of activities which support the transition from institutions and towards family and community-based care includes activities on poverty reduction, education, access to health which are difficult to quantify.
- There is a lack of disaggregated data on funding for specific activities which may be relevant to children in institutions within specific projects or themes
- There is a lack of consistency in reporting. In many instances, projects are categorised according to thematic or geographical objectives, however, there may not be any aggregated data available for specific sub sets of these themes or specific activities. For example, projects under ‘children and youth’ or ‘social protection’ may or may not contain objectives or activities related to child care systems or care transformation.
- Overall, there is a lack of publicly available reporting on results and exact figures spent on child protection/child-rights within a larger project and an absence of reporting on work around care transformation.

94. Sum of relevant External action (excluding other EU funding) External action financing instruments 2014 -2020, https://ec.europa.eu/europeaid/funding/about-funding-and-procedures/where-does-money-come/external-action-financing-instruments_en

95. 82,363,000,000 divided by seven years (2014 -2020)

96. EC (2008) Commission staff working document - The European Union's action plan on children's rights in external action. <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A52008SC0136>

97. See for example advanced searching on the EU DCI website for projects and results. https://ec.europa.eu/europeaid/search/site_en

Nevertheless, the following sections present the information which is available on spending on transforming systems of care. Although, a number of caveats are attached to the figures, as detailed below.

EU ODA related to 'child rights' 2011 -2017

According to an EU briefing on its funding for 'child rights' between January 2011 and March 2017, the EU supported at least 4,001 actions relevant to children's rights, in 142 countries with a total EU contribution to these actions of €8.49 billion. The table below provides an overview of expenditure, based on their reported categories from 2011 to 2017.⁹⁸

Categorisation of projects	Total (2011-2017) (EURO)	Annual (average) ⁹⁹	Definition by the EU
'Child rights'	8.49 billion	1.42 billion	EU support to 'child rights' is associated with: children's survival and development rights, particularly education, health, sanitation, hygiene and nutrition.
'Children's survival and development' (74% of 'child rights')	6.28 billion	1.05 billion	Programmes which include addressing the risk factors for institutionalisation by providing children and their families access to education, economic opportunities, family support, cash transfers, health etc
'Child protection' (25% of 'child rights')	2.12 billion	353.83 million	Includes the 'protection' of vulnerable children, migration, violence, exploitation as well as social protection etc.
'Particularly Vulnerable children' (13% of child rights)	1.10 billion ¹⁰⁰	183.99 million	"This includes those affected by conflict, migrants and refugees, disabled children, indigenous or minority children, children living in or recently released from institutional care or detention, and street children. Many actions are implemented by CSOs and some are then upscaled as part of EU bilateral cooperation."
Institutionalised children' (3% of particularly vulnerable children)	33.12 million ¹⁰¹	5.52 million	As above: "children living in or recently released from institutional care or detention." This could include juvenile justice, child care institutions (with and without disability), economic opportunities for youth and possibly immigration/migration detention.

98. #EU4Children. op. cit.

99. Lumos calculation – bases on 6 years - the data is from Jan 2011 – March 2017

100. "Support to particularly vulnerable children represents 13% (€1 063m)" according to EU text it is 1063m but our calculations come out slightly different --13% of 8492 - 1103.9] of all EU support to children's rights.

101. 3 % of support to particularly vulnerable children [using the EU figure of 1063m) - 1063 m= 1,063,000,000 /3% = 31,890,000. Divided over 6 years = average 5,315,000 per year

Of the funding (€8.49 billion) related to child rights, between 2011-2017 the following categories have been reported. Note that they are overlapping and not mutually exclusive:

- 74% (€6.28 billion) was categorised as being spent on child rights areas, including children's survival and development needs
- 25% (€2.12 billion) directed towards child protection projects
- 13% (€1.10 billion) went to projects supporting 'particularly vulnerable children'.
 - Of the 13% of funding related to 'particularly vulnerable children' 3% (€33.12 million) was directed towards 'institutionalised children', which is 0.39% of the total amount spent on 'child rights'.

The analysis shows that an estimated €5.5 million is spent each year on children in institutions.¹⁰² This sum relates to "children living in or recently released from institutional care or detention"¹⁰³ and could therefore include juvenile justice, child care institutions, economic opportunities for youth and possibly immigration/migration detention.

There are no details on the type of activities under this budget, therefore, it is not possible to assess whether they are promoting transition to family and community-based care, or whether it is potentially supporting institutionalisation of children. Also, it does not include activities related to addressing the drivers of institutionalisation which are likely to be included in other areas of child rights funding.

102. Around 6% of projects and some 3% of the funding (of the 13% spent on 'particularly vulnerable children') = around €31.89 million or an average annual figure of around 5.3 million was directed at institutionalised children. #EU4Children, Overview of EU operational support to children's rights (January 2011-March 2017) op. cit. However, Lumos calculation indicated €5.5 million

103. Ibid.

THE EUROPEAN COMMISSION'S ROLE IN TRANSFORMING SYSTEMS OF CARE 2013 -2018

Due to the lack of details on spending on children in institutions from the EU, a request was made to all three relevant DGs of the EC (DEVCO, ECHO and NEAR) for information on their spending on projects related to transforming systems of care ('deinstitutionalisation') for children between 2013 and February 2018 (the time of the data request).

A total number of 117 actions were identified by the Directorates as being related to care transformation from 2013 to 2018. During the slightly different time period of 2011 – 2017, there were 4,001 projects related to 'children's rights'. Whilst the timeframe is not directly comparable, these data suggest that less than five per cent of child rights projects related to transforming systems of care.¹⁰⁴

Summarising the responses from the three Directorates and excluding all projects which had been listed in multiple responses, the total amount is just over €45 million. However, this included large project in Zimbabwe for €6 million¹⁰⁵ and a project in Kyrgyzstan for €26 million, which covers various objectives, of which only one is community care for children.¹⁰⁶ Therefore, it can be deduced that this figure does not reflect accurately the actual funding for children in institutions, let alone a figure for transforming systems of care.

The limited available detail related to the figures obtained makes it difficult accurately assess the level of funding towards care transformation.

DG DEVCO

Based on information received from DG DEVCO, 27 projects and one study were classified as relating to care transformation for children over 2013– 2018, with total funding of €43.80 million.¹⁰⁷

Of these projects; in the European Neighbourhood: 10 Projects; Africa: 10 Projects; Asia: 1 Project; Central Asia: 2 Projects; Russia: 2 Projects; Caribbean: 1 Project; Multi-State: 1 Project.¹⁰⁸

The majority of projects in Africa provided support for communities and families to prevent family separation, with two focused on reintegrating children with disabilities into society. However, one project in Mauritius worked on improving an institution through the provision of quality residential care and therapy to 24 abused children including those with disabilities. It is not clear if this is an isolated initiative, or if the project formed part of a wider commitment towards transforming the system of care.¹⁰⁹

Within the European neighbourhood region,¹¹⁰ there were four projects that clearly supported care transformation, as well as projects that supported the introduction or improvement of alternative care without an express objective of care transformation. In Tunisia, one project focused on improving the rights

104. #EU4Children. op. cit.

105. The EU allocates 6 million Euros to support the National Action Plan (NAP) for Orphans and Other Vulnerable Children (OVC) of Zimbabwe (23 March 2010). https://ec.europa.eu/europeaid/sites/devco/files/aap-financing-zimbabwe-spe1-pr-20110329_en.pdf

106. The main objective of the two-year project is to support the government and civil society to reduce poverty, to ensure access to social services for vulnerable sectors of the population and to enhance public accountability, good governance and transparency in public spending https://eeas.europa.eu/delegations/kyrgyz-republic/18949/eu-launches-new-project-support-social-protection-sector-kyrgyzstan_en

107. 3% of 1.063 million of funding is 43,797,719] In response: "request for access to document - EU funded projects related to the de-institutionalisation of children (EIDHR and DCI) since 2013. In the table enclosed you will also find some projects funded under others instruments, as an addition to the others answers you might have received. highlighted in green the projects that are strictly focusing on de-institutionalisation; the others are also touching on the issue but less directly or comprehensively." Request entitled "EU funded projects related to the deinstitutionalisation of Children" made on 2 February 2018. op. cit. Several projects were listed in both the response by DG DEVCO and the response from DG NEAR. These projects came to a total of €5,077,523. In addition, the DEVCO response included a project for €6 million funding the Zimbabwe Action plan on OVCs which covers a large range of activities related to anti-poverty.

108. Request entitled "EU funded projects related to the deinstitutionalisation of Children" made on 2 February 2018. op. cit.

109. Contract: 329757. Funding stream: DCI-NSAPVD, Funding: €157,970; "Providing quality residential care and therapy to 24 abused children including those with disabilities". Request entitled "EU funded projects related to the deinstitutionalisation of Children" made on 2 February 2018. op. cit.

110. European region is Europe plus neighbourhood states.

of children without family support, by addressing the functioning of childcare centres and building their capacity to work with local authorities.¹¹¹ In Algeria, a project promoting and operationalizing the rights of children with disabilities deprived of their family aimed to strengthen professional practices, service quality, and coordination to improve institutional care through the improvement of reception conditions and care in Assisted Children's Settlements (EEA).¹¹² In both these instances, there appears to be no overall commitment to ensuring the project supported a transition towards family and community care. In Kyrgyzstan, a €26 million project included one component on child protection and ensuring community-based care for children. Other components of the project focused on public finance management.¹¹³

DG NEAR

In response to the same request for projects related to the care transformation ('deinstitutionalisation') for children from 2013 to present, DG NEAR provided a list of 13 projects.¹¹⁴ ¹¹⁵ According to this response, the total amount of DG NEAR funding related to transforming systems of care for the period 2013 -2018 was €6.56 million. However, several projects were also included in the response from DG DEVCO.

These projects came to a total of €5.08 million, and this figure should therefore be deducted from the total spending by DG DEVCO and DG NEAR.

Out of the 13 projects classed as care transformation by DG NEAR, there were two projects each in **Ukraine, Russia, Tunisia and Jordan, and one project each in the West Bank and Gaza, Armenia, Algeria, Georgia and Morocco.** In terms of specific content, only one was focused on pursuing care transformation – a project supporting state reform of orphanages in Russia and 'the best interest of the child' in the Russian state of Karelia. Other projects which had no reference to care transformation included three on supporting families (Georgia, Ukraine, Morocco), three on juvenile justice systems (West Bank, Tunisia and Jordan), two focused on support or rights related work with 'parentless children' (Armenia and Tunisia), one focused on displaced children (Ukraine), and one project had a focus on children with disabilities (Algeria)

Whilst the official response did not include any pre-accession countries, it is important to note that significant funds have been spent on transforming systems of care in the region outside the current EU Member States. This includes for example, €1 million allocated to UNICEF for a child protection system reform in Bosnia and Herzegovina in 2016-2018¹¹⁶ and care transformation in Serbia in 2017 – 2019 as part of support to social welfare.¹¹⁷

111. Contract: 367154; funding stream: CSO-LA; funding: € 600,000; time:01/02/2016 - 31/12/2019

112. Contract: 369345; funding stream: NEAR-TS; funding: € 150,000; time: 01/01/2016 - 31/12/2017. See also https://www.handicapinternational.be/sites/default/files/paginas/bijlagen/2016-08_fp_algerie_2016.pdf

113. The main objective of the two-year project is to support the government and civil society to reduce poverty, to ensure access to social services for vulnerable sectors of the population and to enhance public accountability, good governance and transparency in public spending https://eeas.europa.eu/delegations/kyrgyz-republic/18949/eu-launches-new-project-support-social-protection-sector-kyrgyzstan_en

114. Request entitled additional information on "EU funded projects related to the deinstitutionalisation of Children" made on 6 June 2018. https://www.asktheeu.org/en/request/eu_funded_projects_related_to_th?nocache=incoming-17662#incoming-17662.

