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The Impact of the European Union on the Transformation of Child Protection Policies

*A Study of Bulgarian Deinstitutionalization Reform
(1989-2015)*

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Table of content

Acknowledgements	2
Table of content	4
List of Figures	6
Acronyms	8
I - Introduction	9
A - Global understanding of the institutionalization of children.....	15
B - Bulgaria as a social experimentation field	28
C - The comparison Bulgaria and the UK.....	32
D - Main questions.....	33
II - Theoretical Framework: Analysing the Points of Transformation	51
A - What is Europeanization? Who is Europeanized?.....	52
B - Processes of Europeanization	59
C - The abandonment of children	65
D - Understanding the nature of Institutionalisation for children	71
E - The re-creation of the state - explaining political and social change in post-communist Bulgaria.....	73
F - Path dependency.....	83
G - Bulgaria and the UK in search of a welfare model.....	92
III - Bulgarian Social Policy between Three Different Political Regimes (1919 and 1989)	95
A - The denied legacy of the Pre-communist Period 1919-1944: Decentralised strategy of child protection	96
B - The Bulgarian centralized state approach and the Soviet Influence (1945-1989): Full state control and institutionalization of child protection.....	103
IV - The Arduous Transition - The Path from Communist to European Child Welfare (1989-1999)	128
A - The collapse of communism.....	129
B - 1997 - Let's close the factories of illusions.....	134
C - The transition and child welfare	136
V - Deinstitutionalization and Decentralization of Bulgarian Child Institutions	146
A - The formation of the Bulgarian child legislation (2000-2010)	147
B - Case studies	181
VI - The European Union as a Driver of the Deinstitutionalization Reform	198
A - The place of the child in the EU agenda setting	201
B - The formation of the Deinstitutionalization reform.....	203
C - EU agents working on child protection.....	210

D - Discrepancy between EU communication campaigns.....	212
E - Early stages of deinstitutionalization across Europe.....	214
F - New tendency for Re-Institutionalization.....	215
VII - The Governance of the Reform in Bulgaria: Chaotic Battle of Influence	219
A - Family type centres and the danger of Re-institutionalization.....	222
B - Foster care services – A difficult beginning.....	225
C - The personnel of child care institutions – decisive and neglected.....	229
D - Administration – increased beaurocracy.....	236
E - Municipalities and NGO’s – the unknown value of the equation.....	241
F - NGO’s – between the state and the EU	245
G - Families in need.....	246
H - The Public sector – demagogy in the media	255
I - Social stigma.....	257
J - The missing actors of the deinstitutionalization plan.....	258
VIII - The UK know-how and its Implementation in Bulgaria.....	267
A - British state framework of child protection – from Social Democracy to Neoliberalism	269
B - Re-institutionalization of abandoned children in the UK.....	278
IX - The Contested Role of the European Union.....	287
A - Unintended consequences of the reform.....	289
B - Social policies are resilient to foreign influences	291
C - Europeanization 3.0	297
Bibliography	301
Appendix 1 - Conceptual mind map	329
Appendix 2 - List of Interviews and Codes for Citations	330
Appendix 3 - Interview Guides	333
Appendix 4 - Data sources Figure 2.....	338
Appendix 5 - Data sources Figure 3.....	339
Appendix 6 - Number of Children in Residential Institutions 1955	340
Appendix 7 - Additional Parts of the Methodology	342

List of Figures

Figure 1 - Conceptual mind map of the thesis (part 1).....	14
Figure 2 - Estimated numbers of children in institutions in selected countries (see all sources in Appendix)	19
Figure 3 - Percentage of children in institutions with one or both parents alive, in selected countries (see all sources in Appendix).....	20
Figure 4 - Rate of children in residential care 1989-2000 (at the end of the year, per 100,000 population aged 0 – 17)	26
Figure 5 - Rate of children in residential care 2001-2014 (at the end of the year, per 100,000 population aged 0 – 17)	27
Figure 6 - Rate of children in residential care in Bulgaria (at the end of the year, per 100,000 population aged 0–17)	29
Figure 8 - Interview map of Bulgarian state driven institutions and community centers	41
Figure 9 - Schematic categorization of the actors	44
Figure 10 - Interview scheme	45
Figure 11 - Structure of the thesis	50
Figure 12 - Anti-residential bias	71
Figure 13 - Development of Child Services 1930-1944.....	101
Figure 14 - Number of Children in Residential Institutions in Central and Eastern and the Former Soviet Union 1995	112
Figure 15 - Number and Location of Homes and Beds for Disabled Children in Bulgaria 1965 versus 1978	113
Figure 16 - Development of Homes Mother and Child 1960-1973	116
Figure 17 - Distribution of institutions for disabled children per town 1965	119
Figure 18 - Distribution of institutions for disabled children per town 1978	120
Figure 19 - Schematic representation of the evolution of child policies in Bulgaria since the Ottoman Empire. The impact of path dependency.....	127
Figure 20 - Annual rates of unemployment in Bulgaria 1993-2012 in percentage.....	133
Figure 21 - GDP evolution in Bulgaria 1980 – 2011	139
Figure 22 - Number of children in different types of large-scale institutions in Bulgaria 2011	150
Figure 23 - The closure of the five biggest institutions 2006-2010	163
Figure 24 - Number of children in institutions (per 10000 child population in EU Member States 2010).....	166
Figure 25 - Number of children in different types of large-scale institutions in Bulgaria 2011	167
Figure 26 - Structure of the decision-making after decentralization.....	168
Figure 27 - Number of children under 1 year old who died in state-run institutions 2009-2011	171
Figure 28 - Reasons for child mortality 2009-2011	172

Figure 29 - Homes for children (7-18) deprived of parental care 1953-2016	174
Figure 30 - Cost per child in alternative care 2014 in BGN	179
Figure 31 - Total cost of foster care programs 2003-2009 in BGN	180
Figure 32 - Comparative table of the expenses before and after the deinstitutionalization ...	183
Figure 33 - Comparison of community based centres after the decentralization.....	193
Figure 34 - Timeline of Bulgarian child protection laws and Home development 1878-2010	197
Figure 35 - Ideas, Instruments and Institutions Part 1 (the case of Bulgaria).....	221
Figure 36 - Expenses on foster care services/projects 2010-2014	236
Figure 37 - Number of children and handicap children in the system of care.....	251
Figure 38 - Ideas, Instruments and Institutions Part 2 Challenges (the case of Bulgaria)	264
Figure 39 - Institutionalization, Deinstitutionalization, REinstitutionalization.....	296
Figure 40 - Conceptual map: main findings	299

Acronyms

EC	European Commission
ECCL	European coalition of community living
ESM	European Social Model
EU	European Union
GOSKOMSTAT	Russian State Committee for Statistics
IMF	International Monetary Fund
MLSP	Ministry of Labour and Social Policy
NSI	National Statistical Institute
NSRSPSI	National Strategy Report on Social Protection and Social Inclusion
SACP	State Agency for Child Protection
SAPI	Social Activity and Practices Institute
TACIS	Technical Assistance to the Commonwealth of Independent States
UN	United Nations
USSR-	Union of Soviet Socialist Republic
UNICEF	United Nation Children's Fund
WHO	World Health Organization
UNCRC	The UN Convention on the Rights of the Child

I - Introduction

This thesis was inspired by a documentary *Bulgaria's Abandoned Children*¹ created in 2007 to demonstrate the unprecedented and tragic levels of neglect towards children placed in state-driven care institutions. Six years of empirical research on multi-level stakeholders allowed us to confirm the terrible damage done by inadequate institutional care and witness the extraordinary efforts that different stakeholders need to take in order for children to survive both physically and mentally once placed outside of institutional care. At the beginning of this research, in 2012, Bulgaria had one of the highest number of children with living parents abandoned in institutions in comparison to all other European Union (EU) members (more than 92% of the children had one or two parents still alive and in good health). This would probably still be the case today, if a sudden increase of national and international awareness of the circumstances in which abandoned children had lived and died in the past twenty years had not followed the documentary at the right political moment — January 2007, when Bulgaria was considered ready to join the European Union. It is almost unbelievable that more than twenty cohorts of children since 1989 have been doomed to minimum medical care, constant violence, hunger, and low levels of education with no social and political will to stop the vicious cycle and adapt the post-communist heritage of institutional care to the European present of the country.

Our questions of departure were related to three main groups of factors: first, we wanted to understand the evolution of institutions and the reasons behind the unbelievable degradation of care first showcased by the foreign media. Second, through our background in social policy and development we wanted to study the nature of Bulgarian social policy and the relationship between state, children and society in the past hundred years. Third, due to the relatively recent entrance of Bulgaria in the European Union (which took place in 2007, the same year as the projection of the movie) we could not but link the transformation of child protection system with the desire of the country to become member of the European Union

¹ Bulgaria's Abandoned Children, documentary directed by Kate Blewett, released on Tuesday 11 December 2007 on BBC Four Documentaries; <http://www.bbc.co.uk/bbcfour/documentaries/features/bulgarias-children.shtml>

and thus follow its pre-accession conditionality. To find an answer to these questions, this dissertation focuses on national and local levels of social policy, but within the framework of the larger scale of EU decision-making and the multiple actors involved in the transformation of social policies in Bulgaria. As we shall demonstrate later, the institutionalization of children is far from being only a Bulgarian problem. Our thesis will investigate through the point of a variety of national and international actors why there is a continuous need for large-scale institutions in Bulgaria and the UK and how this need compounds with the creation of European guidelines for *deinstitutionalization* (their dismantling) The present research on the Bulgarian child protection reform tends to enlarge the existing theoretical debates around the largely discussed concept of *Europeanization* by introducing one much less studied problem – the abandonment of children within the post-communist context. Due to the complexity of child protection policies and the lack of analysis of their impact on the definition of Europeanization in Central and Eastern Europe we have built the theoretical axis of the thesis around the intended and unintended causes of the development of EU policies over national social policies for children deprived of parental care. The terrain of our research is post-communist Bulgaria and the country's socio-political transformations in the field of child protection. The investigation focuses on the Bulgarian deinstitutionalization reform and covers multiple levels decision makers since the 1990s, but also incorporates a comparison of the effects of the same reform under the EU guidance with an older Western member state - England. The decision to track the British perspective on the creation of community-based care and its implementation within the Bulgarian context allowed for a comparison with a clearer focus and for an insight into the EU mechanisms of management and evaluation of transformations of social policies within different member states.

In order to describe the international context of the Bulgarian case, we will briefly present the definitions of two of our major concepts: *Europeanization* and *deinstitutionalization*. Broader conceptual framework will come in Chapter II.

Europeanization - the framework of the transformation of child protection policies

The basic premise of this thesis is that European integration affects domestic policies and thus the puzzle that we will solve is encrypted within the question *How does Europe matter?*

as opposed to *Does Europe matter?*². Adopting the bottom-up perspective, this study challenges preset expectations for the outcome of the interaction between nation states and the European Union, and it focuses on the development of domestic political and social processes and reform implementation mechanisms in coordination with the integration procedures formulated by the respective European institutions.

Despite being rarely the focus of accession discourse as are the debates on political and economic performance, social policy deserves an equally prominent degree of examination and commitment from both the EU and national organizations. Reflecting on the role of the state in the formation of social policy norms, this work aims to analyze the impact of the Europeanization process on the transformation of post-communist childcare institutions into community-based services. This transformation marks a shift of state policies from a public to an individual approach towards children's needs, and thus foreshadows a collision between the Soviet system of childcare and the liberal one. Thus, throughout this study the Europeanization process serves as a laboratory for the analysis of change in institutions, values, and norms in regard to child welfare. Acknowledging the different theoretical stages in the development of the reform (explained in Chapter II), we will question how the concept evolves in relation to child policies.

What we are interested in analyzing in this thesis is the process through which the EU influences state formation, and even more so the impact of EU policies on national level social policy. The EU has long-lasting legal and institutional instruments to implement its various policies, but in relation to child protection they appear to be unclear and not centralized. This thesis will evaluate the extent to which there is or needs to be a shared and common model of child protection, and how this model could intervene with state welfare, national, and historical trajectories. We will not question the existence of EU mechanisms for policymaking, but analyze their impact on the changes in childcare in two different European member states – Bulgaria and the UK. Comparing two countries with different degrees of

² BÖRZEL, T., RISSE, T. Conceptualizing The Domestic Impact Of Europe. In Featherstone, K., RADELLI, C., *Politics Of Europeanization*. 2003, Oxford: Oxford University Press.

liberalism and westernization helps us analyze policy implementation and policy divergences on different levels and shows how decision-making process is constructed, influenced, and/or formed after the EU accession in relation to stakeholders responsible for child protection policies. The Europeanization analysis is based on the theoretical basis of the term, but largely investigated through an empirical research on four different levels of stakeholders: international (European Union + international organizations), national (Bulgarian state government and institutions), regional (municipalities), and local (NGOs and community) levels.