115. A further request for figures showing actual EU funding resulted in a response containing 12 projects. Analysing the two responses, it appears that the Project in Russia which was outlined as two separate projects in the first response has now been merged, although this cannot be fully verified. See Request entitled "EU funded projects related to the deinstitutionalisation of Children" made on 2 February 2018. op. cit. and Request entitled additional information on "EU funded projects related to the deinstitutionalisation of Children" made on 6 June 2018. op. cit.

116. Opening Doors Campaign (n.d.) Bosnia and Herzegovina https://www.openingdoors.eu/where-the-campaign-operates/bosnia-and-herzegovina/#_ftn2 [accessed 3 May 2019]

117. Opening Doors Campaign (n.d.) Serbia <https://www.openingdoors.eu/where-the-campaign-operates/serbia/> [accessed 3 May 2019]

DG ECHO

During 2008–2015, the European Commission Humanitarian Aid and Civil Protection department (ECHO) funded 241 actions on child protection and Education in Emergencies (EiE), providing €264.9 million.¹¹⁸ According to a 2016 evaluation of ECHO activities related to child protection and education in emergencies, most ECHO support to education in emergencies included elements of child protection.¹¹⁹

In response to the request for information on projects related to care transformation for children between 2013 and 2018, DG ECHO submitted a total of 77 projects,¹²⁰ although it was recognised that it is difficult to distinguish the care transformation component, as this is most often only one out of several components of ECHO funded actions. Most projects primarily related to developing foster care arrangements (including training and support for foster carers), family tracing, family or kin reunification for displaced children as well as the provision of safe spaces within refugee/displaced people's camps.

The ECHO Protection Guidelines (2016) have recognised the importance of identifying, registering and reunifying children as well proper case-management, Best Interests Assessments and determination.¹²¹ In their response to a request for information from Lumos, DG ECHO stated that: "... it may be concluded that institutionalisation of children should not be supported. *As much as possible, children should be allowed to stay with their communities or relatives. Alternative care arrangements, such as fostering, should be considered. Overall, any decisions on alternative care options should always be based on a Best Interests Determination (BID).*"¹²²

118. Out of 241 actions, 198 were mainly funded under ECHO's geographical Humanitarian Implementation Plans (HIPs), and a few thematic HIPs, representing €241.3 million. The remaining 43 actions were funded under EU Children of Peace HIP. EU, (2016), Evaluation of DG ECHO's actions in the field of protection and education of children in emergency and crisis situations (2008-2015)

119. Final Report - Evaluation of DG ECHO's Actions in the Field of Protection and Education of Children in Emergency and Crisis Situations (2008-2015), Brussels, 2016: Evaluation of DG ECHO's Action in the field of Protection and Education of Children in Emergency and Crisis Situations (2008-2015): 2016.

120. "The projects were searched for and identified in HOPE, DG ECHO's database listing humanitarian aid projects by ECHO partners, as broadly as possible by use of several key words (such as: family or community based care, foster families, alternative care etc.). Nevertheless, it should be noted that this list may be not definite or not fully exhaustive despite the wide search." Request entitled "EU funded projects related to the deinstitutionalisation of Children" made on 2 February 2018. op. cit. The total value of these projects was not included.

121. DG ECHO: Humanitarian Protection: Improving protection outcomes to reduce risks for people in humanitarian crises, May 2016: http://ec.europa.eu/echo/sites/echo-site/files/policy_guidelines_humanitarian_protection_en.pdf

122. Request entitled "EU funded projects related to the deinstitutionalisation of Children" made on 2 February 2018. op. cit.

DG DEVCO

27 projects and one study were classified as relating to care transformation for children over 2013– 2018.

- European Neighbourhood: 10 Projects
- Africa: 10 Projects
- Asia: 1 Project
- Central Asia: 2 Projects
- Russia: 2 Projects
- Caribbean: 1 Project
- Multi-State: 1 Project



DG NEAR

DG NEAR provided a list of 13 projects

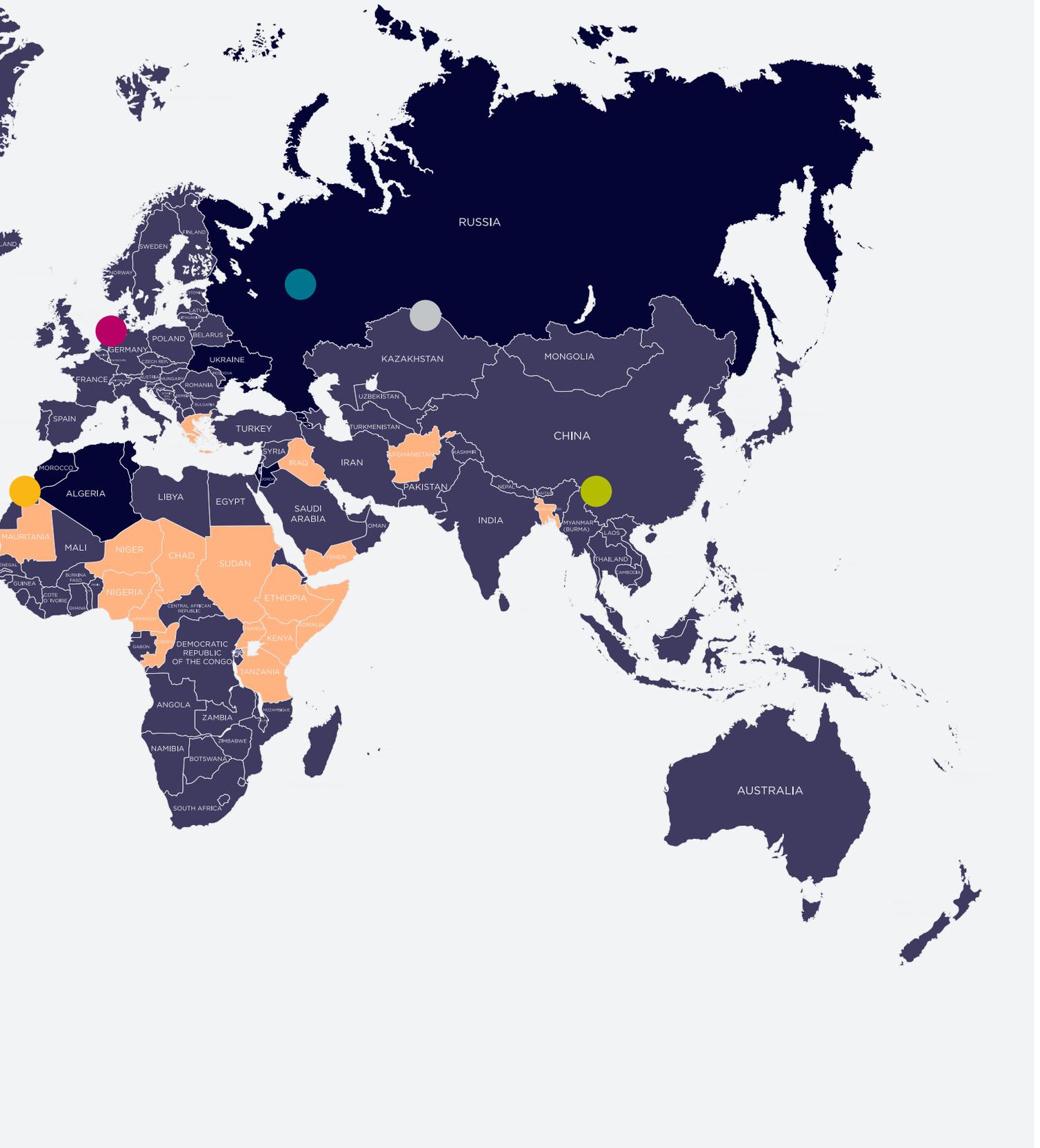
There were two projects each in Ukraine, Russia, Tunisia and Jordan, and one project each in the West Bank and Gaza, Armenia, Algeria, Georgia and Morocco.



DG ECHO

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EUROPEAN EXTERNAL ACTION SERVICE

The EU has around 140 Delegations and Offices, which are important actors in connecting the EU with countries around the world. The research found instances where EU delegations have publicly supported institutions through local fundraising and visits to institutions for children. For example, In November 2015, to commemorate European Cooperation day, the Albanian Minister of European Integration and representatives of the EU Delegation, attended an event fundraising for the Vlora children's orphanage in Albania. Media reports stated that donations were wrapped with *"special bags with the EU flag and logo of the cross-border cooperation programme produced from the EU Technical Assistance Grant budget."*¹²³

In May 2017, the EU Delegation in Tashkent, alongside other missions, participated in an annual event organised by the Uzbekistan Ministry of Foreign Affairs. The EU Delegation donated proceeds (UZS3.5 million) to support local orphanages and schools for children with special needs.¹²⁴ In Malawi, in 2014, media reports stated that the EU Delegation there has been supporting an orphanage with material resources over the past three years with orphans visiting the delegation's offices to show their appreciation.¹²⁵ In July 2015, the EU Delegation in the Gambia donated technical equipment to an Orphanage in Sinchu Alhagie.¹²⁶

While there are commendable intentions behind this support, and the actions and potential funding received by the institutions are relatively small, these kinds of visits can contribute to perpetuating the notion that supporting orphanages and visiting children in orphanages is a useful and supportive measure for children. This indicates a lack of awareness of the evidence and EU policy as it contradicts attempts by the EU and others at transforming institutional systems into family and community-based care. The good intentions behind this support could be harnessed and redirected towards supporting children to remain in families.

123. Agjencia Telegrafike Shqiptare (20 November 2015), Inter-border project Greece- Albania , Minister Gjoshë, gifts for children of Vlora orphanage, <https://www.ata.gov.al/en/inter-border-project-greece-albania-minister-gjoshë-gifts-for-children-of-vlora-orphanage/>.

124. EEAS (21 May 2017), The EU Delegation donates all money earned during a cultural event in Tashkent to charity, https://eeas.europa.eu/delegations/india/26600/eu-delegation-donates-all-money-earned-during-cultural-event-tashkent-charity_en

125. The Nation Online, (27 June 2014), EU Ambassador to Malawi Alexander Baum bids farewell mwnation.com/euambassador-to-malawi-alexander-baum-bids-farewell/ 27 Jun 2014.

126. EU in the Gambia, Twitter (30 July 2015), Today the EU Delegation donated technical equipment to the Sinchu Orphanage, operating in Sinchu Alhagie since 2009. <https://twitter.com/euinthegambia/status/626762885822345216?lang=en-gb> [accessed 31 May 2019]

EU-FUNDED
PROJECTS
SUPPORTING CARE
TRANSFORMATION



The EU has demonstrated its commitment to ensuring that all children have a better life, by supporting an extensive range of projects and programmes across its many funding streams and instruments. However, while there is substantial investment in the rights of the child – both in terms of development rights and social protection and participation, these actions are not guided by an explicit strategy addressing the needs of children in institutions. In practice, this can mean that programmes miss the opportunity to include these children and overlook the potential to address institutionalisation in their overall strategies. Arguably, EU funded ODA programmes have the potential to generate even more high-quality and coordinated support to keep families together and strengthen alternative care in a range of cultures and contexts.

Although there are only a few examples of programmes which are specifically working towards the transition from institutional care to family and community-based care for children, a considerable number of EU funded projects address vulnerable children and the drivers of institutionalisation. The section below gives a selection of case examples of EU funded projects aimed at supporting the rights of children to remain in families and promote inclusive development for all children by addressing many of the drivers involved in the institutionalisation and exclusion of children. Also included are a range of innovative projects which specifically focus on care transformation activities in different regions. Some of these programmes are still currently being implemented, while others are older examples. Importantly, these cases also highlight some key attributes of successful transition towards family and community-based care – including long term support, complementary programmes and the involvement of civil society.

1. Long-term integrated support for families and a national Action Plan for Orphans and Vulnerable Children (OVC) in Zimbabwe

For successful and sustainable care transformation, long-term planning is needed that focuses on moving children out of institutions into family care, addresses the reasons why institutions exist and prevents further institutionalisation. The ability of the EU to build long-term partnerships means it is well placed to support the development of national and regional strategies.

Support for orphans and vulnerable children (OVC) and their families is crucial to prevent institutionalisation; at the same time as ensuring that children in institutions can be reunited with families. In 2011, there were 72 registered child institutions in Zimbabwe – and according to UNICEF between 1994 and 2004, 24 new private institutions were built and the number of children in residential care doubled.¹²⁷ To tackle this issue, the EU is providing long-term support to the Government's National OVC Action Plan to enable children to remain with their families.¹²⁸ The aim of the support is to help develop a sustainable child-sensitive National Social Protection Framework for Zimbabwe, strengthening and reforming existing national social protection strategies.¹²⁹

A main programme priority is to enhance government capacity to lead and regulate child and family protection service delivery, including through training on the reunification of separated and unaccompanied children and transforming the system of care for children.¹³⁰ Key to the progressive nature of this programme is the recognition that as "a core principle, child-sensitive social protection strategies must be holistic, child-centred and aimed at creating resilient families which can meet the needs of all children, including those most marginalised and excluded, within a protective environment."¹³¹ Evaluations of this programme, have recognised the importance of complementary actions, including cash transfers, strengthened child and family care, and effective government social services.¹³²

By March 2010, the programme in Zimbabwe had provided school-related assistance to 249,314 children and reunited 5,413 children with their families.¹³³ In 2015, the Child Protection Fund rolled out a National Case Management System which brings together formal and informal (community) child protection actors in a coordinated system with common guidelines and operational standards. Through this and complementary improvements to social care, coordinated child protection and welfare services were provided to 48,164 children in 37 districts (i.e. 56% of national coverage).¹³⁴

Evaluations of the effectiveness of EU aid has showed that the capacity of national and sub-national governments is essential. In countries where there has been significant local ownership and harmonisation of funded actions into overall development strategies by EU bodies and the government, progress has been most significant.¹³⁵

127. Muguwe, Emely & Taruvinga, F.C. & Manyumwa, Ennie & Shoko, Nothabo. (2011). Re-integration of institutionalised children into society: A case study of Zimbabwe. *Journal of Sustainable Development in Africa*. 13. 142-149

128. EUTM RCA, EU support to orphaned and vulnerable children in Swaziland, (14 March 2017). https://eeas.europa.eu/csdp-missions-operations/eutm-rca/22764/eu-support-orphaned-and-vulnerable-children-swaziland_en and Europe Aid, The EU allocates 6 million Euros to support the National Action Plan (NAP) for Orphans and Other Vulnerable Children (OVC) of Zimbabwe (23 March 2010). https://ec.europa.eu/europeaid/sites/devco/files/aap-financing-zimbabwe-spe1-pr-20110329_en.pdf

129. See for example UNICEF (2010), 2010 Zimbabwe: Evaluation of Programme of Support for National Action Plan for Orphans and Vulnerable Children Impact/ Outcome Assessment. https://www.unicef.org/evaldatabase/index_60354.html; KFW (2015), Ex post evaluation – Zimbabwe https://ec.europa.eu/europeaid/sites/devco/files/aap-financing-zimbabwe-spe1-af-20100320_en.pdf https://www.kfw-entwicklungsbank.de/PDF/Evaluierung/Ergebnisse-und-Publikationen/PDF-Dokumente-R-Z_EN/Simbabwe_OVC_2015_E.pdf; The Special Support Measure: Programme of Support to the National Action Plan for Orphans and other vulnerable children – Phase 2. CRIS ZW/EDF/022-675 at https://ec.europa.eu/europeaid/sites/devco/files/aap-financing-zimbabwe-spe1-af-20100320_en.pdf

130. EuropeAid (23 March 2010), The EU allocates 6 million Euros to support the National Action Plan (NAP) for Orphans and Other Vulnerable Children (OVC) of Zimbabwe. op. cit.

131. The Special Support Measure: Programme of Support to the National Action Plan for Orphans and other vulnerable children – Phase 2. CRIS ZW/EDF/022-675 at https://ec.europa.eu/europeaid/sites/devco/files/aap-financing-zimbabwe-spe1-af-20100320_en.pdf

132. Jimat Development Consultants (19 May 2010), Final report: Programme of Support for the National Action Plan for Orphans and Other Vulnerable Children : Outcome Assessment. https://www.unicef.org/evaluation/files/Zimbabwe_2010-002_PoS_Outcome_Assessment_Final_19_May_10.pdf

133. UNICEF (May 2010), Child-Sensitive Social Protection in Zimbabwe. https://www.unicef.org/zimbabwe/ZIM_resources_childsensitivesocprotection.pdf

134. DFID (2016), CPF Project Completion Review, Child Protection Fund (CPF) in support of the Government of Zimbabwe's National Action Plan for Orphans and Vulnerable Children Phase II 2011-2015

135. Menocal, A.R. (2008), How effective is European Commission aid on the ground ? Project Briefing, No.13, Overseas Development Institute.



**5,413
CHILDREN
REUNITED
WITH THEIR
FAMILIES**

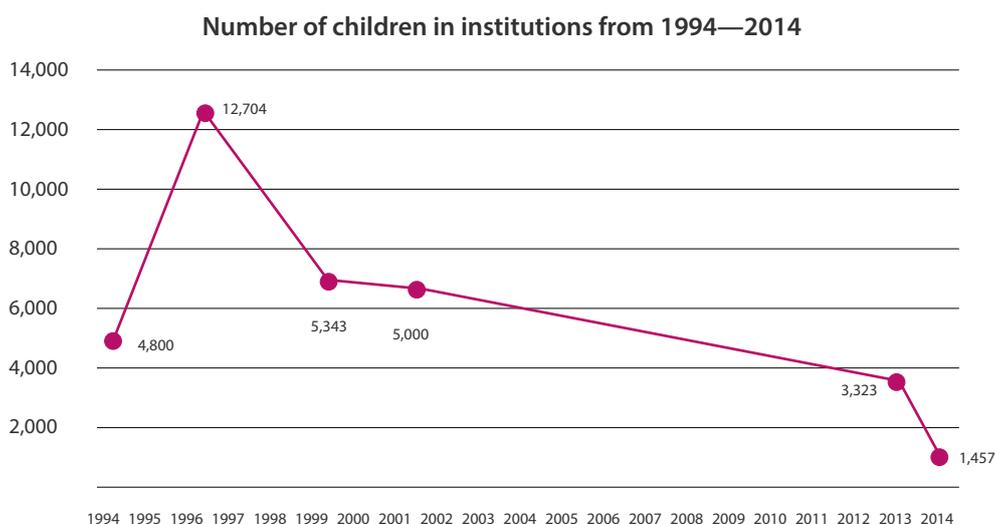


2. Reforming the care system for vulnerable children in Rwanda

Once a national level commitment to transforming the system of care is conceived and agreed there needs to be a range of actions that take place in harmony. This includes the introduction of new legislation, the reform and redirecting of resources at the national and community level to ensure the development of community level care and concrete strategies to close institutions, reintegrate children with families and prevent future admissions. In Rwanda, the EU, along with other donors, has worked to ensure these key building blocks in a successful move towards family and community-based care are in place.

Rwanda has made great strides in reforming its system of care for vulnerable children. The reforms were led by the government, with several partners, including UNICEF, NGOs and faith-based organisations. Donors, including the EU, USAID, Displaced Children and Orphans Fund (DCOF) and Global Fund, have supported care reform, early childhood education, prevention and economic strengthening.¹³⁶ Prior to 1994 there were 37 residential facilities housing 4,800 children, but by 1995 – in the wake of the 1994 genocide – the number of facilities rose to 77, housing 12,704 children. Work on family tracing and reunification, alongside an expansion of foster care for children who could not be reunified, meant that by April 2000, the 37 remaining centres housed fewer than 5,000 children.¹³⁷

There were several significant developments between 2010 and 2012, including the passing of a landmark law on the Rights and Protection of the Child; the establishment of the National Commission for Children (NCC); and successful pilot care transformation projects. These initiatives demonstrated that – with a concrete strategy, well-trained social workers and available alternative care options such as formal foster care – care transformation was possible in Rwanda.¹³⁸ In 2012 there were 3,323 children in institutions, and by 2014 this had been reduced further to 1,457.¹³⁹



The reforms have strengthened the capacity of government bodies and professionals working with children and families, and family support services and social protection schemes are in place to address the drivers of family separation. **A robust legal and policy framework that includes prevention of separation and provision of targeted support to families and increased availability of alternative care services such as foster care, have led to a reduction in the number of children living in institutions.**¹⁴⁰

136. Better Care Network & UNICEF. (2015). Country Care Profile: Rwanda. https://bettercarenetwork.org/sites/default/files/Country%20Care%20Profile%20-%20Rwanda_0.pdf [accessed 23 May 2018].

137. Ibid.

138. Better Care Network & UNICEF. (2015). An Analysis of Child-Care Reform in Three African Countries: Summary of Key Findings. https://bettercarenetwork.org/sites/default/files/An%20Analysis%20of%20Child-Care%20Reforms%20in%20Three%20African%20Countries%20-%20Summary%20of%20Key%20Findings_0.pdf [accessed 23 May 2018].

139. Better Care Network & UNICEF. (2015). Country Care Profile: Rwanda. op. cit.

140. Better Care Network & UNICEF. (2015). An Analysis of Child-Care Reform in Three African Countries: Summary of Key Findings. op. cit.

3. Collaboration with local authorities and support for local civil society in Angola

In building support for social protection, experts and donors, including the EU, have noted that increased civil society involvement is an important factor in optimising service delivery, especially in mobilising inter-institutional cooperation, monitoring and knowledge sharing, and enabling more relevant and effective government policies.¹⁴¹ The 'Civil society organisations and local authorities' (CSO-LA) programme provides support to civil society and local authorities across the world. Current strategic objectives (2014-2020) include cross cutting issues such as the rights of the child, social inclusion and the rights of persons with disabilities.¹⁴²

In Angola, among other work, one project focused on increasing the social inclusion of children, young people and women by improving social protection services and stimulating cooperation between the state and civil society.¹⁴³ The project coordinates with other EU actions on strengthening civil society in the country and supports the Angolan Development Plan (2013-2017).¹⁴⁴ This plan reiterates the government's commitment towards strengthening social assistance, recruiting social workers and better protection mechanisms for children.