The Deinstitutionalization reform –the tool of the transformation

The sweeping international pressure after the documentary on abandoned children was followed by increased measures on the behalf of the Bulgarian government to strengthen its Law of Child Protection (voted in 2000) and start drafting the Bulgarian vision of the *deinstitutionalization* reform. According to the European Union guidelines for deinstitutionalization, this reform is defined as: *a process of replacement of institutional care with a family- and community-based alternative. It is a process of preventing institutional care as a whole and creating new child and family policies*³. The scholarly debate around the definition and implementation of this reform considers predominantly people with disabilities and is centered either on individual rights or on collective well-being⁴. On the one hand, the literature that is focused on the needs and rights of the individual describes the deinstitutionalization as *recognizing the variety of needs among people with learning difficulties, their right to individual treatment, their value as individuals, their rights as citizens and the importance of integration as a guiding principle in the planning of services*⁵. On the other hand, according to theoreticians on the reasons behind a collective well-being the deinstitutionalization is defined as *the reduction in the number of admissions to public*

³ European Expert Group On The Transition From Institutional To Community-Based Care (Brussels, Belgium) Toolkit on the Use of European Funds for the Transition from Institutional to Community-based Care <http://www.deinstitutionalisationguide.eu/wp-content/uploads/2016/04/GUIDELINES-Final-English.pdf>

⁴ KELLEY J. Deinstitutionalization: The management of rights, *Disability & Society*, 13:3, 375-387, DOI: 10.1080/09687599826696 , 1998

⁵ BOOTH, T., SIMONS, K., BOOTH, W. *Outward Bound: relocation and community care for people with learning difficulties*. KEYNES, M. 1990, Open University Press.

*institutions, the development of alternative community methods of care, the return to the community of those individuals capable of functioning in a less restrictive environment and the reform of public institutions to improve the quality of care provided*⁶. Following the European Union's objective, the deinstitutionalization reform that we will regard in this research only concerns children with disabilities and children with no disabilities deprived of parental care and does not deal with institutions for disabled adults. Thus, the deinstitutionalization we refer to combines the literature debate and deals both with changes in the individual rights of children and the management of the implications of the deinstitutionalization process over the community.

In the introduction, we will first present the global framework into which the deinstitutionalization process falls, together with the main United Nations (UN) and EU child protection conventions related to its evolution. In this part, we will also briefly describe the negative impact of institutional care as exposed by scientists in the field of child development. Second, we will underline the angles through which we will associate the institutionalization and deinstitutionalization reforms in old and new members of the European Union: The UK and Bulgaria. The third section of this first chapter will be dedicated to a depiction of our leading questions, hypotheses, research methodology and structure of the thesis.

⁶ WILLER, B., INTAGLIATA, J. An overview of the policy of deinstitutionalisation, *International Review of Research in Mental Retardation*, 12, 1998, pp. 1-23.

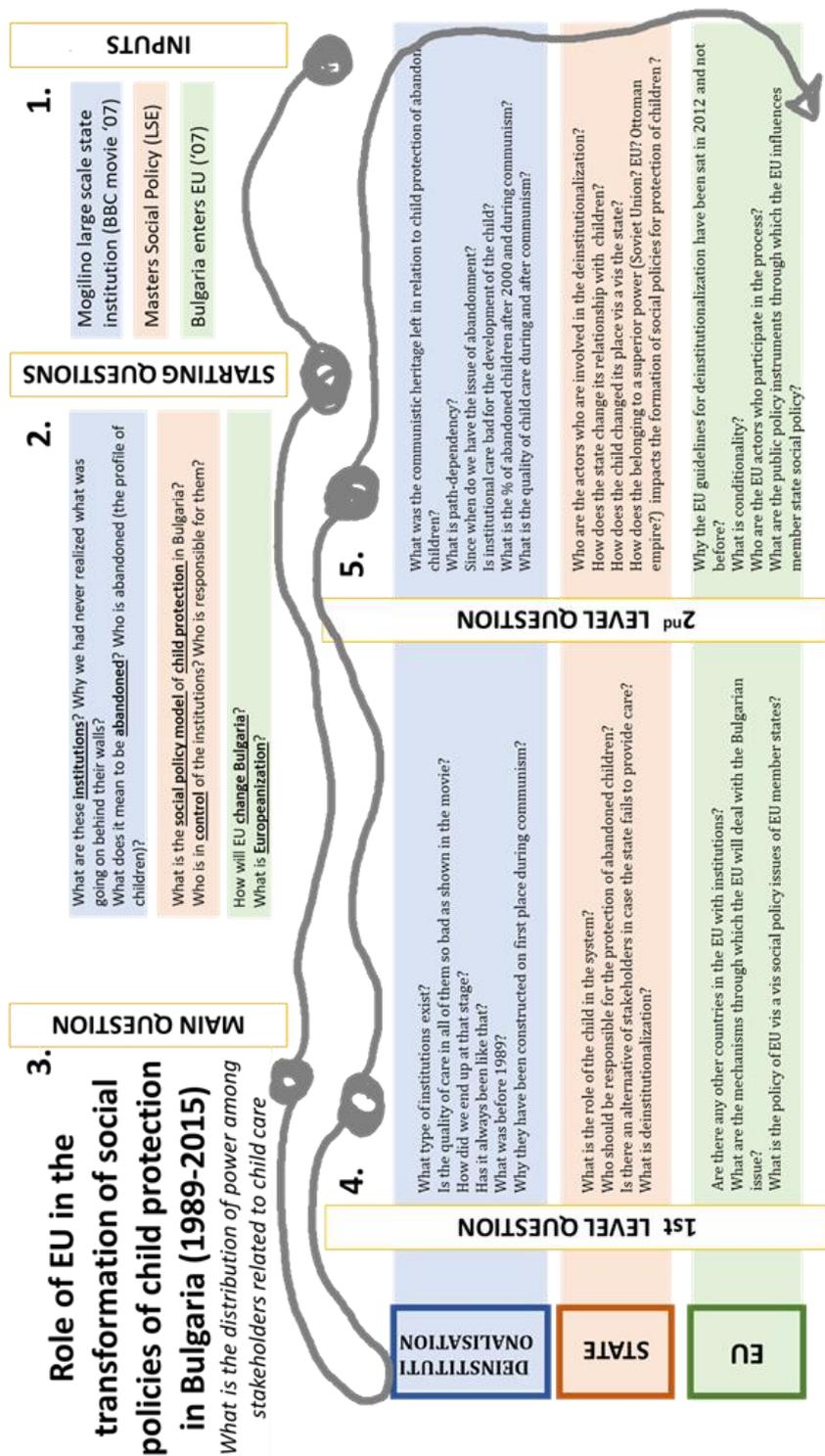


Figure 1 - Conceptual mind map of the thesis (part 1)

A - Global understanding of the institutionalization of children

In 2014, the world celebrated twenty-five-year anniversary of the adoption of the UN Convention on the Rights of the Child. Despite the progress made since then, and the fact that there are more universal agreements for protection and implementation of children's rights, there is still no one universal body that defines, and is considered responsible for protecting, the *best interests*⁷ of children along with other public policies. Many welfare policies were said to be centered on children's best interests; however, in reality most of them have failed to promote and protect children against violence, abuse, exploitation, social exclusion or discrimination around the world. Recent statistics have been explicit on the fact that governments, international institutions, and national governmental organizations face challenges in defending children and assuring the monitoring, evaluation, and implementation of their rights⁸. Since the adoption of the Convention on the Rights of the Child, perceptions of what constitutes the best interest of children have varied across cultures, but even more distinctly across political ideologies. Despite greater international visibility of children's problems around the world through media and social networks, this division of public policies remains predominantly part of the national political realm and is rarely considered a priority in economic and political summits. However, our interviews with representatives of the European Commission have revealed that the recent global economic crisis (2008) might slowly push supra-national governance, such as the EU, to consider investment in social policy issues as a productive step towards greater economic development and employment growth. Public policy scientists reveal that the specific nature of child policies could transform the relationship between economic and social policy development. In that sense, reforms such as the deinstitutionalization, which mean to transform the relationship between state, society, and children under EU governance, represent a considerable importance not only for each individual state, but for the union as a whole.

The irreversible harm and long-lasting damaging effects of institutional childcare as practiced today have been largely researched and recognized in the academic and professional

⁷ The UN Convention on the Rights of the Child

⁸ The Neglected Agenda: Protecting Children Without Adequate Parental CARE. Paper held at the Wilton Park international conference center in West Sussex, United Kingdom, from 30 November – 3 December 2009.

literature⁹. At stake is not only the future of millions of children doomed to a life with persistent physical and mental health issues, but also the economic and political growth of the respective nations that care for them¹⁰. The United Nations Convention on the Rights of the Child (UNCRC) recognizes that

*The child, for the full and harmonious development of his or her personality, should grow up in a family environment, in an atmosphere of happiness, love and understanding... [and] ... the family ... should be afforded the necessary protection and assistance so that it can fully assume its responsibilities within the community*¹¹.

Clearly referring to children in care, Article 3 of the convention states that *institutions, services and facilities responsible for the care or protection of children shall conform to the standards established by competent authorities, particularly in the areas of safety, health, in the number and suitability of their staff, as well as competent supervision*¹².

In addition, Article 19 of the UNCRC stipulates that *while in the care of parent(s), legal guardian(s) or any other person who has the care of the child, children should be protected from physical and psychological abuse and neglect*. The responsibility of the state to protect the children in situations where the parents fail to do so is also underlined in Article 20: *A child removed or deprived from his/her family shall be entitled to special protection and assistance provided by the State*. Nevertheless, how international statements define residential care and the role of the state remains controversial, and that is visible in two of the most prominent international declarations: *The Stockholm Declaration on Children and Residential Care* produced by delegates to the 2nd International Conference on Children and Residential Care and the *Malmö Declaration* made by delegates of the 1986 International Federation of Educative Communities (FICE) conference. The Malmö Declaration highlights for the first time the importance of new models of ‘community’ residential care without abolishing their usage: *Care in residential settings must continue to provide a positive atmosphere and a*

⁹ MYERS J E B, *Child Protection in America: Past, present, and future*, Oxford University Press, New York, 2006. p. 77, ROLLINSON R, *Residential Childcare in England 1948–1975*. 2009, A history and report, commissioned by the Irish Commission to Inquire into Child Abuse.

¹⁰ *The Neglected Agenda: Protecting children without adequate parental care. op.cit.*

¹¹ UN Convention on the Rights of the Child

¹² *Ibid.*

*comprehensible environment for those who live in them, giving them the opportunity to create their own network of dependable social relationships*¹³.

The Stockholm Declaration takes a more radical stand by defining all residential care as institutional, in contrast to the family provision. More importantly, it highlights the necessity for adoption and implementation of standards of public care that will give children more rights for family-based support during their development: *there is indisputable evidence that institutional care has negative consequences for both individual children and for society at large. These negative consequences could be prevented through the adoption of national strategies to support families and children, by exploring the benefits of various types of community-based care, by reducing the use of institutions, by setting standards for public care and for monitoring of the remaining institutions*¹⁴.

We found out that these two declarations reflect well the overall tension and political debate in the practice and definition of residential care. On the one hand, the Malmö Declaration emphasizes the importance of the existence of residential care as an option that has been recognized by many users of the service *not as a last resort, but rather a preferred and positive choice when their developmental challenges indicate the need for it*¹⁵. On the other hand, the Stockholm Declaration abolishes all types of residential care. Our analysis proved that both declarations could be supported for different reasons, and one should not try to abolish neither of them, but rather adapt the recommendations to the specific country context. The case studies from the international comparison done by Courtney, Tolev and Gilligan underline that *economic, political, ideological, and cultural factors have played all*

¹³ Malmö Declaration, 1986 At the biannual Congress of FICE, the International Federation of Educative Communities, held in Malmö on August 28, 1986, the delegates drawn from 20 countries express concern for the plight of children and young people who are unable either temporarily or permanently to grow up at home with their natural parents. <http://www.cyc-net.org/cyc-online/cycol-0208-malmo.html>

¹⁴ Stockholm Declaration on Children and Residential Care, 2003 https://www.compasio.org/download.php?file_id=1385 / More than 600 individuals from governments, civil society and the research community from 71 countries participated at the second international conference on Children and Residential Care: New Strategies for a New Millennium, held in Stockholm 12 – 15 May 2003. The Stockholm Conference was preceded by national conferences in nearly 40 countries, during which country reports on the situation of children staying at institutions were prepared. The Declaration reaffirms State responsibilities to protect children's rights

¹⁵ ANGLIN, J., KNORTH, E. Competing declarations on residential care for children and youth—Stockholm versus Malmö: international perspectives on rethinking residential care, *Child & Youth Care Forum*. 2004, 33(3), p. 141-149.

*roles in the development of residential care in addition to precipitating events such as abuse scandals or disease*¹⁶.

The UNCRC is famous for being the most rapidly ratified human rights treaty according to UNICEF, with the only two countries out of 193 not ratifying the agreement being Somalia and the US. Nevertheless, in 2010 the number of children living in large-scale institutions throughout the world has been conservatively estimated by the UN to exceed 8 million¹⁷ (see Figure 2). *Although most countries recognize placement in an institution as the solution of last resort after family support services and family-based care, the number of children in institutions is stable or even rising in several EU countries*¹⁸.

¹⁶ COURTNEY, M.E., DOLEV, T., GILLIGAN, R. Looking backwards to see forwards clearly: A cross-national perspective on residential care, in Courtney, M.E. and Iwaniec, D. (eds) *Residential care of children: Comparative perspectives*, 2009, Oxford: Oxford University Press.