One lesson from EU experience is that effective and sustainable programmes need sufficient technical assistance, expert advice, and EU funding for ministries and administrations.¹⁴⁵ In this instance, EU funding supports Angolan social assistance policy, through important complementary actions including the improvement of data collection and monitoring, birth registration and capacity building for the Ministry of Social Assistance and local CSOs.¹⁴⁶ Complementary programmes that address child protection measures, ensure child participation in the care transformation process, and build greater local participation, can enable sophisticated, locally relevant and collaborative planning. For example, in 2016, the EU supported UNICEF in its work with the Angolan Ministry of Justice in implementing a strategy to address the low rates of birth registration in the country. Through this project 1.7 million children were registered nationwide and issued birth certificates.¹⁴⁷

This type of budget support can be a key instrument for effective aid delivery and the effective implementation of nationally owned strategies. Budget support can also enable governments to be accountable for their actions and responsive to their citizens, especially through the implementation of civil society budget participation which has been shown to increase national funding for children and child rights.¹⁴⁸

141. EC (2011), Communication from the Commission to the European parliament, the Council, the European Economic and Social Committee and the Committee of the Regions: The Future approach to EU budget support to third countries. <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex%3A52011DC0638> [accessed 3 May 2018].

142. See Multiannual Indicative Programme for the Thematic Programme "Civil Society Organisations and Local Authorities" 2014-2020: https://ec.europa.eu/europeaid/multiannual-indicative-programme-civil-society-organisations-and-local-authorities-2014-2020_en

143. Active citizenship networks: social protection, education and citizens for more efficient cooperation; Duration: February 2013 - March 2016; Implementing organisation; Centro Di Informazione E educazione Allo Sviluppo; Funding instrument: DCI - Non- State Actors and Local Authorities in development: https://ec.europa.eu/europeaid/projects/redes-de-cidadania-activa-proteccao-social-educacao-e-cidadaos-pa-ra-uma-cooperacao-mais_en. 2013 to 2016

144. EU-Republic of Angola, National Indicative Programme 2014 -2020. https://ec.europa.eu/europeaid/sites/devco/files/nip-ango-la-edf11-amended-2016_en.pdf [accessed 2 May 2018].

145. EC (2011), Communication from the Commission to the European parliament, the Council, the European Economic and Social Committee and the Committee of the Regions: The Future approach to EU budget support to third countries. op. cit.

146. ANGOLA - Project to support the Government of Angola to define and implement an effective policy for Social Protection and Social Solidarity CRIS N°: 022-953 Total cost EUR 32 300 000 (EU contribution, EDF A envelope - 15% of the National Indicative Programme) Aid method / Method of implementation Project approach Partially Decentralised Management Joint Management with UNICEF DAC-code 16010 Sector Social/welfare services. https://ec.europa.eu/europeaid/sites/devco/files/aap-social-protection-angola-action-fiche-20130723_en.pdf [accessed 2 May 2018].

147. UNICEF, (2016), UNICEF Annual Report 2016, https://www.unicef.org/about/annualreport/files/Angola_2016_COAR.pdf

148. ECDPM and ActionAid (2013), Whither EC Aid? Briefing note: Budget support Whither EC Aid? Briefing note: Budget support. <http://ecdpm.org/wp-content/uploads/2013/11/2008-weca-budget-support-Aid-EU-EC-Sector.pdf> [accessed 2 May 2018].





4. Targeted geographical actions focused on improving state institutions and promoting care reform in Russia

The nature of child institutions varies enormously across regions, with many countries hosting private and often unregistered institutions to house children with and without disabilities. Other regions have developed systems of state-run institutions – often large-scale buildings – to house orphans and abandoned children as well as children with disabilities. According to 2013 statistics, there were 2,542 ‘orphan institutions’ – mainly state-run – in Russia, housing 88,735 children without parental support, and 150,000 children who were placed there by their parents. These include many children with disabilities – according to Human Rights Watch, nearly 30% of all children with disabilities in Russia live in state orphanages.¹⁴⁹

One example of a targeted care transformation strategy is from Russia, where several active and related EU-funded projects focused on supporting the state reform and transformation of orphanages. A key priority was the strengthening of CSO contributions to this reform, and the promotion of community-based services.¹⁵⁰ After long-term advocacy efforts from several Russian NGOs, a law adopted in 2014 specified that institutions should be temporary placements only. It further stated that all the activities of their staff and administration should be aimed at providing family placement to all children based on their individual needs.¹⁵¹ As a result, a Federal reform process for orphan institutions in Russia was started. The projects build on past EU activities promoting inclusive education and are designed to ensure that the reform process transforms the entire system. Another priority of the projects is to ensure that activities are not derailed to only focus on adapting existing institutions into smaller institutions – an inherent danger of care transformation strategies which do not seek holistic reform or support long term change. To achieve this, the projects aimed to connect institutions, state and local authorities and NGOs; build awareness and understanding of care transformation; and support CSO capacity. Importantly it aims to plan and implement care transformation in at least one region to provide a positive experience for dissemination and replication.

The potential success of this programme of activities lies in its comprehensive approach to the issue and range of actions including tailored needs assessments; capacity building through training for decision-makers, NGOs and institutions; the creation of a pool of experts/consultants for future activities; individual consultation/support; local funding; and the dissemination of best practices tested/developed within the projects.

149. Human Rights Watch (2014), “Abandoned by the State: Violence, Neglect, and Isolation for Children with Disabilities in Russian Orphanages,” <https://www.hrw.org/news/2014/09/15/russia-children-disabilities-face-violence-neglect>

150. Contract:370176; funding stream: CSO-LA, funding: € 750,000; time:2016 – 2019. Previous contract 312611 (2013 -2015

151. Postanovlenije Pravitelstva Rossijskoj Federatsii o dejatelnosti organizatsij dlja detej-siroj i detej, ostavshokhsja bez popetchenija roditelej i ob ustrojstve v nokh detej, ostavshokhsja bez popetchenija roditelej [Activities for organizations for orphans and children left without parental care and living conditions or children left without parental care]. Resolution of the Government of the Russian Federation (May 24, 2014), #481]. Retrieved from <http://www.garant.ru/hotlaw/federal/544284/> in Bobyleva, I (2014), Development of Social and Educational Support in Russian Institutions for Orphans, Worldwide trends in the development of education and academic research, 15 - 18 June 2015, Procedia - Social and Behavioral Sciences 214.

5. Collaboration to improve access to education in Uzbekistan

Poor access to education is a key driver for the institutionalisation of children. A lack of local schools and inclusive education means that sending a child to an institution can be the only option for a family to ensure their child's education.

An example of funding which targets this key driver is EU financial aid for Uzbekistan, which currently amounts to a total of €168 million across various funding streams. This includes EU projects run by UNICEF and support for inclusive education.¹⁵² The projects have provided access to inclusive educational services for 892 children with special educational needs in around 50 pilot schools and kindergartens reaching 1,500 children.¹⁵³ The EDF also supported a €1.95 million contract for Technical Assistance for Inclusive Education for Children with Special Needs in Uzbekistan, which aimed to promote the integration into mainstream schooling for children with special needs aged 2–10.¹⁵⁴ A complementary UNICEF Country Programme Action Plan for 2016–2020 promotes child rights and tackles cross-cutting issues, such as disabilities, care transformation, and HIV and AIDS.¹⁵⁵

The complementary joined-up nature of these activities is a good example of donor collaboration in ensuring an effective and multidisciplinary approach.

152. EuropeAid, Multiannual Indicative Programme for Uzbekistan, 2014–2020: https://eeas.europa.eu/sites/eeas/files/20160506_2_en.pdf. According to this, “In line with DCI goals, EU recent and ongoing bilateral co-operation projects in Uzbekistan have focused on rule of law/criminal justice reform, the improvement of social services, in particular mother and child health and inclusive education, rural development, strengthening of civil society/local actors and support to SMEs”.

153. EEAS (February 2017), The EU contributes to social inclusion of children with special needs in Uzbekistan https://eeas.europa.eu/delegations/uzbekistan/19768/node/19768_pl. According to official data in a UNICEF 2016 report, there are some 24,672 children in residential institutions. A 2014 study on children in institutions, revealed that 14% were orphans, while over half were placed in residential care due to socioeconomic difficulties faced by their families. (number does not include 6,505 children temporarily placed in sanatorium-type boarding schools in 2013). See UNICEF, Country Programme Action Plan 2016 – 2020, Programme of Cooperation between The Government of the Republic of Uzbekistan and the United Nations Children's Fund. http://www.unicef.uz/upload/iblock/3d3/cpap-2016_2020-english-version.pdf

154. See EU DCI, Technical Assistance to the project ‘Inclusive Education for Children with Special Needs in Uzbekistan’ https://ec.europa.eu/europeaid/projects/technical-assistance-project-inclusive-education-children-special-needs-uzbekistan_en

155. UNICEF, UNICEF Annual Report 2013 – Uzbekistan, https://www.unicef.org/about/annualreport/files/Uzbekistan_COAR_2013.pdf; Human Dynamics (03 September 2013), 800 children with special needs enter the system of general education in Uzbekistan, <http://www.humandynamics.org/en/news/inclusive-education-uzbekistan-context-progress> and UNICEF, Country Programme Action Plan 2016 – 2020, Programme of Cooperation between The Government of the Republic of Uzbekistan and the United Nations Children's Fund, op. cit.



**PROJECTS
HAVE
PROVIDED
EDUCATIONAL
SERVICES FOR
892 CHILDREN.**

6. Preventing institutionalisation of children in crisis and humanitarian action

Around the world, over 50 million children have migrated across borders or been forcibly displaced.¹⁵⁶ In emergencies, ensuring family tracing, reunification, and family-based alternatives are more effective than placing children in institutions which can permanently separate them from families.¹⁵⁷ Experiences from past emergencies, including Haiti and Rwanda show that most separated children have extended family, neighbours, or community members that can care for them.¹⁵⁸

The ECHO Protection Guidelines (2016) have recognised the importance of identifying, registering and reunifying children as well proper case-management, Best Interests Assessments and determination.¹⁵⁹ Furthermore, in their response to a request for information from Lumos, DG ECHO stated that: "... it may be concluded that institutionalisation of children should not be supported. As much as possible, children should be allowed to stay with their communities or relatives. Alternative care arrangements, such as fostering, should be considered..."¹⁶⁰

Most of the projects referring broadly to 'deinstitutionalisation' (as recognised by DG ECHO) worked to support foster care arrangements, family tracing, family or kin reunification for displaced children, as well as providing safe spaces within refugee/displaced people's camps. Several are large scale projects which reveal the success of ensuring immediate action to identify families of separated children. For example:

In South Sudan, EU funded work by UNICEF has registered some 15,230 unaccompanied, separated or missing children and of these, 4,814 children have been reunified with their families or placed in 'community based alternative care'.¹⁶¹

IN SOUTH SUDAN

In South Sudan, EU funded work by UNICEF has registered some 15,230 unaccompanied, separated or missing children and of these, **4,814 children have been reunified with their families** or placed in 'community based alternative care'.¹⁶¹



156. EC Statement, European Commission – Statement (19 November 2017), Leave no child behind - Joint Statement on the occasion of Universal Children's Day. http://europa.eu/rapid/press-release_STATEMENT-17-4741_en.htm

157. Save the Children (2010). Misguided Kindness: Making the Right Decisions for Children in Emergencies. Retrieved from: <http://www.bet-tercarenetwork.org/BCN/details.asp?id=24138&themeID=1005&topicID=1031> and Faith to Action initiative (2014), Children, Orphanages, and Families: A summary of research to help guide faith-based action. <http://faithtoaction.org/wp-content/uploads/2014/03/Summary-of-Research4.pdf>

158. Faith to Action initiative (2014), Children, Orphanages, and Families: A summary of research to help guide faith-based action op. cit.

159. DG ECHO: Humanitarian Protection: Improving protection outcomes to reduce risks for people in humanitarian crises, May 2016: http://ec.europa.eu/echo/sites/echo-site/files/policy_guidelines_humanitarian_protection_en.pdf

160. Request entitled "EU funded projects related to the deinstitutionalisation of Children" made on 2 February 2018. op. cit.

161. See ECHO/AF/BUD/2016/91042 in AsktheEU EU funded projects related to the deinstitutionalisation of Children" made on 2 February 2018. op. cit.

In Ethiopia, ECHO worked to identify and register new cases of unaccompanied or separated children, and to identify their needs and provide interim care and train community professionals.¹⁶² In a separate project, 99% of targeted unaccompanied asylum-seeking children (381 children) in two camps were placed in foster or kinship care.¹⁶³

In Ukraine, a project; 'Promoting Cohesion and Social Well-being of Families and Children displaced to Kyiv oblast' was in part designed to "prevent institutionalisation of internally displaced orphans, children deprived of parental care and those at risk of being deprived of parental care through ensuring quality family type care and improving child protection mechanisms."¹⁶⁴

Other EU programmes have strengthened overall child protection structures and provided immediate support for children through the provision of education and care, enabling stronger intervention for children in camps and reducing the chances of being moved to permanent shelters.¹⁶⁵ Traditional family units and community structures are threatened by conflict, increasing the vulnerability of children to exploitation, family breakdown and violence. Examples of projects include:

- ECHO, through its Children of Peace fund, facilitated the strengthening of child protection structures at safe learning spaces in targeted communities in the Democratic Republic of Congo, addressing the needs of internally displaced, returned and host children.¹⁶⁶
- Through the Education in Emergencies programme, (2016 to 2017) €1.8 million has been provided to support children, adolescents and their families (in Guatemala, Honduras and El Salvador) who have been affected by violence to access education, protection, and health care, thus reducing the potential institutionalisation of children.¹⁶⁷

7. Child violence, trafficking and reintegration of children – a project in Senegal and Mali

Evidence from different countries, including Haiti, Nepal and Kenya, shows that orphanages are central to the web of modern slavery and child trafficking.¹⁶⁸ Some institutions exist primarily for broader economic reasons rather than to protect children. Children are sometimes admitted to institutions solely for financial gain and are actively 'recruited' for orphanages, often using false promises of education and food.¹⁶⁹ These 'orphanages' exist to attract the lucrative international flows of volunteers, donations and other funding. This form of exploitation is increasingly being recognised as child exploitation and 'orphanage trafficking'.¹⁷⁰

162. See ECHO/HF/BUD/2015/91035 in EC, AGREEMENTS FOR HUMANITARIAN AID AWARDED IN 2015 BY DG ECHO. http://ec.europa.eu/echo/files/funding/agreements/agreements_2015.pdf

163. See ECHO/HF/BUD/2016/91048 in AsktheEU EU funded projects related to the deinstitutionalisation of Children" made on 2 February 2018. op. cit.

164. Contract 355448, funding stream: ENPI; funding: € 1,971,137; time: 2015 -2018

165. http://ec.europa.eu/echo/field-blogs/videos/burundi-refugees-tanzania-child-protection_en

166. War Child Holland, ((2015), Elimu Kwanza! – a brighter future for the children of DR Congo: Safe education for internally displaced children in the Democratic Republic of Congo. https://www.warchildholland.org/sites/default/files/bijlagen/node_7209/17-2015/childrenofpeacereport2015_warchild.pdf [accessed 20 May 2018].

167. European Civil Protection and Humanitarian Aid Operations (n.d.) Central America and Mexico http://ec.europa.eu/echo/where/latin-america-caribbean/central-america_en

168. Joint Standing Committee on Foreign Affairs, Defence and Trade (2017) Hidden in Plain Sight An inquiry into establishing a Modern Slavery Act in Australia. Parliament of the Commonwealth of Australia http://parlinfo.aph.gov.au/parlInfo/download/committees/reportjnt/024102/toc_pdf/HiddeninPlainSight.pdf;fileType=application%2Fpdf [accessed 2 May 2018]; Lumos (2016) Orphanage Entrepreneurs: The Trafficking of Haiti's Invisible Children and Lumos (2017), The Case for an Australian Modern Slavery Act: Recognising the relationship between trafficking and exploitation of children in orphanages as a form of modern slavery Submission by Lumos Foundation

169. Doore, K.E.V. (2016). Paper orphans: Exploring child trafficking for the purposes of orphanages. The International Journal of Children's Rights. Volume 24, Issue 2.

170. Doore, K.E.V. (2016). op. cit.; Joint Standing Committee on Foreign Affairs, Defence and Trade (2017) op. cit.

The EU has funded various programmes aimed at rescuing children from exploitation, including forced labour, modern slavery, forced migration and trafficking. A project in Senegal and Mali aims to protect 1,500 children who have either been exploited or have been victims of violence.¹⁷¹ Some of these children have fled Koranic Daara schools or the conflict in the north of Mali. They are often traumatised, isolated and vulnerable. The project, managed by the European Union Delegation in Senegal, aims to reintegrate the children with their families if possible, and return the children to formal education, providing economic support for tutors and training in child rights. **It also builds community knowledge and awareness on protection and participation to prevent further exploitation and provide protection for the children.** This range of approaches is aimed to allow children to find homes within families as well as prevent future exploitation, trafficking and forced labour. Similar EU-funded initiatives in the region include funding for 20 community-based reintegration projects for over 3,000 returning migrants in five neighbouring countries.¹⁷²

8. Targeted action to transforming systems of care

In February 2018, the first Development Cooperation Instrument (DCI) funding specifically focused on care transformation was published. It was published to remedy the fact that while ensuring children's transition from institutions to quality alternative care is an important objective within the EU, "very few specific actions have been supported through EU external cooperation and this has delayed the development of a body of knowledge and experience to act in this area."¹⁷³ The call for proposals is within the DCI thematic programme- 'Global public goods and challenges' - and focuses on 'Quality alternative care for children and de-institutionalisation' with a total EU budget contribution of €13 million.

Based on implementing the EU's 2017 Guidelines for the promotion and protection of the rights of the child, grants should support initiatives which (i) prevent family and child separation, (ii) take children out of institutions, (iii) and provide appropriate and quality alternative care for those deprived of parental care, especially the most vulnerable.¹⁷⁴ The call also focuses on supporting the reform of national care systems and implementation of child protection legislation.¹⁷⁵

By launching this call, the EU recognises the need for targeted prioritisation of transforming systems of care within ODA funding and the contribution such work can have in enhancing child protection mechanisms and child rights.

171. Exploited Children in Senegal and Mali to help Prevent Future Crises in the Region'. This project runs from 01/03/2015 - 28/02/2018 with EU funds of €750,000 and is managed by the European Union Delegation in Senegal.

172. IOM (28 March 2017). IOM Launches Reintegration Projects for West African Migrants with EU Trust Fund Support. www.iom.int/news/iom-launches-reintegration-projects-west-african-migrants-eu-trust-fund-support

173. EU DEVCO (2017), ANNEX 2 of the Commission Implementing Decision on the annual action programme 2017 part 2 for the theme Human Development of the Global Public Goods and Challenges programme. Action document for quality alternative care for children and de-institutionalisation CRIS number: DCI-HUM/2017/39697

https://ec.europa.eu/europeaid/sites/devco/files/commission-implementing-decision_c_2017_5817_-_annexe_2_en.pdf

174. EU (2017), Guidelines on the Promotion and Protection of the Rights of the Child. op. cit.

175. Several focused on strengthening local and national child protection systems, as well as those under the Rights, Equality and Citizenship Programme. This action will not cover children migrating with their families or unaccompanied (unless in the state alternative care system).



EU FUNDED
PROJECTS WHICH
COULD HAVE
BENEFITED FROM
A STRONGER
FOCUS ON
TRANSFORMING
SYSTEMS OF CARE

As highlighted in the previous section, the EU's external funding for children has played an important role in preventing family separation and creating an environment to support the transformation of care systems away from institutions towards strengthening families and communities.

However, analysis highlights areas where the EU could better mainstream its commitment to care transformation, ensuring that actions are better coordinated and routed in a long-term vision for the country. For example, in some instances, projects support children in institutions without a clear long-term care transformation strategy. Without a clear commitment to care transformation, support to institutions can contribute to their longevity and funding misses an opportunity to build into a wider vision towards reform that could secure child rights, protection and well-being.

The following case studies provide examples of projects which could have benefitted from an increased and coordinated focus on transforming the system of care.

1. Challenges of implementing a national plan in Kyrgyzstan

To successfully transform a care system away from institutions and towards family and community-based care, a care transformation plan needs a wide-reaching commitment that focuses on building effective child protection systems, reforming legislation, improving access to services while also addressing the drivers of institutionalisation. This ensures sustainable reforms, prevents future institutionalisation, and avoids a narrow focus on simply adapting or rebuilding existing institutions, which can replicate institutional practices within the community.¹⁷⁶

The EU is currently funding a project aimed at improving the social protection system and access to community social services, which also includes the improvement of conditions in child residential institutions. According to project details, the targets included having at least one residential institution built and renovated in years two and three of the project.¹⁷⁷ At the same time, the project sought to reduce the number of children in long-term traditional residential institutions year-on-year including the proportion of children (including with disabilities) in care benefitting from alternative care and an "increase in placements of children left without parental care in family forms of care". The target reduction was 3% per year out of 4,150 children in 2013.¹⁷⁸ The potential conflict between the building and renovation of institutions at the same time as encouraging community services should be carefully balanced to ensure that additional financing does not lengthen the life of the institution but instead is focused at ensuring children are safe and supported during the transition process.

Restrictions on placing children in institutions in Kyrgyzstan have been strengthened, and alternatives such as foster care and family-style residential care homes have been promoted. UNICEF has sought to strengthen gate-keeping mechanisms and successfully advocated for the closure of one large institution where children with disabilities were living in unsafe conditions.¹⁷⁹ However, institutions are still one of the first responses to children in need of protection.¹⁸⁰ Media reports state that the number of institutionalised children is increasing with Kyrgyzstan's worsening poverty and rising labour migration.¹⁸¹

176. European Expert Group on the Transition from Institutional to Community-based Care (2012) "Common European guidelines on the transition from institutional to community-based care."; World Health Organization and the Gulbenkian Global Mental Health Platform. Innovation in deinstitutionalization: a WHO expert survey. Geneva, World Health Organization, 2014. See also The Ten Elements of DI, <https://www.wearelumos.org/knowledge-portal/10-elements-di/>

177. See Contract: 368555; funding stream: ACA; funding: € 26,000,000; time: 01/01/2016- 31/12/2019 in DEVCO file in AsktheEU EU funded projects related to the deinstitutionalisation of Children" made on 2 February 2018. op. cit.

178. See Contract: 368555; funding stream: ACA; funding: € 26,000,000; time: 01/01/2016- 31/12/2019 in DEVCO file in AsktheEU EU funded projects related to the deinstitutionalisation of Children" made on 2 February 2018. op. cit.