¹⁷ PINHEIRO, R. *World Report On Violence Against Children*, 2006, UNICEF: New York

¹⁸ HAINSWORTH, J Eurochild Annual Report 2010
https://www.eurochild.org/fileadmin/public/05_Library/Eurochild-Annual-Report-2010.pdf



Figure 2 - Estimated numbers of children in institutions in selected countries (see all sources in Appendix)

This is especially true for Central and Eastern Europe and the former Soviet Union, where the rate of children placed in institutions rose by 3% between 1989 and 2006.¹⁹ Paradoxically, this is also the region where 98% of the children living in residential care have one or both parents alive²⁰ (see Figure 2). Hence, institutional care is not only common for Central and Eastern Europe²¹. Children are still being institutionalized under the age of three all over Western and Northern Europe, despite the existence of evidence that it can

¹⁹ CARTER, R. *Family Matters*. A study of institutional childcare in Central and Eastern Europe and the Former Soviet Union, London: Every Child, 2005.

²⁰ BROWNE, KD, HAMILTON-GIACHRITSIS C, JOHNSON, R. Overuse of institutional care for children in Europe, *British Medical Journal*, 332, 485–487, 2006

²¹ TOBIS, D. *Moving from Residential Institutions to Community Based Social Services in Central and Eastern Europe and the Former Soviet Union*, World Bank, 2000

cause irreparable damage in infants’ brain development²². Furthermore, institutional care is to a great extent the only solution provided for migrant, unaccompanied, and separated children, and still represents an important source of employment for regional social workers.²³



Figure 3 - Percentage of children in institutions with one or both parents alive, in selected countries (see all sources in Appendix)

The constant need for institutional care as a pattern in recent years must be considered as an alarming fact for politicians, since there is *clear evidence (from a survey of children in alternative care in 26 EU countries) that children who have been in care – and in particular in residential care settings – are more likely to end up homeless, to commit crimes, to have children before the age of 20 themselves and to have their own children taken into care.*²⁴ Therefore, as our study shows, when preventive and adequate measures are not taken in time,

²² OHCHR. The Rights of Vulnerable children under the age of three; Ending their placement in institutional care., Europe Regional Office

²³ *Ibid.*

²⁴ HAINSWORTH. J. Euro Child Annual Report 2010

a large part of this population remains dependent on the social system throughout their whole lives and suffers severe deprivation. To depict and comprehend the difference between the *institutional* and *deinstitutionalized* alternatives of care, we will give a brief overview of the psychiatric and psychological literature on the negative impacts of institutional care and the challenges that both systems of care face.

1) The impact of institutional care

The purpose and impact of institutions for children depends on the specific country context and political regime and is not based on one universally accepted definition. The common denominator is the fact that children who are placed in such institutions do not have parents or primary relatives who can guarantee their survival and well-being. Children's well-being is not fundamentally different than human well-being, but children are much more dependent on nurturing and on care, whose low quality may have long-lasting damaging effects on their lives. Institutional care may also vary in duration of the placement, size, location, and thus integration in the community-based life of society. Eurochild, a network of organizations and individuals working in and across Europe to improve the quality of life of children and young people, suggests that *institutions are (often large) residential settings that are not built around the needs of the child nor close to a family situation, and display the characteristics typical of institutional culture (depersonalization, rigidity of routine, social distance, dependence, lack of accountability, etc.*²⁵. There is solid evidence²⁶ that abandonment of babies leads to multiple psychological and psychosomatic deteriorations which will affect the rest of children's development, and that the institutional setting is harmful to the emotional, physical, intellectual, and social development of children²⁷. The younger the abandoned baby is, the bigger the trauma will be, as demonstrated in the research done by Rutter²⁸ and Marcovitch²⁹, who confirm that *infants who are institutionalized before*

²⁵ EUROCHILD Working Paper, Deinstitutionalization and quality alternative care for children in Europe, Lessons learned and the way forward, 2012, p. 6.

²⁶ BOWLBY, J. Maternal care and mental health. *World Health Organization Monograph*. 1951. No.2.

²⁷ BROWNE, K. The Risk of Harm to Young Children in Institutional Care, Save the Children. 2009.

²⁸ RUTTER M, KREPPNER J, SONUGA-BARKE E. Emanuel Miller Lecture: Attachment insecurity, disinhibited attachment, and attachment disorders: Where do research findings leave the concepts? *Journal of Child Psychology and Psychiatry*. 2009, vol. 50, p. 529–543

²⁹ MARCOVITCH S, GOLDBERG S, GOLD A, Determinants of behavioral problems in Romanian children adopted in Ontario. *International Journal of Behavioral Development*. 1997, vol.20, p. 17–31.

*the age of six months suffer long-term development delay*³⁰. According to scholars who developed the *attachment theory*³¹, when children change their parental figures during the first year of their life, vital processes of the child's development will depend on the quality of human relations (between the child and the primary caregiver). Based on this theory we can argue that being in institutional care automatically handicaps part of child's other capacities: *Without a caregiver to 'scaffold' infant learning, there is no process to guide synaptic connections and the development of neural pathways.*³² It is important to underline that states take different approaches when drafting their social policies and some countries have been less influenced than others by the above-presented findings. The opposite of policies focused on the psychosocial needs of children are strategies for child protection which underline the importance of the physical needs of children and the role of the state in controlling children's environment in situations where the parents cannot take care of their biological children.³³ For instance, for the communist state the long-term solution for the child coming from failed family-based care was a hospital or a residential care institution.

As we can see, there has been ongoing research within the literature of psychology and child development since the 1970s that proves that there are negative long-lasting effects on the physical and psychological wellbeing of children left in institutions. This thesis is in line with this statement and does not aim to challenge the role of parents in the development of children's lives. It pleads for greater support of the family unit and at the same time it acknowledges the fact that the closure of these institutions will not serve as a panacea for child abandonment. As we shall demonstrate later in Chapter V, there is a very little research on the consequences of alternative care methods, such as foster care families and family-type social centers and thus critically explores the switch from institutional to community based protection systems.

³⁰ IVANOVA, V. BOGDANOV G. The Deinstitutionalisation of Children in Bulgaria. *Social Policy & Administration*, April 2013, Vol.47, No 2, , pp.199-217

³¹ BOWLBY, J. *Attachment and loss*. Vol. 1: Attachment. Pimlico; London, UK: 1969/1997.

³² JOHNSON, R., BROWNE, K., HAMILTON-GIACHRITSIS, C. Young children in institutional care at risk of harm, *Trauma, Violence and Abuse*, 2006, 7, 1, p. 1–26.

³³ BROWNE, K. D. Child protection. In RUTTER, M. TAYLOR E. (Eds.), *Child and adolescent psychiatry*, 2002, 4th ed., chap. 70, p. 1158-1174. Cambridge, MA: Blackwell Science.

2) The EU strategy to eradicate institutional care

In order to answer to the growing scientific consensus for the necessary eradication of large-scale institutions within its territory, the European Union engaged in the formation for cross member states strategy to deinstitutionalize services for child care in 2012. By definition, deinstitutionalization is not simply the closure of residential institutions, but it also comprises the replacement of these institutions with community-based alternatives and *other childcare services regulated by rights-based and outcomes-oriented standards*³⁴. According to one of the pioneers of the deinstitutionalization – Georgette Mulheir the CEO of Lumos³⁵ - the term is defined as *systematic, policy-driven change which results in considerably less reliance on residential care and an increase in services aimed at keeping children within their families and communities*³⁶. This policy-driven process has as objectives:

- *Decreasing reliance on institutional and residential care with a complementary increase in family- and community-based care and services;*
- *Preventing separation of children from their parents by providing adequate support to children, families and communities;*
- *Preparing the process of leaving care, ensuring social inclusion for care leavers and a smooth transition towards independent living.*³⁷

Since many of the countries that adapt this new type of care are either already members of the European Union or are currently undergoing the process of European accession, there is a growing need to analyze the role of the European Union in establishing effective childcare policies and in reorganizing the existing practices in its newest constituents. As some authors point out, deinstitutionalization is a *lesson learnt for the EU since the enlargement of 2004, when ten countries, including eight from the former Eastern bloc, became member states*³⁸.

³⁴ UNICEF. The child care transition, Innocenti Report Card 8, 2008. UNICEF Innocenti Research Centre, Florence.

³⁵ One of the 1st and most active British nongovernmental organization working towards ending the deinstitutionalization of orphaned children

³⁶ UNICEF. Regional Office for Central and Eastern Europe and the Commonwealth of Independent States (UNICEF, CIS) (2010), *At home or in a home? Formal care and adoption of children in Eastern Europe and Central Asia*, Geneva: UNICEF, <http://www.unicef.org/protection/Web-Unicef-rapport-home-20110623v2.pdf>

³⁷ EUROCHILD. Working Paper, *Deinstitutionalization and quality alternative care for children in Europe, Lessons learned and the way forward*, 2012, p. 6.

³⁸ *Ibid.*

Back then, the pre-accession period for these ten countries did not include any specific criteria to focus governments' efforts on deinstitutionalization. The EU welcomed states such as Lithuania and the Czech Republic with more than 1,200 children per 100,000 population aged up to 17 in residential care³⁹. Despite the fact that there is no direct correlation found between the number of children in institutions and the overall number of children at risk of poverty or social deprivation, the recent economic crisis and the general shortages of state budgets slowly pushed EU authorities to construct and finance common EU guidelines against institutionalization. In Chapter VI we will analyze in greater detail if EU policies change focus in relation to child protection, but what should be underlined at that stage is that the EU interest on that manner aroused slowly and with not enough consistency throughout the years. The issue remains peripheral, and there is no overall analysis of the need for a European strategy for child protection and its possible impact on economic factors – *for that present moment the child issue arouses only when it turns into a problem (2014/35)*.

The deinstitutionalization reform can be regarded as a hybrid between two pivotal moments of transformations in Eastern Europe: the fall of communist regimes and the integration into the European Union. The genesis of this study is grounded in the controversial resistance to change of large-scale institutions on the background of European involvement in the country's political and social transformations. Thus, our thesis portrays multiple simultaneous transformations: from communism to liberalism, from parental to modern welfare, from centralized to decentralized childcare provision, and their impact on the development of child protection policies. It demonstrates impacts on Bulgarian children when there is a national strategy for reform of the system of institutional care for children and, simultaneously, the adoption of an innovative European advocacy implemented through unprecedented EU funds. The central questions addressed by this analysis review the internal and external factors that stimulate political changes in the sphere of childcare throughout the Europeanization process, as well as the important preconditions for long-term solutions of the problem from the point of view of key players on both European and Bulgarian level. It also shows how a largely portrayed documentary (*Bulgaria's Abandoned Children*) instigated not only social, but also significant political pressure from European institutions on the Bulgarian

³⁹ IVANOVA, V. BOGDANOV G. The Deinstitutionalisation of Children in Bulgaria, *op.cit.* p.202

state to change its policies towards abandoned and handicapped children⁴⁰. As a new member of the European Union at the time, the Bulgarian government was forced to exert considerable effort and take prompt steps towards full eradication of its previous childcare policies. Europeanization does not lead to same degree of deinstitutionalization and is not the only possible vector for decrease of large scale institutional care. For instance, the rate of children⁴¹ aged 0–17 in residential care per 100,000 population clearly demonstrates that in some EU countries, such as the Czech Republic and Latvia, the rate of children in institutional care respectively doubled from 682 to 1,218 children per 100,000 population aged 0–17, and increased six times, from 128 to 780. On the other hand, in some non-EU members, such as Georgia and Armenia, where EU policies are not applied, the rate has decreased significantly since 1989, respectively from 1,265 to 141 per 100,000 and from 343 to 268 (see Figure 4/5).