179. UNICEF Annual Report 2013 – Kyrgyzstan. https://www.unicef.org/about/annualreport/files/Kyrgyzstan_COAR_2013.pdf

180. Committee on the Rights of the Child examines report of Kyrgyzstan (2014): <http://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=14651&LangID=E> [accessed 23 May 2018].

181. Al Jazeera, (24 February 2018), Children abandoned as Kyrgyz parents seek work abroad <https://www.aljazeera.com/indepth/features/children-abandoned-kyrgyz-parents-seek-work-180223215148162.html>.

The government's care transformation strategy is based on the "Optimisation Plan on the Management and Financing of Residential Care Institutions for 2013–2016" (OP) and is part of ongoing EU budget support to Kyrgyzstan, developed with support from the European Delegation and UNICEF in Bishkek.¹⁸² The objectives of the OP are to provide all children with their right to live in a family environment, in accordance with the CRC and to increase the effectiveness of budget spending by transferring financial and human resources of the boarding institution to the development of social services on the local level. However, challenges in implementing the reform successfully include a lack of national standards or framework for the use of alternative care, gaps in existing standards for services, insufficient funding for alternative care by official bodies, and weak central planning for financing and managing social protection and welfare services that could prevent the separation of children from their families.¹⁸³

One study of the reform process noted that in practice, actions focus primarily on adapting specific institutions into smaller services and transferring children to other care, without addressing the wider need for prevention and family support and with a reported lack of focus on implementing a comprehensive child protection system.¹⁸⁴ Overall, there is a lack of clarity and leadership by the government on the reform measures and the kinds of services needed to ensure that residential care is only used as a last resort.¹⁸⁵ The Kyrgyzstan government has been criticised for not delivering social assistance to low-income families but instead providing financial resources to institutions, primarily in building maintenance, staff salaries and utilities instead of shifting funding from institutions to create a holistic system of family and family-like childcare.¹⁸⁶

These challenges should be overcome for the vision of the care transformation plan and social protection and child care system to be successful and ensure EU funds are not misdirected but rather enhance the **protection of children's rights for each individual child. Support from the highest levels of government – including investment in social care and training for those placing children in care – needs to take place alongside a commitment to transforming the whole system.**¹⁸⁷

2. EU funding of immigration facilities in the European Neighbourhood

The impact of detention on children can be devastating, inflicting life-long damage on cognitive and emotional development.¹⁸⁸ The European Court of Human Rights (ECtHR) has found asylum or immigration detention of children to be in breach of Article 3 of the ECHR,¹⁸⁹ noting that detention may lead to such levels of anxiety and stress that amount to torture.¹⁹⁰ While international law does not pose a total ban on the detention of children, the CRC Committee has stated that unaccompanied children 'should not, as a rule, be detained.'¹⁹¹ Since 2013, the Committee has been calling on State Parties to cease the detention not only of unaccompanied children but also of children in a broader immigration context.¹⁹²

182. Ministry of Education & Ministry of Social Development (2012). Optimization plan Uch-Korgon orphanage for orphans and children left without parental care for 2015-2018. Bishkek, p. 99 as referenced in Nordin, Anna-Lena (2015) Towards a Brighter Future for Institutionalised Children? A Case Study of De-Institutionalisation of Childcare in Kyrgyzstan, Lund University Master of Science in International Development and Management. Page 16 <http://lup.lub.lu.se/luur/download?func=downloadFile&recordId=5422188&fileId=5422189>

183. Maestral, Executive summary & recommendations. Appraisal of the governance of the child care and social protection system in Kyrgyzstan.

184. Nordin, Anna-Lena (2015) Towards a Brighter Future for Institutionalised Children? A Case Study of De-Institutionalisation of Childcare in Kyrgyzstan, op. cit.

185. Maestral, Executive summary & recommendations

Appraisal of the governance of the child care and social protection system in Kyrgyzstan. op. cit.

186. Eurasianet (22 January 2013), Kyrgyzstan: Labor Migrants Leave Behind "Social Orphans". op. cit.

187. See for example comments from the EU on transforming institutions in Bulgaria: ESPN – Flash report, (2015) Challenges facing deinstitutionalisation of children in Bulgaria. https://www.eurochild.org/fileadmin/public/05_Library/Thematic_priorities/06_Children_in_Alternative_Care/European_Union/ESPN_-_Flash_Reports_-_BG_-_July_2015.pdf [accessed 3 May 2018].

188. Coffey, G.J., et al. "The Meaning and Mental Health Consequences of Long-Term Immigration Detention for People Seeking Asylum." *Social Science and Medicine*. 70(2010): 2070-2079.

189. European Convention of Human Rights. http://www.echr.coe.int/Documents/Convention_ENG.pdf

190. European Database of Asylum law (EDAW), (8 March 2017), The detention of asylum seeking children in Hungary: Dire tendencies in upholding the basic rights of children <http://www.asylumlawdatabase.eu/en/journal/detention-asylum-seeking-children-hungary-dire-tendencies-upholding-basic-rights-children>

191. Committee on the Rights of the Child, GENERAL COMMENT NO. 6 (2005), Treatment of unaccompanied and separated children outside their country of origin. <http://www2.ohchr.org/english/bodies/crc/docs/GC6.pdf>

192. European database of Asylum law (EDAL), (08 March 2017), The detention of asylum seeking children in Hungary: Dire tendencies in upholding the basic rights of children <http://www.asylumlawdatabase.eu/en/journal/>

The EU has built up a series of procedural safeguards for ensuring detention is properly monitored, for as short a time as possible and that all possible safeguards are in place - both general and child-specific.¹⁹³ This includes ensuring the provision of child-friendly spaces and provision of education (ideally outside of detention facilities).¹⁹⁴

In 2008, the Ukrainian parliament ratified the Readmission Agreement between Ukraine and the EU which provides facilitation in transporting illegal migrants to their home countries. The EU also allocated €30 million under its ENPI 2007 National Programme for Ukraine for improving infrastructure and procedures related to the accommodation and treatment of irregular migrants. This included building and renovation of migrant detention centres, temporary housing facilities, and the internment of undocumented migrants.¹⁹⁵ In 2008, a new detention centre for 165 adults and 42 children was constructed with funding from the EU Capacity Building for Migration project (CBMM) to hold detainees prior to deportation.¹⁹⁶

Recent agreements have seen further funding for border control, security and migration projects.¹⁹⁷ Unaccompanied minors (UAM), including asylum seekers, are reportedly routinely kept in detention centres with adults ("migrant accommodation centres;"). This is despite legal provisions against prolonged detention and the need for child appropriate accommodation in appropriate care institution or family.¹⁹⁸ The project aimed to create five additional Migrant Custody Centres, enhancing the capacity of the Government to manage migration flows; control the irregular movement of migrants; and support its efforts to comply with and ensure European Union best practices and humanitarian standards.¹⁹⁹ Activities included upgrading of conditions in one migrant accommodation centre, "according to EU technical standards and international best practices for migrant accommodation"; equipping two migrant accommodation centres and the refurbishment and full equipping of five temporary holding facilities.²⁰⁰

Criticism has been raised about the amount of funding invested in building and equipping new detention facilities of various types for refugees, asylum seekers, and migrants in Ukraine. This includes the construction or refurbishment of new centres where undocumented migrants can be detained for up to 12 months, as well as new "Temporary Holding Facilities" run by the State Border Guard Service of Ukraine where irregular migrants can be detained for up to 10 days.²⁰¹ Similar actions – for example in Belarus – have also funded the construction and/or renovation of migrant accommodation centres.²⁰²

detention-asylum-seeking-children-hungary-dire-tendencies-upholding-basic-rights-children

193. European Union Agency for Fundamental Rights, European legal and policy framework on immigration detention of children, FRA Opinions. <http://fra.europa.eu/en/publication/2017/child-migrant-detention/fra-opinions>

194. FRA Opinion No. 7, European Union Agency for Fundamental Rights, European legal and policy framework on immigration detention of children. op. cit.

195. European Cooperation News, (11 June 2008), No.8, http://www.eeas.europa.eu/archives/delegations/ukraine/documents/eucooperation-news/08_eucooperationnews_en.pdf. Previously (2000 – 2006), Ukraine received €35 million from EU funds supporting former Soviet states, primarily to improve security along its borders.

196. The EU, Migration and the Politics of Administrative Detention, Michela Ceccorulli, P223, and <https://www.globaldetentionproject.org/countries/europe/ukraine>. According to Jesuit Refugee Service (JRS), current EU funding only provides for construction without support for on-going operation, and as a result the country will remain heavily dependent on external funding to provide essential services to detainees. A Zhuravichi official told JRS in 2011 that the facility could "hold up to 150 people, but because we can only afford to feed 40 people, we can never reach full capacity": No Other Option: testimonies from asylum seekers living in Ukraine. http://www.jrseurope.org/publications/JRS%20Europe_Asylum%20Seekers%20in%20Ukraine_June2011.pdf

197. EG 27 million for a project to "enhance migration management capacities in Ukraine". 2016- 2019 (IOM): https://eeas.europa.eu/delegations/ukraine/27691/node/27691_mt

198. See for example: HRW (2010), *Buffeted in the Borderland: The Treatment of Asylum Seekers and Migrants in Ukraine*. <https://www.hrw.org/report/2010/12/16/buffeted-in-the-borderland/treatment-asylum-seekers-and-migrants-ukraine>

199. European Cooperation News, (11 June 2008), No.8, op. cit. Other funding includes grants for IOM and support the State Border Guard Service (SBGS). See also UA-Kiev: ENPI — establishment of custody centres and temporary holding facilities for irregular migrants in Ukraine 2010/S 250-381922. Europa. 24 December 2010 and "Readmission agreements with Eastern European countries" 2011, in <https://www.globaldetentionproject.org/countries/europe/ukraine> and [http://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:52007DC0247R\(01\)](http://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:52007DC0247R(01))

200. Capacity Building of Migration Management: Ukraine (CBMM), Project Information; Capacity Building of Migration Management (CBMM): Ukraine; CBMM Phase I: TACIS/2004/096-462; CBMM Phase II: TACIS/2006/124-449 at http://bordermonitoring-ukraine.eu/files/2012/01/CBMM_Part-I_3pager_en.doc

201. Border Monitoring Project (BMPU), (20 November 2014), *The Forgotten? International refugees in Ukraine live life on a breadline*. <http://bordermonitoring-ukraine.eu/2014/11/20/%EF%BB%BF%EF%BB%BFthe-forgotten-international-refugees-in-ukraine-live-life-on-a-breadline/>

202. ANNEX II of the Commission Implementing Decision on the Annual Action Programme 2016 in favour of the Republic of Belarus Action Document for Helping Belarus Address the Phenomenon of Increasing Numbers of Irregular Migrants. CRIS number: ENI/2016/038-812 financed under the European Neighbourhood Instrument

This funding contrasts with an EU overview of funding available for migration related actions which specifies that if using ESIF funding, "In line with the principles of non-segregation and de-institutionalisation, investments should not be used for detention centres or to create segregated neighbourhoods."²⁰³ References to the non-institutionalisation of children are not contained in any of the summary funding instruments available.²⁰⁴ In 2010, Human Rights Watch also criticized the EU for spending its funding on constructing migrant detention facilities and securing borders, while failing to ensure protection for asylum seekers and members of vulnerable groups.²⁰⁵

According to several reports, conditions for unaccompanied and separated children remain inadequate.²⁰⁶ Under Ukrainian Law, unaccompanied and separated children are supposed to be accommodated in children's institutions or in foster families. However, there is a lack of foster care, specialised procedures, trained personnel or support for children. Children's shelters are semi-closed institutions, usually designed for younger local children. Asylum-seeker children in these shelters have complained of unreasonable restrictions on their freedom of movement, social isolation, and lack of educational opportunities. Some have run away from these institutions. Despite UN guidelines²⁰⁷ which state that children in detention have the right to education, ideally located outside of the detention facility, reports suggest that there is only eight hours of instruction per week available for children in migrant custody centres.²⁰⁸ As of 2013, no unaccompanied or separated children had yet been placed in foster care arrangements in Ukraine.