⁴⁰ BULGARIA'S ABANDONED CHILDREN, documentary directed by Kate Blewett, *op.cit.*

⁴¹ UNICEF. Is Every Child Counted? Status of data for children in the SDG's. Consulted on May 15, 2017 at <http://transmonee.org/wp-content/uploads/2016/12/Does-Every-Child-Count-Brochure-09142016-CEECIS.pdf>

Rate of children in residential care (at the end of the year, per 100,000 population aged 0-17)													
		1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
Czech Repul	1	682.3	704.4	701.1	722.7	768.3	836.0	893.3	945.0	985.1	1'015.9	1'068.3	1'109.4
Hungary	2	537.1	488.4	430.0	408.3	409.8	394.4	393.7	392.0	373.9	434.1	405.5	403.4
Poland	3	554.0	572.7	562.7	568.5	583.5	618.7	723.8	734.5	751.2	785.0	798.3	654.9
Slovakia	4	559.7	536.8	546.5	551.9	566.0	576.9	626.1	644.8	658.5	639.7	655.7	701.1
Slovenia	5	363.5	365.0	385.8	421.6	343.5	288.7	315.1	317.9	274.1	287.5	401.3	447.1
Estonia	6	357.5	373.4	345.2	354.2	386.9	408.5	417.9	485.5	507.2	526.0	547.4	563.8
Latvia	7	128.1	252.5	242.7	275.2	322.5	378.4	472.5	554.8	584.2	665.6	685.2	703.1
Lithuania	8	-	1'709.8	1'436.7	1'248.7	1'249.2	1'162.1	1'176.5	1'237.5	1'342.5	1'372.4	1'393.5	1'374.4
Bulgaria	9	-	1'281.4	1'307.9	1'349.7	1'413.1	1'430.6	1'441.9	1'520.8	1'409.8	1'401.6	1'451.0	1'029.3
Romania	10	-	724.5	734.7	689.2	739.4	898.0	865.4	935.6	959.0	853.4	760.1	1'165.6
Albania	11	-	-	-	-	-	-	-	-	-	55.8	49.2	61.6
Bosnia and H	12	-	225.8	-	-	-	-	-	-	-	-	185.3	208.6
Croatia	13	-	607.9	-	426.6	-	444.3	-	478.9	-	442.3	-	548.5
Montenegro	14	-	-	-	-	-	-	-	-	-	-	-	330.4
Serbia	15	-	-	-	-	-	-	-	-	-	-	-	-
The former Yugoslav Republic of Macedonia	16	221.8	252.4	213.9	253.3	201.0	212.9	209.3	204.8	231.6	200.1	170.6	176.3
Belarus	17	1'169.0	890.0	784.0	770.0	726.9	732.3	771.5	820.2	867.3	945.8	989.9	1'026.9
Moldova	18	1'085.6	994.9	870.5	613.2	547.8	590.0	583.5	634.7	735.0	739.7	708.3	1'158.4
Russian Fed	19	1'253.9	1'231.6	1'112.6	1'078.6	1'050.3	1'073.6	1'120.2	1'166.1	1'172.4	1'206.4	1'238.2	1'264.6
Ukraine	20	224.9	220.6	240.1	236.7	244.3	255.1	275.3	298.7	328.4	353.9	377.8	920.6
Armenia	21	-	343.6	325.8	292.5	293.0	278.1	306.6	323.7	393.8	486.2	577.3	613.8
Azerbaijan	22	888.2	874.0	788.9	709.5	652.0	639.2	625.2	672.0	686.6	669.9	698.9	735.3
Georgia	23	1'264.5	1'149.1	1'030.7	887.0	177.6	685.5	678.7	706.7	751.4	713.1	695.0	696.0
Kazakhstan	24	-	-	-	-	-	-	-	-	-	-	-	1'353.4
Kyrgyzstan	25	-	437.3	399.4	887.2	761.6	636.6	617.7	660.7	647.8	664.0	703.1	748.4
Tajikistan	26	-	-	-	-	-	-	-	-	-	-	-	-
Turkmenistan	27	52.1	53.3	47.4	44.6	48.4	40.4	53.2	46.0	48.5	55.9	46.1	161.8
Uzbekistan	28	173.7	311.9	292.4	311.0	291.2	274.4	264.7	277.2	292.3	299.1	310.6	337.3
Total for CEE/CIS		874.1	839.0	786.3	762.0	734.2	755.4	778.6	809.2	824.5	816.4	828.5	970.1
Total for Eastern Europe		804.5	795.3	747.2	727.7	708.5	730.4	763.1	792.0	807.9	807.8	820.6	926.8

Figure 4 - Rate of children in residential care 1989-2000 (at the end of the year, per 100,000 population aged 0 – 17)

Rate of children in residential care (at the end of the year, per 100,000 population aged 0-17)

2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1'117.3	1'143.2	1'168.2	1'215.2	1'248.8	1'301.5	1'268.4	1'266.6	1'270.5	1'272.3	1'247.5	1'271.9	1'221.5	1'218.0
417.0	401.8	415.9	411.8	406.0	388.6	384.8	388.6	375.3	379.2	385.7	387.9	369.4	403.1
682.0	687.3	687.2	702.0	709.1	725.7	707.3	704.5	719.7	703.3	708.9	717.1	711.5	713.3
713.7	677.9	739.0	783.0	732.2	665.2	660.0	684.8	684.6	674.0	722.5	550.3	548.9	529.9
449.3	456.9	458.7	519.7	441.6	405.6	391.5	377.0	368.3	349.6	334.0	324.4	317.6	
614.9	656.0	552.0	570.0	637.3	631.4	594.7	534.6	523.3	497.8	478.5	449.7	439.5	432.7
723.6	738.2	731.7	698.1	674.1	635.4	655.9	644.1	586.4	753.2	801.9	844.3	845.8	780.4
1'349.5	1'354.8	1'400.9	1'431.7	1'545.0	1'571.5	1'527.0	1'527.7	1'464.8	1'330.4	1'287.0	1'187.7	1'163.6	779.1
1'023.8	989.8	925.6	886.6	825.3	723.8	689.0	634.5	612.1	571.8	521.1	475.9	402.7	314.1
1'036.2	928.4	826.9	697.8	638.5	584.2	604.5	626.2	611.2	598.2	605.0	602.2	592.9	578.1
62.6	65.5	66.7	64.6	87.3	101.1	113.0	140.7	110.5	-	-	-	-	146.9
211.2	226.1	248.8	262.0	306.8	301.6	301.3	312.0	310.9	309.5	329.6	343.1	358.1	280.5
-	689.0	-	719.7	-	753.2	-	775.5	-	588.2	-	-	-	443.0
-	342.2	-	336.9	-	370.0	-	378.7	-	408.6	-	290.5	260.0	-
-	-	-	-	-	-	-	-	163.8	151.5	139.8	138.7	128.8	123.5
167.1	164.4	167.9	175.5	182.0	182.1	184.4	178.3	169.5	162.3	160.5	160.2	150.4	160.8
1'086.7	1'116.6	1'090.7	1'082.7	1'089.4	1'033.5	978.7	933.4	846.8	790.8	752.5	694.2	646.9	590.5
1'185.4	1'231.4	1'279.4	1'396.8	1'410.1	1'365.1	1'215.2	1'214.3	1'059.8	908.0	785.4	686.6	556.3	432.1
1'315.0	1'351.4	1'338.8	1'358.7	1'315.4	1'309.9	1'241.1	1'222.0	1'159.5	1'164.5	1'108.4	1'083.3	1'036.7	959.8
957.0	1'009.7	1'033.4	1'053.3	1'052.6	1'039.9	1'015.3	996.9	1'099.1	1'062.1	1'071.1	1'023.4	1'002.3	892.5
493.8	502.7	565.1	823.6	876.2	842.3	537.4	857.6	280.3	306.3	307.6	472.0	356.1	268.4
757.9	816.5	836.6	837.1	840.5	618.5	620.2	526.9	422.3	391.1	360.6	381.6	373.2	398.7
706.7	698.6	761.6	-	-	-	511.5	479.4	366.1	317.4	221.7	121.9	116.7	141.0
1'421.9	1'594.9	1'751.7	1'865.8	1'859.2	1'815.4	1'784.4	1'815.9	1'698.8	1'648.8	1'589.5	624.7	953.9	1'074.7
725.4	731.9	672.8	836.5	980.3	1'054.8	1'101.2	1'088.3	1'054.9	1'021.4	1'031.0	1'028.5	1'023.7	958.8
-	364.4	389.3	406.7	396.4	380.9	336.5	316.0	321.8	348.7	330.4	324.4	326.7	299.0
156.9	156.7	157.3	158.4	154.9	150.6	-	-	-	-	-	-	-	-
361.2	354.9	309.6	308.5	243.3	241.2	241.0	236.0	232.5	232.1	235.6	234.9	239.1	191.3
996.7	990.7	988.0	1'001.7	977.8	950.9	939.0	927.7	878.9	870.5	848.2	762.6	764.3	711.9
951.8	949.3	948.4	963.0	943.8	922.9	909.3	900.2	859.9	851.3	832.9	759.8	759.2	714.4

Figure 5 - Rate of children in residential care 2001-2014 (at the end of the year, per 100,000 population aged 0 – 17)

By presenting the historical context of childcare development in Bulgaria, this dissertation probes whether, at the moment of EU accession and voluntary adoption of the *Acquis Communautaire*, the Bulgarian state – both through institutional and social prisms – was influenced by pre-existing interest groups and long-term historical arrangements. The nature of this influence and the extent to which it was constrained or fortified by them will be examined through our analysis. In order to comply with EU conditions, Bulgaria was pushed towards decentralization of power and modifications in its provision of social services. Most of the newly adopted child-welfare practices diverged fully from those in place during communism. This change in political direction represents a precondition for the reconstruction of power relations between local actors and the new international groups based in Bulgaria. Hence, such a dynamic will serve us as a platform for some of our main questions related to the role of stakeholders and the impact of international actors in the transformation of child care at a moment of political transitions.

B - Bulgaria as a social experimentation field

As a post-communist state and a European Union member since 2007, Bulgaria represents an interesting laboratory for analysis of the political and social transformations in question and serves as a pertinent platform for comparing the local political and social dynamics with those in Western Europe, because it embodies the clash between the two ideologies on a current issue of child abandonment. In addition, Bulgaria is currently undergoing a series of fundamental social policy transformations that demonstrate a genuine political will to prioritize the individual needs of abandoned children and to break away from the post-socialist inertia of institutional care. This coalescence of historical circumstances further supports the choice of the country as a case study for this thesis. For Bulgarian stakeholders, it is also a pivotal opportunity to defy the passivity of the old status quo and contribute to the evolution of European liberal standards for child protection. A reform that aims to drastically transform Bulgarian social policies of child protection through deinstitutionalization of state care for children while implying European conditionality provides grounds for unique academic reflection. While Bulgaria's long and painful transition to capitalism took place in conjunction with two preeminent world powers – the Bretton Woods organizations⁴² and the European Union – the effect of the preceding socialist

⁴² The International Monetary Fund, The World Bank

ideologies on the policies in the region continued to cast a shadow over the growing Bulgarian liberal state. Thus, as global neo-liberalism and the European Union urged for complete reconstruction of the political, economic, and cultural identities of the country, social policy regulation became one of the points of controversy for local political agents and the Western powers. This research examines the issues at the center of the associated discourse. Deinstitutionalization reform in Bulgaria represents the controversial alternative rooted in Western liberal thinking about childcare institutions.

1) Bulgaria – first country to put in practice the reform

Bulgaria is the first European country that aims to close all of its child institutions and replace them with community-based services. Bulgaria is also the country where after the collapse of communism the number of children in institutions increased, as shown in the first Social Assessment of Childcare in Bulgaria⁴³, *the rate of children (per 100,000) raised from 1,281 to 1,520 in the year 1996*⁴⁴ (see Figure 6).

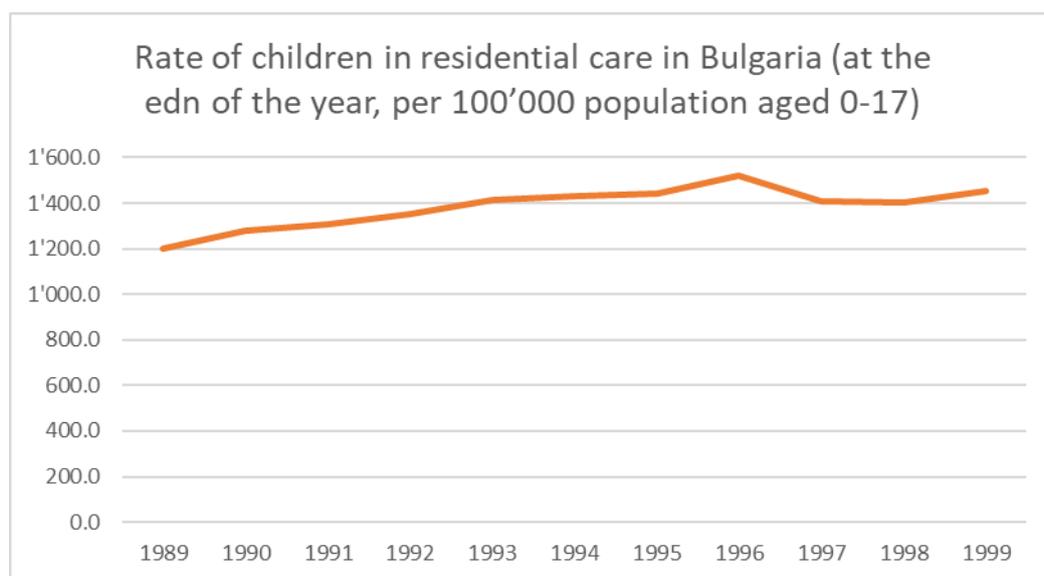


Figure 6 - Rate of children in residential care in Bulgaria (at the end of the year, per 100,000 population aged 0–17)

⁴³ BANOVA, V., HARIZANOVA, M., BOGDANOV, G. Social Assessment of Childcare in Bulgaria, 2000, New York, NY: UNDP and Washington, DC: World Bank, Executive summary.

⁴⁴ Rate of children in residential care (at the end of the year, per 100'000 population aged 0-17)

As shown in Figure 6, those are the highest values among all former Soviet and Eastern European countries. In the light of these alarming data as well as the international disclosure of the harsh reality in institutions for disabled and abandoned children people led to the alliance of Bulgarian NGO's and international organizations such as UNICEF⁴⁵ to work on the immediate closure of the homes. As a result of their extensive qualitative and quantitative research, the deinstitutionalization reform in Bulgaria became one of the first collaborative financial and political reforms involving the World Bank, the EU, and non-governmental Bulgarian and international organizations. A major political event⁴⁶ gathering Bulgarian state authorities, NGOs and representatives of the European Commission which took place in 2009 in Bansko, Bulgaria (three years before the EU guidelines were drafted) presented the Bulgarian official political strategy to deinstitutionalize and *showed that EU policy should be changed and both European and Bulgarian NGO's categorically opposed continuation of the policy for investments in old institutional forms*⁴⁷. As a proof of this strong joint advocacy from non-governmental organizations at the European level, the deinstitutionalization reform in Bulgaria became the first European initiative that managed to plan, activate, and launch five different projects worth 107 million euros. In that sense, the case of Bulgaria also illustrates how a new and relatively less powerful member state can initiate greater changes on European level and acquire unprecedented European funding for its national social policy objectives. The implications of this massive European action plan are still largely unknown and very little evaluated with the perspective of time and this thesis questions the extent to which this move from universal to individual care was adapted to Bulgaria's specific cultural and social traits.

Defined by the Ministry of Labour and Social Policy as the *closure of all childcare institutions and their replacement with the development of community-based social services and is identified as a government priority*⁴⁸, this reform embodies a reconstruction of the legal and financial framework of social services and the establishment of a public-private

⁴⁵ UNICEF opened Program Office in Bulgaria in 2006 to decrease the high number of children living in institutional care

⁴⁶ MINISTRY OF REGIONAL DEVELOPMENT AND PUBLIC WORKS. *Leaving No Child Behind*, seminar, Bansko, Bulgaria, 2009

⁴⁷ IVANOVA, V., BOGDANOV, G. The Deinstitutionalization of Children in Bulgaria. *op.cit.* .p.205

⁴⁸ NATIONAL REPORT ON STRATEGIES FOR SOCIAL PROTECTION AND SOCIAL INCLUSION 2008-2010 (2008).

partnership through the greater participation of the non-governmental sector and the beneficiaries of services (described in Chapter VII). Furthermore, it anticipates the adoption of Western models of alternative care (such as foster care, community-based centers, etc.) that provide abandoned children with an opportunity to reintegrate in the family environment. These transformations stipulate a fundamental change in the position of the child, from a mean of state policies to an independent agent with a legitimate right to individual (political and social) treatment. The analysis of deinstitutionalization reform aims to critically present the impact of European standards on national norms, so that both sides can acknowledge and rectify the problem areas of this interaction in relation to social policy.

As of the present moment, Bulgaria, has already passed the era of Mogilino (the first closed institution for disabled children portrayed by BBC) and the devastating conditions of state home institutions that were projected by the world media in 2007. In the last ten years, the Bulgarian state has been undergoing a long and complicated transition from institutional to community care. A reform very often summarized behind comfortable numbers declaring the number of institutions closed and the number of children transferred into community-based care. The end of the reform is set for 2025. Until the middle of 2015, there were still 38 homes for children deprived of parental care with 901 children, 11 institutions for children with mental disabilities with 75 children, and 27 socio-medical institutions with 848 children⁴⁹. At the beginning of 2015, the very last institution for children with physical disabilities in Luovit was closed. Behind these statistics and political strategies, children's lives have been put at stake with only four exits strategies: being sent back to their biological families, being transferred to relatives, being put up for adoption or being transferred to the so-called family-type centers. Whether the alternatives function as expected and what types of risks they hide will be exposed in detail throughout Chapter VII.

a) Who will be deinstitutionalized?

For the purpose of this thesis, we will follow the deinstitutionalization of children (below the age of 18) who are orphans, abandoned and/or in need of protection from their families, and thus for whom the state needs to provide long-term care and protection (including housing, education, medical support, and social inclusion). Since the ongoing

⁴⁹ According to data of the National Agency of Social Protection (June, 2015)

deinstitutionalization reform does not include institutionalized adults, or children in corrective institutions, we will also limit the scope of the research with no consideration of these groups. The period that we will focus on is the accession to the EU and onwards, from the 1990s to 2015. The timing provided an opportunity to discuss and evaluate with our interviewees the influence of the EU prior to accession and to consider its immediate effects on Bulgarian child protection politics. The Bulgarian case is relevant in order to:

- Validate the bottom-up approach in a regional setting;
- Link the implication of Europeanization to path dependency;
- Contribute to understanding of Europeanization as a process leading to the emergence of regional level processes in a multi-level perspective and demonstrate a policy transition from communism to liberalism.

C - The comparison Bulgaria and the UK

This PhD thesis offers to compare the Europeanization of child policies for children deprived of parental care in Bulgaria and UK. Based on the premise that child protection policies are strongly embedded within national politics and culture and are organized along very different institutional models, the aim is to understand how the European dimension of child policies will affect the construction of social policies within the new member states of the union. The comparison between child protection care in Bulgaria and UK is justified on the one hand by the fact that each country represented the two main types of care – institutional and community based care respectively, and on the other hand by contrasting one old liberal member state the UK and one of the latest member of the Union and its communistic path dependency Bulgaria. In both cases, child protection used to be considered a highly sacred, private realm that is supported, subsidized, and monitored by the welfare state. Our research started with the assumption that Bulgaria is far behind the UK in terms of awareness and policy solutions to ensure protection of children deprived of parental care. Throughout our empirical research, however, we identified that despite the overall assumption that Bulgaria needs to learn from the UK and follow its policies as an example, the success of the British child care is far from being unchallenged. Analyzing the implication of the British know-how into the Bulgarian pre-existing politics of protection led to the questioning of the sustainability of the neo-liberal solutions in regard to child welfare. With this comparison we will test the extent to which child protection reforms are one of these areas where the impact

of the accession shakes not only domestic institutions, but also social-family norms. In addition we also question the possibility of change of Europeanization dynamics, from once preaching deinstitutionalization to once that lead to re-institutionalization. It also helps us question the extent to which identical policy solutions guided by the European Commission can be applied in two historically different social realities and historically different welfare heritages. In addition, it will put into question the extent to which the EU can monitor its member states and prevent the copying and pasting of models, which have already indicated drawbacks.

The field work in the UK was very targeted in the period after 1970's with less people interviewed over a short period of time including official reviewers of the British system of child protection, representatives of children trusts for abandon children, chief executives of non-governmental organizations that finance projects of deinstitutionalization worldwide, women/mothers whose children were taken away from by state authorities and put in institutional care, and social workers. The structure of the semi-directive interviews was the same as with Bulgarian actors and will be presented later in the methodology.

D - Main questions

The questions that will guide this study concern the role of the European Union in the transformation of social policies for children deprived of parental care in Bulgaria between 1989 and 2015. What determines the distribution of power among the main actors on national and international levels? What is the implication of the deinstitutionalization reform for the European Union's role in member states social policies?

Acknowledging the fact that in strict sense of the term hypotheses are normally tested to give yes-or-no result, we have three main assumptions on which our PhD journey is built around:

Hypothesis 1: Changes in child protection policies are driven within the nation state, because there are no centralized EU childcare policies, and/or such policies existed even before the creation of the EU strategy for *deinstitutionalization*. We will expect the results of this analysis to prove that European liberal childcare principles that were implied after the collapse of communism in Bulgaria have been overshadowed by the dependence of local agents and on pro-communist child protection ideologies.

Hypothesis 2: Child protection policies are formed also by external factors from the one hand through the Europeanization ideological influence, and on the other hand by foreign influences coming from international non-governmental organizations, older EU member states and religious organizations. We will question whether there is any limited Europeanization of the childcare system in Bulgaria assuming that traditional liberal welfare models for social provision are challenged by the unclear guidance of the European Union for convergence of living standards and wellbeing of children living within the Union (visible in both the UK and Bulgaria).

Hypothesis 3: We posit that the specific nature of social policies requires further evaluation of the *Europeanization* concept therefore the upheaval of a new Europeanization dynamic within the social realm of EU public policy.

This thesis will question the transition from a communist to a liberal child protection system and analyze the efficiency of a more participative system of childcare in contrast to a fully controlling state-centered system of child policies. Deinstitutionalization reform for children around the EU since 1989 has been considered the dominant common model of child protection that all new member states were conditioned to implement in their national legislative and administrative doctrines. Our analysis will question the extent to which deinstitutionalization was the only possible solution for individual states, and how the liberalization of child-centered policies impacted family-centered public policies. We are not going to question the comprehensive research done on the negative impact of institutional care over children, but the efficiency of the reform and its potential flaws in comparison to the old system of child protection that existed during communism. This research studies the process of construction and implementation of child protection for children deprived of parental care within EU member states (the UK and Bulgaria). By analyzing the mechanisms through which the European Commission guarantees successful implementation and efficiency of its soft law policies to make them largely accepted throughout the Union, our research seeks to comprehend the relationship between a shared model of child protection within the EU and member states national and historical paths.

We acknowledge that there is a public the silence around the challenges related to the construction of the EU child protection model and foreshadow the upcoming urgent necessity for construction and provision of such a model and therefore the upheaval of a new

Europeanization dynamic within the social realm of EU public policy. Through our comparison, we will follow the impact on the exchange of soft law policies among liberal democracies and determine which are the institutions necessary for the implementation of the EU child care policy (see Appendix 1 for visualization of the conceptual mind map in A4 format).

1) Corpus and Research Methodology

In order to research on various aspects of the effect of the European Union on the development of community-based services for disadvantaged children placed in large-scale state-run institutions in Bulgaria, we consulted a range of academic works which investigate in detail and from various perspectives the process of Europeanization. The academics most frequently referred to in this analysis are Featherstone and Radaelli⁵⁰, who in their work *Politics of the Europeanization* develop the conceptual framework of the subject by investigating not only how European politics is created, but also its specific impact on domestic politics. In the same book, Borzel and Risse⁵¹ further synthesize the *goodness of fit* as a factor that would determine the degree of pressure towards national actors; this subject is also analyzed by Risse, Cowels and Caporaso⁵² and Lenschow⁵³, who focus on the nature of Europeanization and domestic change. Accession dynamics (EU regulation) and their impact on candidate countries and institutions were further investigated through the findings of Schimmelfening and Sedelmeier⁵⁴, who together with Palier and Surel⁵⁵ bridge Europeanization with the theory of comparative policy; Bafoil and Beichelt⁵⁶ with the different models bearing

⁵⁰ FEATHERSTONE, K., RADAELLI, C. *The Politics of Europeanization*. 2003, Oxford: Oxford University press.

⁵¹ BÖRZEL, T., RISSE, T. Conceptualizing The Domestic Impact Of Europe. In Featherstone, K., RADAELLI, C., *Politics Of Europeanization*. 2003, Oxford: Oxford University Press, p. 2-36.

⁵² COWELS, M. G., CAPOROSO, J., RISSE, T. *Transforming Europe. Europeanization and domestic change*. 2001, Ithaca/London, Cornell University Press.

⁵³ LENSCHOW, A. Europeanization of Public Policy, In RICHARDSON, J. (ed.) *European Union. Power and Policy Making*, 2006, p.55–71 (Abingdon: Routledge).

⁵⁴ SCHIMMELFENNING, F., SEDELMEIER, U. *The Europeanization of Central and Eastern Europe*. 2005, Ithaca, NY, Cornell University Press.

⁵⁵ PALIER, B., SUREL, Y. Les «trois I» et l'analyse de l'Etat en action», *Revue française de science politique*, 2005, vol. 55, p.7-32.

⁵⁶ BAFOIL, F., BEICHEL T, T. *L'Européanisation D'Ouest en Est*, 2008, L'Harmattan.

different meanings of the Europeanization; and Bafoil⁵⁷ with his focus on transfer of institutions in Eastern Europe since 1989, comparing the Europeanization processes in Central and Western Europe. Europeanization was analyzed in different spheres, such as labour (Meardi, Delteil and Kirov.) In order to analyze the measures used in governance, implementation and evaluation of the deinstitutionalization reform we will look at the literature on public policy instruments (Lascoumes and Le Galès). The analysis of the conflicts and compromises between key stakeholders and their institutionally formatted key interests inherited from the past and formulated through cognitive normative and rhetoric frameworks will be designed following Bruno Pallier and Yves Surel's "3i" approach. Through analysis of the *ideas, instruments and institutions* of both external and internal stakeholders, we will demonstrate the conflicts between their representation and their institutionally formatted key interests inherited from the past and formulated through cognitive normative and rhetoric frameworks. As mentioned earlier, the negative effect large-scale institutions on child development will be regarded through a brief overview of major psychiatric and psychological works of the issue⁵⁸. In addition, historical development of institutional care in Bulgaria referred also to analyses by Bulgarian scholars such as Kriviradeva, Balutzova, Bogdanova and others, who investigated different aspects of the issue in Bulgaria.