Unaccompanied and separated migrant and asylum-seeking children should be placed in foster care, supervised independent living, or other family or community-based arrangements.²⁰⁹ Instead of focusing and investing in the construction of new institutions and facilities, funding should be spent on ensuring all refugee and migrant children have welcoming places to settle, including foster care for unaccompanied children.²¹⁰

The EU Guidelines for the Promotion and Protection of the Rights of the Child (2017): Leave No Child Behind, calls for improved internal and external coherence in the EU's external action on children.²¹¹ **This consistency between internal and external aspects of human rights protection and promotion is crucial to ensuring that the principles it applies inside Europe are also protected and promoted overseas.**²¹² **The research has shown that some of the clearest contradictions between internal EU policy and commitments to transforming systems of care and its external actions occur in activities relating to migration, especially where linked to refugee and migrant flows into the European region.**

203. ESI funds can invest in a broad range of measures, including social, health, education, housing, childcare, etc., to address the specific needs of migrant children. In line with the principles of non-segregation and de-institutionalisation, investments should not be used for detention centres or to create segregated neighbourhoods and schools. Support, financial or other, can be given to non-governmental organisations representing unaccompanied migrant children and to encourage local authorities to work in partnership with them: COMMISSION STAFF WORKING DOCUMENT Implementation of the Action Plan on UAMs (2010-2014) Accompanying the COMMUNICATION FROM THE COMMISSION TO THE COUNCIL AND THE EUROPEAN PARLIAMENT The protection of children in migration. SWD/2017/0129 final; <https://eur-lex.europa.eu/legal-content/EN/ALL/?uri=CELEX%3A52017SC0129>

204. 10th European Forum on the rights of the child 29-30 November 2016, the protection of children in migration 24 November 2016 Updated on 18 April 2017 at: http://ec.europa.eu/newsroom/document.cfm?doc_id=19748

205. HRW (2010), *Buffeted in the Borderland: The Treatment of Asylum Seekers and Migrants in Ukraine*. op. cit.

206. Global Detention project, <https://www.globaldetentionproject.org/countries/europe/ukraine>. UNHCR (2016), UNHCR UKRAINE THEMATIC FACTSHEET REFUGEES AND ASYLUM SEEKERS JUNE 2016. https://www.ecoi.net/en/file/local/1227106/1930_1467099265_refugees-and-asylum-seekers-factsheet-june-2016-final.pdf

207. Office of the UN high Commissioner for Refugees (1997), *Guidelines on Policies and Procedures in dealing with Unaccompanied Children Seeking Asylum*. <http://www.unhcr.org/uk/publications/legal/3d4f91cf4/guidelines-policies-procedures-dealing-unaccompanied-children-seeking-asylum.html>

208. UN High Commissioner for Refugees (UNHCR), *Ukraine as a country of asylum. Observations on the situation of asylum-seekers and refugees in Ukraine*, July 2013, available at: <http://www.refworld.org/docid/51ee97344.html>

209. UNICEF's Agenda for Action for Refugee and Migrant Children. <https://www.unicef.org/eca/what-we-do/emergencies/unicef%E2%80%99s-agenda-action-refugee-and-migrant-children>

210. Council of Europe: Committee of Ministers (March 2017), *Thematic Report on migrant and refugee children* Prepared by the Special Representative of the Secretary General on migration and refugees. <http://www.refworld.org/docid/58d527154.html> and Grigonis, S., 2016. EU in the face of migrant crisis: Reasons for ineffective human rights protection. *International Comparative Jurisprudence*, 2(2), pp.93-98.. <https://www.sciencedirect.com/science/article/pii/S2351667416300439>

211. EU Guidelines on the Promotion and Protection of the Rights of the Child, op. cit. page 4 and "Revision of the EU Guidelines for the Promotion and Protection of the Rights of the Child (2017) – Leave No Child Behind", adopted by the Council 6 March 2017. <http://data.consilium.europa.eu/doc/document/ST-6846-2017-INIT/en/pdf> [accessed 3 May 2018].

212. Council conclusions on the Commission 2013 report on the application of the EU Charter of Fundamental Rights and the consistency between internal and external aspects of human rights' protection and promotion in the European Union – Adoption' 10116/14 [2014] Annex. As stated in Frame, *Human rights priorities in the European Union's external and internal policies: an assessment of consistency with a special focus on vulnerable groups*, 2015, <https://dspace.eiuc.org/bitstream/handle/20.500.11825/79/24-Deliverable-12.2.pdf?sequence=1&isAllowed=y> page 129)

CONCLUSIONS

Several conditions are needed for successful and sustainable care transformation. These include: sustained political will embedded in legislative and policy frameworks for the transition towards family and community-based care; local evidence and expertise to inform policy and practice for service development; a capable national social workforce and a civil society to support and monitor implementation; and sufficient funding to support the transition process and ensure long-term sustainability.²¹³ The EU is in a unique position to champion the fulfilment of these conditions.

This research demonstrates that the EU is providing support to countries in the process of implementing child protection reform which includes a focus on family and community-based care and is also overall cognisant of the need to support the family in its response to emergencies. However, there are two key barriers which have been hindering progress towards greater care transformation of children in ODA recipient states.

First, many funded projects working on related issues do not take into consideration the need to ensure a commitment to, and vision for, the overall transformation of the care system. This risk missing an opportunity to coordinate actions and ensure approaches are complementary.

Second, the EU has not prioritised or explicitly specified its objectives on children in institutions in its external funding. This has led to:

- Only a limited number of projects which specifically focus on ensuring that children in institutions benefit from ODA
- Instances where institutions appear to be directly funded
- The absence of transparent data on what is being funded, where, and what it has achieved

Findings have revealed that the majority of relevant EU-funded projects conform to international and EU guidelines on child protection, the principles of inclusive development and the right of children to live in a family. There are many examples of projects addressing the main drivers of institutionalisation – including access to inclusive and safe education alongside access to health, social support and anti-poverty measures, but most do not have a clear component or strategy on care transformation. This means that children in institutions risk being excluded, and that adequate steps are not taken to explicitly to prevent institutionalisation.

The EU has the opportunity to create positive and sustainable improvements in the well-being of children, not just in Europe but globally, while fulfilling its commitments under Agenda 2030. This would also place the EU at the forefront of transforming care for vulnerable communities away from institutionalisation and towards community services outside the EU.

The EC has accepted that institutions are harmful to children and has reflected this in its funding and policy priorities for children inside the EU. The new draft Regulation for the NDICI brings the opportunity for directing targeted funding towards transforming systems of care in the EU's external ODA and address the above-mentioned barriers, so that children's right to a family is enshrined in all relevant actions and that no child is left behind.

213. European Expert Group on the Transition from Institutional to Community-based Care (2012) op. cit.

RECOMMENDATIONS

It is recommended that the EU ensures that:

1. EU funding is directed away from institutions and funding is increased to programmes supporting the transition from institutional to family and community-based systems of care for children

- In accordance with the 2017 EU Guidelines for the Promotion and Protection of the Rights of the Child, which noted the need for improved coherence between the EU's external and internal action on children²¹⁴ including inter-institutional cooperation,²¹⁵ it is recommended that the EU ensures:
- No policy or action in any sector undermines the rights of the child and the its commitment to transforming systems of care²¹⁶
- The text relating to promoting the transition from institutional to community-based care for children as a priority for investment under both the geographic and thematic programmes is maintained in the final text of the Regulation on the NDICI
- The Regulation governing the new Instrument for Pre-accession Assistance III (IPA III) 2021-2027 also includes the transition from institutional to family and community-based care as a priority for investment
- All future EU external assistance initiatives and funding instruments, including those directed at migration and crises, prioritise actions linked to the transition from institutions to family and community-based care. It is essential to ensure harmony across different programmes to ensure that projects and complementary and work towards the same vision.
- Support is provided to ensure that projects funded link into a long-term vision and strategy of sustainable care transformation. This could take the form of technical support to countries to develop transforming care strategies and action plans.
- Given the large number of EU and other donor-funded interventions in different but related areas – such as education, health, economic development as well as social protection – the EU takes the lead in ensuring greater coherence between projects and donors to avoid a fragmented approach to care transformation²¹⁷
- Effective monitoring is implemented in order to evaluate progress of how EU funds are spent. Transparency of funding data is essential to ensure that any investment directed to children is in line with international and EU human rights legislation to enhance child protection and welfare.

214. EU Guidelines on the Promotion and Protection of the Rights of the Child, op. cit.

215. "Revision of the EU Guidelines for the Promotion and Protection of the Rights of the Child (2017) – Leave No Child Behind", adopted by the Council 6 March 2017. op. cit.

216. EU Guidelines on the Promotion and Protection of the Rights of the Child, op. cit.

217. ODI (2008) <https://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/2338.pdf> and OECD (2003), DAC Guidelines and Reference Series: Harmonising Donor Practices for Effective Aid Delivery and OECD, DAC Criteria for Evaluating Development Assistance. <https://www.oecd.org/dac/effectiveness/20896122.pdf>. <http://www.oecd.org/dac/evaluation/daccriteriaforevaluatingdevelopmentassistance.htm>

2. Data collection and disaggregation is improved to ensure that all children are counted at national, regional, and global levels

At present, there is a lack of data on children in institutions and a lack of information about what actions the EU is funding on transforming systems of care and their impact. It is recommended that the EU support the improvement and expansion of data collection methodologies, including routine data collection, to ensure all children are included, as well as continuing to undertake new research. This includes:

- Supporting the work of national governments in routinely collecting disaggregated data on children outside families, including children in institutions. Ensure the provision of consistent definitions and data collection protocols.
- In its programmes with refugees and migrants, the EU prioritise its commitment to ensure that children are registered and counted.
- Ensure that programmes towards care transformation for children are clearly monitored and categorised, which will support better coherence between programmes.
- Ensure that there is a systematic approach to gathering and recording desegregated data on care transformation and the relevant actions funded by the EU and its partner donors to develop an effective analysis of impact of such actions and potential challenges.
- Ensure that the EU aligns its evaluations to ensure that objectives and indicators for the transition from institutional to community-based care can be evaluated alongside other data charting progress towards the SDGs.

3. Experience and expertise in transforming care is shared

The EU possesses a wealth of experience, expertise and insight on care transformation. It is recommended that the EU disseminate evidence and learning from practice, highlighting good, emerging and poor practice, for others to learn from and build on.

Through the key role that the EU has played in transforming care systems for children in Europe, unique and valuable lessons have been learned that can inform and be adapted to external funding. To support this process, the EU could develop a toolkit offering guidance to partner countries on how to plan for and deliver sustainable quality care reform for children. In addition, the EU can promote the dissemination of expert advice and studies, peer-to-peer knowledge transfers of government teams responsible for reform between countries, and information sharing and training of all relevant staff, working in EU external action, to ensure that lessons learned from care transformation in the EU is built into practice outside the EU.