As primary sources, we used data from official policy reports and analyses of the Bulgarian government, including documents from the State Agency for Child Protection (SACP) and the Ministry of Labour and Social Policy (MLSP), together with the Ministry of Education and the Ministry of Health. Legal definitions and state positions were largely taken from the National Strategy Report on Social Protection and Social Inclusion (NSRSPSI) 2008-2010 and The National Strategy for the Child 2008-2018. International policy reports relevant to our study include those of the European Commission (*Child Poverty and Wellbeing in the EU*; European Coalition for Community Living, March 2010) and of UNICEF's research center Innocenti. Policy papers of non-governmental organizations active in the field were also considered (e.g. Save the Children, Every Child, Social Activity and

⁵⁷ BAFOIL F. L'eupéanisation: héritage, résistances, mobilisation collectives et cohésion, note de lecture, in *Critique Internationale*, n 41, octobre - décembre, 2008, pp.159-169

⁵⁸ BROWNE,KD,HAMILTON-GIACHRITSIS C, JOHNSON,R (2006); BOWLBY (1951); BROWNE, K (2009), RUTTER AT AL. (2009)

Practices Institute (SAPI), National Network for Children, etc.). We also consulted UNICEF's database for various statistics on children in Bulgaria, as well as its specific programs in support of the deinstitutionalization, such as Family for Every Child, which aims to develop new social and health services and measures to supplement the ones currently running in the region. Where Bulgaria stands in human rights violation and UN convention implementation is analyzed through reports by the representative of the Bulgarian Helsinki Committee, responsible for the *Activities in Protection of the Rights of Children in Institutions* Legal Studies for the Fundamental Rights Agency.

The methodological approach of this research combines a qualitative analysis constructed on the basis of sets of semi-structured interviews conducted with fifty players that represent three different categories of actors and observers on supranational (EU), national (UK/BG), and local (NGOs, municipalities, social agents) levels involved in the process of deinstitutionalization in Bulgaria and the UK, together with quantitative data based on governmental statistics (detailed explanation of the categorization of actors is available in Figure 7.). It should be noted that our attempt to provide descriptive statistics for the number of children in institutions revealed some discrepancies in the data due to the lack of individual assessment of the children until 2010. After the Vision for deinstitutionalization was drafted, statistics for institutionalized children in Bulgaria could be found on the websites⁵⁹ of Ministry of Labour and Social Policy (MLSP) and its Agency for Social Assistance, as well as the State Agency for Child Protection (SACP) together with the National Statistical Institute (NSI). Furthermore, we referred to statistics at the European level that enable comparison between countries and regions were provided by the Eurostat⁶⁰ and reports of international organizations such as UNICEF, the World Bank, Euro Child and others. Paradoxically, we found out that the government of Bulgaria does not have reliable statistics to back up its policies and each of these institutions presents different data. As a consequence, there is a considerable discrepancy in the data provided by both national and international organizations which in turn does not allow *independent researchers to monitor and evaluate the*

⁵⁹ www.mlsp.government.bg ; <https://sacp.government.bg/>; <http://www.nsi.bg/en>

⁶⁰ <http://epp.eurostat.ec.europa.eu/portal/page/portal/eurostat/home/>

*effectiveness and efficiency of these policies with consistent methodologies*⁶¹. Hence, we identified discrepancy between state statistics showing the total number of the children in institutions in contrast to the numbers of beds available. In many official reports the differentiation is not visible. Primary data is only available upon request under the *Access to Public Information Act*, which required individual written demand to each institution distinctly at least month in advance.

Statistics on the number of children during communism were very difficult to detect due to the limited amount of written reports between 1945 and 1980s and the politics of the regime to not publish data related to mothers in prostitution, children born outside of marriage, or teenage mothers. To retrieve the documents necessary for our historical analysis, we went to the *National Archives of Bulgaria* and locally consulted the documentation. The majority of documents related to the everyday life of the institution as well as financial details were predominantly written by hand in Bulgarian language.

2) Course and specificities of the qualitative analysis

This research was guided through sets of semi-structured interviews — one of the most common types of interviews in political science — according to a previously prepared interview guide (see Appendix). Contrary to the technique of non-directive interviews, where one applies only one direct question at the beginning of the conversation, this technique encourages the researcher to accompany the reflection of the interviewees and stimulate thoughtful responses⁶².

The interview guide, or *question grid*, corresponds to specific groups of questions that are of interest to the objectives and hypotheses of the research⁶³. In order to construct our guide properly, we spent a month in the field doing direct observation of the institutions. This approach helped us perceive the multiple facets of the context and clearly identify the main problems. Since there is an open conflict between representatives of the government and members of the civil sector, and almost no negative public opinion against people from the

⁶¹ PANAYOTOVA, K. Country report on the implementation of policies supporting independent living for disabled people: Country Bulgaria. 2009, University of Leeds: Academic Network of European Disability experts (ANED).

⁶² GUY, M. Sur l'utilisation de l'entretien non directif en sociologie. *Revue française de sociologie*, 1975, XVI, p. 229-247.

⁶³ BEAUD., WEBER. *Guide de l'enquête de terrain*, Paris, 2003, La Découverte.

academic community, our role of a PhD student and interest in the project was perceived, to a great extent, positively. Being part of an academic institution outside of Bulgaria helped us gain distance from the interviewees and remain critical in the analysis. Following Beaud and Weber's recommendations, we tried to stay engaged during the interview and detached during the analysis⁶⁴. Our role as a mediator between various agents of the reform, as well as our desire to raise awareness of the obstacles to the reform in child protection contributed significantly to the cooperative spirit of the interviewees.

Since the subject of this thesis is the creation of community-based services, it was of extreme importance to us to visit and observe childcare institutions. Before the interviews, we had to obtain written permission from the directors and always be accompanied by one of the social workers employed by the respective institution. In order to preserve their privacy, the conversations inside the orphanages were not recorded. Although such restricted access influenced the interviews to a certain extent, this field experience helped us gain personal impressions of the institutions from inside and grasp the point of view of those whose interests needed to be protected through the reform. In total, we got access to five institutions – *Dom Maika i Dete* in Sofia, *Kniaginia Nadegda*⁶⁵ in Varna, *Complex Olga Scobelev* in Plovdiv, and Centre for Babies in Sofia (see Figure 7).

All interviews were face-to-face and were conducted in four major Bulgarian cities: Sofia, Varna, Ruse and Plovdiv. The cities were chosen as representative points for the development of the deinstitutionalization reform – Sofia as the capital city; Ruse as the municipality city of Mogilino village, where after a big media scandal one of the most degraded social care homes for neglected children in the country was closed; Varna as representative for a problematic region with delay in the reform process⁶⁶ where Lumos⁶⁷ — a UK non-profit organization working with children — launched a pilot project for deinstitutionalization; and Plovdiv, where the first alternative center for complex care was

⁶⁴ BEAUD.W. *Guide de l'enquête de terrain, op.cit.*

⁶⁵ Home for Medico Social Care for Children from 0-3 years old and Home for Children Deprived of Parental Care from 3-18 (only boys).

⁶⁶ There are approximately 500 children living in 9 institutions in Varna and Dobrich regions, including two institutions for babies, two for children with disabilities, two for children aged 3-7 and three for children and young people aged 7-18.

⁶⁷ Lumos is an international NGO, founded by J K Rowling, which works with children in the European Region, including Bulgaria, Moldova, and the Czech Republic.

established. Although these four cities were identified as major points of interest prior to the interviews, we remained open and willing to travel anywhere convenient for our interviewees. In other words, our choice was guided by the personal preference of the interviewee and his or her role in the process, and not by where they were employed.

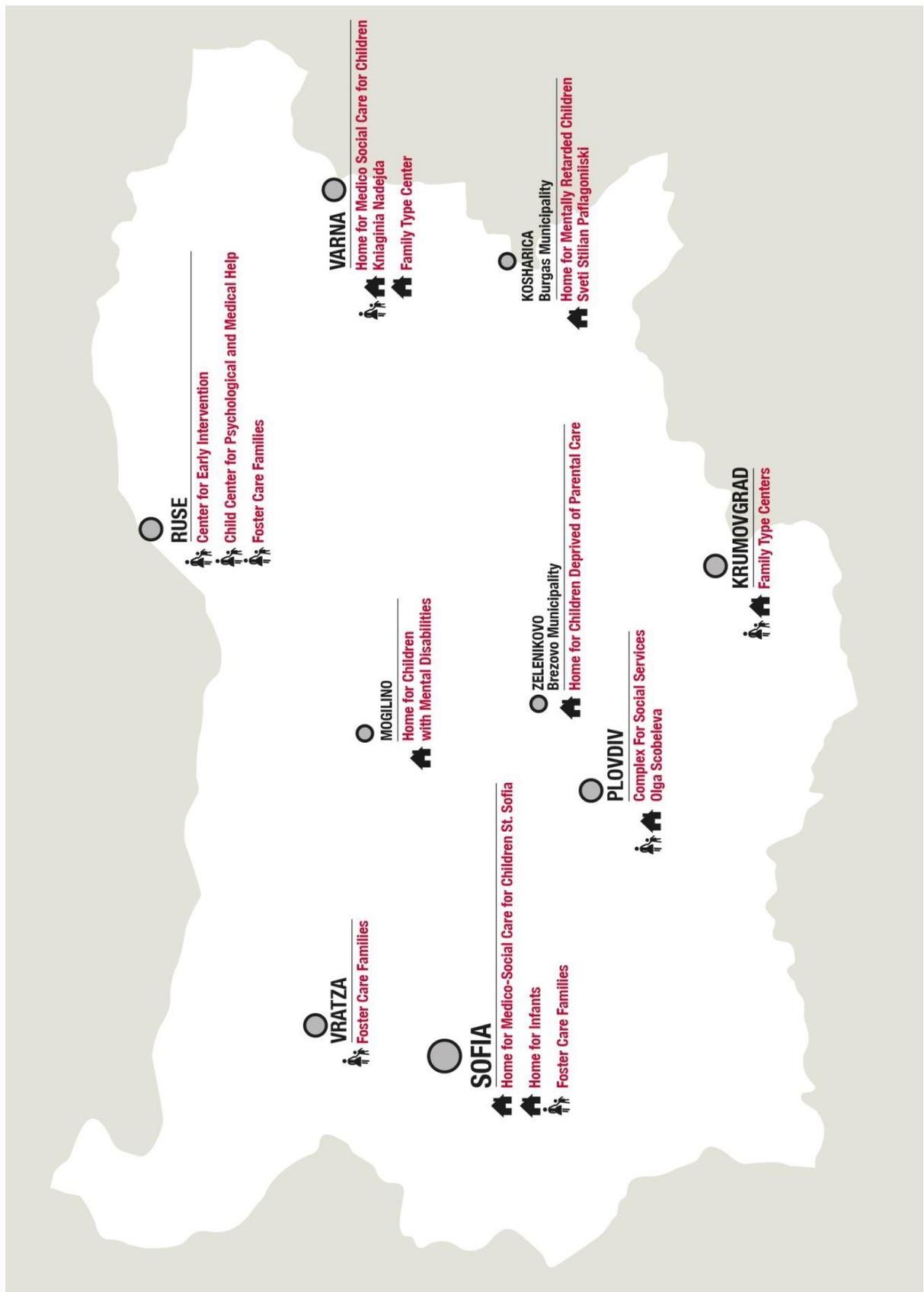


Figure 7 - Interview map of Bulgarian state driven institutions and community centers

In the UK, the time frame for research and the volume of actors interviewed was more limited, but followed the same methodological structure of semi-structured interviews and a previously written interview guide (see Appendix). During a two-week stay, we managed to meet with some of the major drivers of deinstitutionalization reform based in London and most of them have an established role in the development of the Bulgarian transition to community-based care.

Since we are analyzing the impact of EU actors over the implementation of deinstitutionalization reform, we found it important to include the points of view of EU agents whose work might have an impact on the decision-making process. These interviews took place in the European Commission in Brussels and within the Official Representations of the EU in Bulgaria and France, including EU agents of different nationalities and in different directorates-general (for instance the DG Justice, DG Employment, Social Affairs, and Inclusion) all directly involved in child protection issues. In addition, we interviewed one of the leading international NGOs dealing with child protection based in Brussels — Euro Child. With some of our interlocutors from the European administration we remained in contact, and after the interview they were regularly consulted on different ongoing issues (a detailed list of all fifty actors is presented in Appendix 2). Press articles in both English and French were also largely used as a source of information and analysis. In addition, the interviewees transmitted to the author some resources and documents they had found useful for the purposes of the research.

a) **Categorization of actors in Bulgaria**

Initially, we found it extremely difficult to categorize and divide the actors into separate groups, because of their ambiguously defined goals and unsynchronized priorities and actions. Ironically, this lack of coordination among child protection agents turns out to be one of the leading findings of our research. Once the interviews were conducted, it became clear that the most adequate way to split the actors for the analysis would be according to their role and impact on reform in the past ten years. This categorization led to the distinction of three major groups of actors: first, those on the *national level* (the Bulgarian government, ministries, state agencies); second, actors present on the *local level* (municipalities, Bulgarian

NGOs, staff of the childcare institutions, foster care families); and third, representatives of the *international level* (EU agencies, UN agencies, international NGOs). Through the prism of those groups, we aim to cover the whole spectrum of perspectives in relation to the change of focus and development of childcare services in Bulgaria within the European framework after 1989. In Figure 8 we depicted the main actors whose actions had a direct impact on the development of the deinstitutionalization reform in Bulgaria and described some of their main responsibilities.