Civil society at both EU level and in partner countries should be heavily involved in this process. The EU could consider the establishment of an expert coalition – similar to the European Expert Group on the Transition from Institutional to Community-based Care (EEG) to provide support on how EU external policy, legislation and funding could best support care reform. In addition, the EU could support capacity building of civil society organisations in partner countries so that they can effectively participate in all stages of a quality care reform.

4. Children, families, communities and civil society are enabled to actively participate in all stages of the programming process

Mechanisms are strengthened to ensure the full and equal participation of civil society and experts – local, national and international - in the prioritisation, development, implementation and evaluation of EU external action programmes, including any projects awarded through contracts to ensure continued learning and improvement. This commitment should be included in the Regulations governing all EU external instruments, in particular the NDICI and IPA III.

The inclusion of children's voices is essential. While the European Commission has already recognised the need for children to be included in designing and evaluating programmes.²¹⁸ It is recommended that the EU, in line with the CRC, implement more robust guidance to ensure children and child-advocates can fully participate in decisions taken about their own lives.

5. The EU leverages its influence in promoting and addressing care transformation for children globally

As part of its global leadership role in promoting children's rights, it is recommended that the EU utilise its leverage with national governments, regional and international bodies and other ODA donors (both bilateral and multilateral) to prioritise transforming systems of care for children globally. This is in line with the EU Action Plan on Human Rights and Democracy (2015–2019), which commits the EU to strengthening cooperation with regional Human Rights and Democracy mechanisms.²¹⁹ It is also recommended that the EU ensures that:

- Care transformation plans are encouraged and supported in ODA recipient states. Formal political dialogue and long-term, coordinated and complementary technical support from a range of donors is vital to ensure consistency in the implementation of reform.

SPECIFIC RECOMMENDATIONS TO THE EUROPEAN COMMISSION AND EEAS

In addition to the general recommendations and the fulfilment of the recent EU commitment to prioritise support for quality care for children and promote the transition from institutional to community-based care in the EU's partner countries, in line with children's best interests, the following recommendations are directed towards the three key EU Directorates and the EEAS.

²¹⁸ The Council of Europe Recommendation on 'Participation of children and young people under the age of 18' states that 'participation is mainstreamed in decision- and policy-making structures' and EuroChild (2014), Mainstreaming Children's Rights in EU legislation, Policy and practice: Lessons from Practice, Discussion Paper. http://www.eurochild.org/fileadmin/public/02_Events/2014/Mainstreaming_Childrens_Rights_Discussion-paper_Feb2014.pdf

²¹⁹ Council of the European Union (July 2015), Council Conclusions on the Action Plan on Human Rights and Democracy 2015 – 2019, <http://data.consilium.europa.eu/doc/document/ST-10897-2015-INIT/en/pdf>.

DG DEVCO

It is recommended that DG DEVCO:

- ensure that its recent commitment results in increased funding of projects and budget support transforming systems of care.
- coordinates its work with other donors and partners in-country to ensure that the transition to family and community-based care is prioritised and not harmed by conflicting project objectives. All projects working with children include an explicit reference to care transformation to ensure better harmonisation across funding streams and thematic objectives. This should be monitored, evaluated and shared.

Progress on care transformation has been most substantial where there has been significant local ownership and harmonisation of funded actions into overall national development strategies. It is recommended that the EU continue to invest in long-term projects relating to child protection, with a range of complementary activities and encourage and support national governments in developing and implementing care transformation action plans. This includes:

- Aligning EU funding streams into an overall care transformation strategy
- Technical support at a country level
- Technical support and training to relevant EU staff
- Bringing together relevant EU staff, country experts and civil society to formulate and effectively monitor a sustainable and locally relevant plan, ensuring all stakeholders are committed to the process.

To help develop a body of knowledge and experience for DG DEVCO to act more effectively in the area of care transformation, as well as to offer more examples that can be subsequently used as inspiration for others. Select demonstration countries to receive guidance and technical support on how to use EU funding for their care reforms; – document and share findings to inform other countries in the region in similar stages of reform.

DG ECHO

It is recommended that DG ECHO, in all its work in emergencies and humanitarian assistance, continue to ensure that its first response includes a priority for the adequate protection of children, including taking immediate steps to identify and register unaccompanied migrant and separated children and trace and reunify families. In doing so, DG ECHO continue to conform to the highest standards of child protection guidelines including ensuring safe spaces for children and the non-utilisation or development of institutions.

DG ECHO should ensure that the policy outlining that institutions are the 'last resort' and only temporary, is implemented effectively, to prevent harm to children. It should continue to fund demonstration programmes and support the development of innovative practices of family-based care in emergency contexts. It is essential that high-quality evidence is generated of family-strengthening and alternative care in a range of cultures and contexts, especially in emergencies, following natural disasters, or in cases of mass migration.

In addition, DG ECHO ensure that its work is effectively integrated within national efforts at transforming the system of care; ensure that other donors are not responding to emergencies by supporting the establishment or enlargement of institutions and encourage the wider take-up of a family and community-based approach to the care and protection of children by donors and partners, including governments.

DG NEAR

It is recommended that DG NEAR ensure that increased funding for work on transforming systems of care within the European region and neighbouring states is prioritised and in particular that all projects related to children include an explicit commitment to care transformation and the transition towards family and community-based care for children. In addition, DG NEAR work with all governments in the region to ensure that this commitment is reflected in national priorities and plans.

Effective transparency of funding data is also essential to ensure that any investment directed to children is in line with the international and EU human rights legislation to enhance child protection and welfare.

European External Action Service (EEAS)

It is recommended that the EEAS champion the reform of child protection and care systems as a human rights priority and ensure that all relevant EU external policy initiatives and instruments prioritise children in institutions, children in alternative care, and children at risk of being separated from their families. In addition, the EEAS include an action line on the transition to family and community-based care in relevant initiatives and instruments and raise awareness among staff of the strong links between institutionalisation and violence against children and child trafficking.

ANNEX 1: METHODOLOGY

This research report has drawn from extensive desk research undertaken between November 2017 and May 2018. While the focus has been on the current programming period 2014-2020, the research has also drawn on material and projects funded prior to 2013 in order to provide a more comprehensive overview and further insight into EU funding of activities related to children in institutions.

1. A systematic literature review was carried out to identify all available reports, evaluations, grant details, contracts and other material on EU ODA funding related to children in institutions, as well as funding for activities related to addressing the drivers of institutionalisation – including poverty, family support and education, which included work on child protection. The most relevant literature was also obtained on EU ODA activities in emergencies, conflict and migration as well as its projects relating to child rights. This literature review included EU, UN Agency and Civil Society Organisations (CSO) reports on EU child-related funding as well as reports from other donors (including the UK and US Governments), consultant (evaluations and budgets) and media reports.

2. Searches were made on EU websites, including International Development and Cooperation (DCI)²²⁰ European Instrument for Democracy and Human Rights (EIDHR),²²¹ Instrument contributing to Stability and Peace (IcSP).²²² Funding streams and instruments analysed include: Instrument for Pre-accession Assistance (IPA), European Neighbourhood (policy) Instrument (ENI/ENPI), Development Cooperation Instrument (DCI), Partnership Instrument, Instrument contributing to Stability and Peace (IcSP), European Instrument for Democracy & Human Rights (EIDHR), European Development Fund (EDF), Civil society organisations and local authorities (CSO-LA), Common Security and Defence Policy (CSDP), Global Public Goods and Challenges (GPGC), as well as various geographical funds and Trust Funds.

A variety of relevant search terms were used to cover the wide range of thematic aspects of care transformation. These included: 'deinstitutionalisation', 'deinstitutionalization', 'institutionalisation', 'orphanages', 'orphans', 'OVC', 'child protection', 'social protection', 'inclusive education', 'inclusive', 'community schools' etc.

3. A written request for 'details of all projects specifically working on the deinstitutionalisation (deinstitutionalization) of children from 2013' onwards was made through the website AsktheEU.org²²³ on 2 February 2018.²²⁴ Information was received from the DG DEVCO, DG ECHO and DG NEAR.²²⁵ A further request for information on funding figures was sent on 6 June 2018 with responses from DG DEVCO, DG ECHO and DG NEAR.²²⁶ Information from similar past requests to the AsktheEU.org website was also utilised, including a request for data on projects between 2008 – 2013.²²⁷

4. A number of projects contained activities relating to children in institutions but details were not sufficiently clear to assess results and application. Therefore, 20 follow-up requests for further information about specific projects, project activities and results, were sent during February and March 2018. This included requests to EU Delegations in a number of African, Asian and European countries as well as to NGO Project partners. Approximately one third responded with further details.

Information was also sought directly with EU staff working in this field and an exchange of information was held between February – May 2018 which resulted in further details of grants being made available.

220. See: https://ec.europa.eu/europeaid/projects-results_en

221. (past, current and future calls for proposals). <https://ec.europa.eu/europeaid/node/103464>

222. See: <https://icspm.eu/>

223. AsktheEU.org is website developed by civil society organisation to streamline public requests for information from EU bodies. For more information see: <https://www.asktheeu.org/en/help/about> [accessed 7 May 2018].

224. Request entitled "EU funded projects related to the deinstitutionalisation of Children" made on 2 February 2018. Details here: https://www.asktheeu.org/en/request/eu_funded_projects_related_to_th#incoming-16247

225. https://www.asktheeu.org/en/request/eu_funded_projects_related_to_th

226. Request entitled additional information on "EU funded projects related to the deinstitutionalisation of Children" made on 6 June 2018. https://www.asktheeu.org/en/request/eu_funded_projects_related_to_th?nocache=incoming-17662#incoming-17662

227. See for example the results of a search query for 'deinstitutionalisation' at https://www.asktheeu.org/en/list/all?commit=-Search&page=1&query=deinstitutionalisation&request_date_after=&request_date_before=&utf8=%E2%9C%93 [accessed 5 May 2018].

5. From this process, over 350 projects were reviewed for relevance and details. Of these, around 50 projects were selected and reviewed in more detail because of their direct relevance to the research focus and their potential to highlight both good practice and room for further improvements.

The case studies contained in this report were selected as examples of the various types of good practice identified the EU has undertaken – in terms of objectives, content, methodology, longevity, and in the projects' relationship to other stakeholders (such as CSO or state involvement). Other case studies included represent examples of instances where good practice has not been followed or the overall objective of the programme has not been sufficiently focused. As much as possible, cases were triangulated with official EU project data, external reports (often from CSO partners), local government and media reports and any formal evaluations or studies.

The research has found that there is a differing approach to providing project details between various EU funding instruments. While there may be details available for certain projects (these may also include evaluation documents), in other instances (most notably large-scale projects and/or projects which are primarily funded through contracts, as opposed to a call for proposals) there is very little available on the concrete project activities.

The research does not claim to have audited all EU projects related to transforming systems of care, child protection and relevant areas of work (such as poverty alleviation, education work etc.) up until 2018 – this would need a far greater amount of resources and the involvement of hundreds of EU departments and CSO partners. However, the findings do represent the result of a thorough and systematic strategy, used to identify which projects the EU has been funding (and is currently funding) related to children in institutions, the development of family and community-based care systems, child protection and the EU's funding of wider development projects that have an impact on the progress of care transformation and the extent of institutionalisation in ODA recipient states.





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