	INSTITUTION	RESPONSIBILITIES
Int'l (EU)	EU Commission EU Structural Funds DG Justice DG Employment and Social Affairs DG Regional and Urban Policy European Expert Group on the Transition from Institutional to Community-based Care (Commission Coordinator of the Rights of the Child; Representatives of the Commission in Bulgaria, France, UK)	Lisbon Treaty- (social inclusion, fight against child poverty) Treaty on the Functioning of the European Union Horizon 2020
	UNICEF World Bank LUMOS Bulgarian Abandoned Children Trust Bulgarian Helsinki Committee Euro Child European Group on The Transition from Institutional To Community-Based Care Members	UN Convention on the Rights of the Child
NATIONAL LEVEL	National Assembly	Passes laws related to children; approves the national strategy for child protection
	Ministries of Labour and Social Policy	Implements child protection policies through administration, coordination and control
	Ministry of Healthcare	Subordinates Homes for medical and social care for children up to age 3
	Ministry of Justice	Develops national child policy
	Ministry of Education	Manages Homes for children deprived of Parental Care and Home for Mentally Impaired Children and Youth
	Inter-Ministries Working Groups	Responsible for developing the Action Plan, coordinating its implementation compiling monitoring and assessment reports
	State Agency of Child Protection	Manages, regulates, controls and monitors the measure of child protection; licenses providers of social services; controls the quality of social services; Monitors the observation of children rights in different institutions
	Agency for Social Assistance	Executive, control and regulatory functions
LOCAL LEVEL	Municipal Council	Resolves questions connected to local policies; Approves Municipal council; Establishes and closes specialized institutions
	Mayor	Since 2006, they govern the specialized institutions: Home for Children Deprived of Parental Care (3-7/7-18); Home for Children and Youth with Mental Retardation (3-18)
NON-GOV. SECTOR	National Network for Children (141 Organisations)	Develop policies for children and families, change the attitudes of the society to the rights of the child, develop a model for child participation, develop the Network, improve its capacity, promote National Network for Children's public image

Figure 8 - Schematic categorization of the actors

The snowball sampling (or chain-referral sampling) method was used in order to capture and include other activists who were relevant to the study from the point of view of the political actors themselves⁶⁸. Since the thesis focuses on the analysis of collective action in Bulgaria and the development of children’s rights since 1989, it includes historical information from both before and after the start of the accession period. The research was conducted with an active group of players, analyzing the present situation of the reform and contextualized in the specific historical backdrop of the country after the fall of communism. Aiming at a precise reconstruction of different approaches and power relations, we reached out to various actors in diverse environments and power-relation settings.



Figure 9 - Interview scheme

With some of the interviewees we met twice, and/or followed up over the phone or through the exchange of emails. For those who were not available at the time of the fieldwork, we arranged a phone call or reached out via email. The method chosen for the interviews was a semi-structured interview guide with a predefined set of questions that would be adapted according to the category of interlocutors (see Appendix 3). The choice of a comparative method requires rigor not only in the construction of comparable case studies, but also in the empirical work. It means that *the same analysis grid will be applied on the same type of fieldwork to gather the same type of data*⁶⁹. This requirement was fully respected with the preparation of identical survey guides for all regions. The number and character of questions was slightly modified depending on whether the person interviewed came from the public or private sector and on the character of his or her activity. In the Appendix 2 we put a list of

⁶⁸ GOODMAN, L.A. Goodman, L.A. Snowball sampling. *Annals of Mathematical Statistics* 1961, 32 (1): 148–170.

⁶⁹ HASSENTEUFEL, P. Les processus de mise sur agenda: sélection et construction des problèmes publics. *Informations sociales*, 2010, vol. 157, no. 1, p. 50-58.

interviews where every interview corresponds to a specific code. The code will be used throughout the thesis to link the quotations with the specific interviewee⁷⁰.

The analysis of the interviews represents the basis of the present thesis, providing insight not only into the facts (concrete action plans and strategies), but also into the stakeholders' perception and understanding of problems, solution and challenges for them and the role of the European Union. The time framework of the thesis covers the period between 2012-2016, but the actual field work took place throughout 2014 and 2015 and was then completed with updates in 2016 and 2017.

Furthermore, the author participated in multiple conferences organized by the government and the state agency of child protection, which gathered major stakeholders, and local and international reform actors.

3) **Structure of the Thesis**

Our work builds upon the research done on the impact of Europeanization, in post-communist Bulgaria and contributes with analysis of transformations of child welfare under the European Union. The empirical part of the research allowed us to explore the outcome of Europeanization as a process that is challenged and restrained by other unexpected external and internal factors. We perceived that deinstitutionalization reform triggered by the European accession disclosed the Europeanization process not as a simple copy-and-paste policy transfer from a supranational institution to a nation state, but as an active mutual interaction where international practices have been modified at the national level following the preexisting social and political norms. Understanding the process in such a manner helped us identify four main factors that influence the development of the Europeanization process in Bulgaria, which will be developed and tested in this analysis. First, we will look at the importance of history in the formation of current policies of the region and at how that affects successful implementation of different European practices of child protection after the fall of communism. Secondly, we will stress the general weakening of the state in 1989 and lack of local actors who would adapt and materialize European practices after the fall of the regime. This negative precondition will be strengthened by the lack of clear vision from the EU for the European Social Model and cohesion of child protection policies. The results of the

⁷⁰ For instance 2015/4 – means that the interview was taken in the year 2015 and the person is number 4 in the list.

collision between previously established institutional mechanisms of child support and the mechanisms through which *Acquis Communautaire* norms were adopted are important challenges to explore.

In the Chapter III and Chapter IV we endeavor to determine why and how history matters in the formation of the Bulgarian post-communist child welfare. Both chapters represent a historical view of the last hundred years of Bulgarian history with a dominant focus on the impact of state policies on child protection. Looking at the political transitions over hundred year's period also helps us to position Bulgaria within the larger historical transformations of the continent. The analysis of both chapters is based on the *3I* framework and seeks to describe the structure of state institutions throughout each period, the difference in the programs of child protection and the dynamics among the actors involved in the establishment of a system of child protection. The assumption behind the analysis of historical events is based on the reasoning that history matters when child policies pass over such deep transformations we need to look at the way policies of child protection changed over time.

In Chapter III, *Bulgarian Social Policy between the different political regimes (1919-1989)*, we will follow how child protection policies emerged in Bulgaria after its liberation from Ottoman slavery (1878-1944) and their transformation within the communist period (1944-1989). Child protection policies were central for the communist regime and their investigation is crucial for the understanding of the logic behind the massive construction of institutions for abandoned children and the reasons behind their continued existence twenty years after the fall of the Berlin Wall. In addition, we will demonstrate the way children were classified, describe the mechanisms through which the state provided protection, and discuss the role of the society.

In Chapter IV, *The Arduous Transition (1989-2010)*, we put forward the context of European conditionality in the late 1990s and the impact of the Bulgarian transition process on the development of child protection policies. The framework of the transition period of Bulgaria includes the events between 1989 - the resignation of Todor Zhivkov and the collapse of the communist state followed by the 1st democratic elections in 1990 and the start of the negotiations for accession into the EU - 10th of December 1999. With this chapter we aim to underline the importance of the transition context for the construction and implementation of child welfare reforms today. In the first part, we analyze the last years of

Zhivkov's governance and the eminent impact of the fall of the regime on the economic and political development of the country. In the second we will show the relationship between the on-going economic and political instability of the country and the increase of children in institutional care in the 1990's. In addition, we explain what are the cases which eventually led to the legal implementation of the deinstitutionalization reform under the framework of strong European accession.

In the first part of Chapter V we continue the historical overview of Bulgarian Social Policy by showing the different legal and procedural stages of the deinstitutionalization reform. Starting with the and formation of the new legislation for child protection the Bulgarian state proved its determination to follow the European requirements and move from institutional to community based care in the 2000's. Throughout the second stage of the deinstitutionalization reform, the state gradually started to reform the old institutions and the new legislation for decentralization was necessary step towards better living standards of children deprived of parental care. However, with the support of concrete case studies across the country we will show what are the challenges in front of the establishment of decentralized services and in what conditions the government votes the National Vision for Deinstitutionalization. Our empirical work with municipalities will be used for the analysis of the implementation of the Vision in order to describe to what extent there are regional differences of community based services among small and big municipalities and how do they coordinate their new responsibilities with NGO's and the directors of institutions.

Chapter VI, *The Interaction between EU Liberal Norms for child protection and member states*, is dedicated to show the most prominent European guidelines related to child protection policies and the deinstitutionalization process and analyzing some the major EU instruments of policy making such as EU Structural Funds. In addition to the legislative mechanisms, we will use our empirical analysis next to EU agents to demonstrate how EU representations among member states fit into the formation and implementation of child protection policies. The second part of the chapter will provide examples of the limits of an uncontrolled decentralization of responsibilities through analysis of one of the oldest EU member states, the UK. We will study the UK's know-how in terms of child institutions and how new member states such as Bulgaria interpret and implement it in different political and institutional contexts under the European Union. The transformation of child policies will be regarded as a major social and political transformation, which induces a power struggle on

Vera Radeva – The impact of the European Union in the transformation of child protection policies – Theses IEP de Paris – 2018 48

different levels. What is the impact of EU regulations on child protection, and how did they affect the condition and status of abandoned children in the UK and Bulgaria? Can we estimate that the greater role of the European Union in the politics of child abandonment would give greater preconditions for transfer of successful child protection policies across member states? These are the central questions that we try to answer within this chapter.

Chapter VII will describe the successful adoption of the EU *Acquis* through a crucial shift in the country's national policies in terms of child protection. By depicting the governance of the reform, we will expose the in-depth empirical analysis among the major stakeholders involved in the deinstitutionalization reform on the national/ governmental, the regional/local, the non-governmental, and the institutional staff (all fifty actors interviewed personally through semi-structured interviews between 2013 and 2015). Our aim is to investigate this colorful mix of efforts and strong determination of the newly established or internationally implemented non-governmental organizations, legal reforms, and political will to deinstitutionalize the country's orphanages. The analysis of the chosen actors is based on the implementation of the 3i approach, and therefore we compare the actors through the prism of their representation, interests, and conflicts while applying the reform in practice.

The final chapter VIII of the thesis *The UK know-how and its Implementation in Bulgaria* serves to draw essential conclusions from the analysis of the impact of the European Union over the transformation of child protection policies discovered through our study. The particularities of the liberal state in the implication of child policies will be used to investigate how the UK as one of the most active in the creation of EU decentralized norms of child protection neo-liberal state, serves as an example and policy model in post-communist Bulgaria⁷¹. By analyzing the impact of the deinstitutionalization reform in two different welfare systems- one post-soviet state that passed from centralized to market based economy Bulgaria and the UK being the liberal models of statehood we endeavor to understand to what extent the reform depends on the system that is implemented into. In the Appendix, we describe in more detail those elements of our research that could not be presented in the main body of the thesis.

⁷¹ British NGO's such as Save the Children, The Oak Foundation,

STRUCTURE OF THE THESIS

I - Introduction

II - Theoretical framework: Analyzing the Points of Transformation

Europeanization theory => outcome over child protection policies
Public policy instruments => particularity in child protection policy
Path dependency => resistance to convergence in public policies
Interests, ideas, institutions => conflicts among stakeholders

Interviews (*Exterior & Interior actors*)
Data (*Archives, Reports, Articles, Medias, Statistics*)

III - Bulgarian Social Policy between Three Different Political Regimes (1919 and 1989)

Historical periods and their impact on child protection

IV - The Arduous Transition- the path from Communist to European Child Welfare (1989-1999)

Consequences of the transition period since 1989

VI - The European Union as a Driver of the Deinstitutionalization Reform

Deinstitutionalization reform as European Union tool for change in provision of care for children deprived of parental care

VII - The Governance of the Reform in Bulgaria: Chaotic Battle of Influence

Current misfit between the intended and non-intended results of the reform in the Bulgarian context

VIII - The UK know-how and its Implementation in Bulgaria

Comparison with the UK child welfare; Re-institutionalization of children

IX - The Contested Role of the European Union

Figure 10 - Structure of the thesis

II - Theoretical Framework: Analysing the Points of Transformation

To answer one of the main questions of this PhD and understand how the products of the Europeanization process coalesce through the deinstitutionalization reform in former communist states and transform child protection policies, we will position our theoretical framework within the rich academic framework of the Europeanization studies. With this analysis we aim to contribute to the ongoing theoretical debates through a special focus on the impact of Europeanization on the transformation of pre-existing social policies related to child protection. Through our case study we question the extent to which *the advance of economic integration has greatly reduced the capacity of member States to influence the course of their own economies and realize self-defines socio-political goals*⁷². This study will not embody earlier approaches of the concepts presenting the limits of the top-down schemes and will fall among the merging consensus that the *domestic impact of Europeanization is differential*⁷³. Hence, the issue is no longer whether Europe changed child protection policies in Bulgaria, but rather in what direction according to the national interests of the country. In this section, we proceed by presenting the evolution of the concept of Europeanization increasingly engraved into the literature on European Union policy-making. Acknowledging the different theoretical stages in the development of the reform, we differentiate on the one hand the *Europeanization 1.0* as it was at the formation of the European Union, and on the other hand the *Europeanization 2.0*. as it evolves after the last accession period.

To complete the framework, we will combine the Europeanization literature with analysis of public policy instruments and their particularity in the transformation of public policies for children. Adopting Lascoumes' analysis, we will endeavor to understand what are the necessary preconditions for creation of successful public policy tools that would grasp not only the institutional, but also the value barriers in the transformation of social policy. This leads us to the introduction of Palier and Surel's *3i* approach, which served as a basis for investigation of conflicts and power struggle among external and internal stakeholders. The analysis of *new-institutionalism* as part of the *3i* theory will serve as a tool to comprehend the

⁷² SCHARPF, F. The European Social Model: Coping with the challenges of diversity, MPIFG working paper, No. 02/8, 2002

⁷³ See COWLES, CAPORASO AND RISSE 2002

transformation of child institutions throughout the deinstitutionalization reform. Finally, the concept of *path dependency* appeared relevant to understanding the strong resistance of actors to convergence in public policies in Bulgaria especially in relation to social policy.

In addition to that, we will define the international comparisons on residential care and analyze a variety of concerns expressed internationally about the effectiveness of residential care compared to alternative services. The international examination of the institutional phenomenon has been marked by vagueness in policy debates about the role and functions of state and non-state actors in the variety of child welfare services. However, internationally there is a visible *focus on the importance of the family and family-based care settings contrasted with the 'institutional' nature of residential care*⁷⁴.

A - What is Europeanization? Who is Europeanized?

Europeanization has been a widely discussed concept among Western scholars since the early 1990s, but the current multi-layered definitions are still largely contested⁷⁵. The emergence of a theoretical debate around the role of the EU in policies, politics and polity in the member states (around that period) was further invigorated by the collapse of the Soviet Union and the shift of global powers and political and social ideologies. As some scholars point out, the fact that there are different definitions of the concept could be taken as a symbol of a vibrant theoretical debate. However, the potential risks behind such multiple approaches towards a single concept could refer to (a) *concept misformation*, (b) *conceptual stretching*, (c) *degreeism*⁷⁶. Imprinted already in the linguistic meaning of the term, *the combination of the core term 'Europe' with the suffix '-ization' stands for a process of something becoming European*⁷⁷. However, the non-identified 'something' that may be Europeanized leaves it to the authors to debate the meaning, the scope, and the mechanisms through which it will

⁷⁴ KENDRICK, A., STECKLY, L., MCPHEAT, G.A. *Residential child care: learning from international comparisons*. In: Early Professional Development for Social Workers. 2011, British Association of Social Workers, Birmingham, p. 81-87.

⁷⁵ BÖRZEL, (1999; 2002), BÖRZEL and RISSE (2000), BULLER and GAMBLE (2002), DYSON and GOETZ (2002), FEATHERSTONE and KAZAMIAS (2001), LADRECH (1994), OLSEN (2002), RADAELLI (2000), RISSE ET AL. (2001)

⁷⁶ FEATHERSTONE, K. Introduction: In the name of 'Europe'. In: FEATHERSTONE, K., RADIELLI, C., eds., *The Politics of Europeanization*. Oxford: Oxford University Press, 2003, p. 2-26

⁷⁷ BEICHELT, T. Dimensions of Europeanization, In BAFOIL, F., BEICHELT, T. *L'Européanisation d'Ouest en Est*, L'Harmattan, 2008, p.32.

become European. In addition, how one defines ‘European’ and to which Europe (the East or the West/ the poor or the rich) we refer to also create a possible conflict concerning the definition of the Europeanization process. The historical evolution of the notion shows that the first Europeanization studies were formulated with a focus of institutional and political adjustments. Since the establishment of the European Commission in the 1950s, Europeanization has been defined as a process of *reorienting the direction and shape of politics to the degree that European Community’s political and economic dynamics become part of the organizational logic of national politics and policy making*⁷⁸.

The differences in definitions and meanings of the concept will not be regarded within the spectrum of this research. However, we found it important to determine which ones will be more relevant to understand the transformations of public policies within new member states, and thus eliminate what has been already identified as *not being Europeanization*. François Bafoil and Yves Surel emphasize the importance to discern the Europeanization from the processes of European integration and institutional convergence: *In fact, Europeanization is synonymous neither to the idea of institutional convergence nor to that of political integration*⁷⁹⁸⁰. Institutional convergence, as described by the authors, is related to complete harmonization of European legal prescriptions, but that in practice never happens as a unique outcome of integration, namely because of the resistance provoked by national actors. As Radaelli declares, *Europeanization leaves the issue of diversity and overall convergence open*⁸¹. Therefore, the definition should be detached from the traditional literature on European integration and mechanic convergence of institutions⁸².

Ladrech’s definition⁸³ of Europeanization as a process of downloading top-down European procedures, which influenced domestic processes and institutions, has been largely criticized for having forgotten the complex reciprocal exchanges between different levels.

⁷⁸ LADRECH, R. J. Europeanization of Domestic Politics and Institutions: The Case of France. *Journal of Common Market Studies*, op.cit.

⁷⁹ BAFOIL, F., SUREL Y. Européanisation plurielle. In L’Européanisation d’Ouest en Est, *op.cit.* p.302

⁸⁰ Unless stated otherwise, excerpts from French and Bulgarian texts cited in this work have been translated to English by the author of the dissertation.

⁸¹ RADAELLI, C.M. The Open Method of Co-ordination: A new Governance Architecture for the European Union? Research Report, 2003, Stockholm, Swedish Institute for European Policy Studies.

⁸² BAFOIL, F., SUREL Y. Européanisation plurielle. In L’Européanisation d’Ouest en Est, *op.cit.*p.306

⁸³ LADRECH, L. Europeanization of Domestic Politics and Institution: The Case of France. *Op.cit.*

Therefore, we will endeavor to analyze other definitions of the process that would provide greater understanding of the multi-layered implications of Europeanization in regard to childcare policies. The transfer of childcare models across borders and regardless of welfare regimes foreshadows the mutual interaction between the EU and member states⁸⁴.

The literature review from the year 2000 refers predominantly to the so-called top-down Europeanization, which has passed through different stages, but is mostly understood as a process of accumulation of policy competences at the EU level. Published almost at the same time, the works of Cowles and Risse⁸⁵ (2001) and Featherstone and Radaelli⁸⁶ (2003) encourage new understanding of the process, which aims to differentiate the concept from the literature on European Integration. In the literature the expression is *commonly used to refer to effect and adaptation caused by EU pressures on either domestic policies or on domestic systems of governance and institutional actors, including central government, subnational authorities, interest groups and policy networks*⁸⁷. Radaelli's definition has been widely cited as the most complete and consensual approach of the concept; it describes Europeanization as:

*A process that consists of construction, diffusion, and institutionalization of formal and informal rules, procedures, policy paradigms, styles, 'ways of doing things', and shared beliefs and norms which are first defined and consolidated in the EU policy process and then incorporated in the logic of domestic (national and sub-national) discourse, identities, political structures, and public policies.*⁸⁸

In addition to the above typology, Bulmer defines Europeanization as *the transfer from Europe to other jurisdictions of policy, institutional arrangements, rules, beliefs, or norms, on the one hand; and building European capacity, on the other hand, combining Radaelli's*

⁸⁴ FEATHERSTONE, K. Introduction: In the name of Europe. In: Featherstone, K. & Radielli, C., eds., *The Politics of Europeanization*. Oxford: Oxford University Press, 2003, p.2-26.

⁸⁵ COWLES, G., CAPORASO, J., RISSE-KAPPEN T., *Transforming Europe: Europeanization and Domestic change, op.cit.*

⁸⁶ RADAELLI, C.M. The Europeanization of public policy, In FEATHERSTONE K., RADAELLI C.M., *The politics of Europeanization*, Oxford, Oxford university press, 2003, p.37.

⁸⁷ CALLANAN, M. Domestic governance arrangement and Europeanization: The case of central-local relations in England, Ireland and Denmark. *Comparative European Politics*, 2012, vol. 10 (4), p. 399-420.

⁸⁸*Ibid.* p. 30

definition and Olsen's typology⁸⁹. Palier and Surel on their side propose an even more dynamic view of the process as *all processes of institutional, political and ideological adjustments related to the European development*⁹⁰. Hence, in contrast to previous definitions of the concept, which have mostly underscored the administrative pressures coming from the EU, this new wave of conceptualization defines Europeanization as a process, and not as an outcome⁹¹.

To summarize, the most important outcome of the evolution of the concept is the change in dynamics and the inclusion of many other cognitive and informal aspects of the transformation which were not taken into consideration before. The term Europeanization is used predominantly to illustrate the impact of the EU on its member states and candidate countries. The definition of the concept by scholars has evolved to describe a two-way relationship, and there is a consensus on the need to research further the force of what is *coming down* from the EU and how it *fits* into – or challenges – the domestic status quo⁹². In addition, most definitions of the concept have *shared focus on transformation or adaptive processes affecting the domestic level, including intergovernmental relations*⁹³. Thus, there is no ideal end point of Europeanization of the public sphere but in order to analyze the change we need to follow and measure the process over time and in comparison to other actors and their national transformations.

1) The Europeanization and the public sphere

European public sphere is a term that also deserves to be defined in order to understand the transition from one kind of social policy to another within the European Union. Since child protection policies fall within the public policy sphere we will point on the relationship between the national public policies and the European public policies within the socio

⁸⁹ BULMER, S. Theorizing Europeanization. In GRAZIANO, P. and VINK M.P. (eds.) *Europeanization – New Research Agendas*, Basingstoke and New York: Palgrave Macmillan, 2007, p. 46–58.

⁹⁰ PALIER, B., SUREL.(dir.) *L'Europe en action. L'europeanisation dans une perspective comparée*, Le Harmattan, 2007

⁹¹ EXADAKTYLOS, RADAELLI, T. C. Research design in European studies: The Case of Europeanization' *Journal of common Market Studies*, JCMS 2009 Volume 47. Number 3.p. 507-530.

⁹² BACHE, I. *Europeanization and Multi-level Governance: Cohesion Policy in the European Union and Britain*, 2008, Rowan & Littlefield, New York.

⁹³ CALLANAN, M. Domestic governance arrangement and Europeanization: The case of central-local relations in England, Ireland and Denmark, *op.cit.*

constructivist traditions. What is more in both the English and the Bulgarian case the media played a significant role in the creation of a public awareness of a social issue – the wellbeing of vulnerable children deprived of family support. Since Habermas described (1962) public sphere as arena for *the perception, identification, and treatment of problems affecting the whole society*⁹⁴ definitions of the concept are divided and emerging. What characterizes the European public sphere according to Heikkila, however is the idea that there is a discrepancy between the normative and the empirical approaches towards the concept. On the one hand, the normative in which one questions under what circumstances the European public sphere should and could exist and on the other hand, the empirical one, which investigates if the European public sphere actually exists and through what tools it is manifested⁹⁵. According to the realists such as T. Risse, M. Van de Steeg, the European public sphere should not be regarded apart from the national public sphere. Precisely this process within the national sphere is called Europeanization⁹⁶. Jurgen Gerhards defines *two criteria for such an Europeanization of national public spheres: an (increased) proportion of coverage of European themes and actors, and, on the other, the evaluation of these themes and actors from a perspective that extends beyond their one country and its interests. The latter has been critiqued for being restrictive*⁹⁷. If we consider that the Europeanization is a process that develops within the national public spheres it should be also pointed that in order to exist it uses the national media infrastructure.

2) New institutionalism and the Europeanization research

The mechanisms of Europeanization include hard law and soft law instruments. Hard law instruments appear in the form of directives enforceable by ruling of the European Court of Justice. On the contrary, peer reviews or the ‘open methods of coordination’ measures represent soft law mechanisms which have no legal pressure on member states. From a constructivist perspective, *non-compulsory EU initiatives can alter the beliefs and*

⁹⁴ HABERMAS, J. *The Structural Transformation of the Public Sphere. An inquiry into a Category of Bourgeois Society*, 1991, Hermann Luchterhand Verlag, Neuwied. p.5

⁹⁵ HEIKKILA, H. *Beyond ‘In so far as Questions: Contingent Social Imaginaries of the European Public Sphere.*// *European Journal of Communication*, 2007, vol.22, No 4, p.421-427

⁹⁶ DE VREESE, C. *The EU as a public sphere.*// *Living Reviews in European Governance* (online). 2007de, vol. 2, No 3 <http://www.europeangovernance-livingreviews.org/Articles/lreg-2007-3/download/lreg-2007-3BW.pdf>

⁹⁷ DE VREESE, C. *op.cit.*

*expectations of domestic actors and thus change institutional arrangements*⁹⁸. At the same time, however, Knill and Lehmkuhl⁹⁹ analyze the process at domestic and argue that *framing mechanisms are unlikely to have a significant impact where existing domestic institutional arrangements or belief systems act as a constraint to reforms*¹⁰⁰. There is no consensus among scholars on the influence of Europeanization on domestic factors, and it has been argued that *the effects are typically uneven and are mediated by domestic factors*¹⁰¹. In order to analyze the effects on adaptation pressures in relation to Bulgarian child protection system, we need to look at one more aspect of the Europeanization literature based on the new institutionalisms and path dependency. According to Bulmer, *an awareness of new institutionalism is indispensable for understanding how Europeanization is 'theorized.'*¹⁰² Being at the center of domestic policy and governance, both national and supranational institutions need to be evaluated to determine to what extent there is a re-distribution of power and how domestic traditions and values interfere with the transformation of institutions due to the change in the governance style provided by the EU. Europeanization literature distinguishes between several approaches to institutionalism, such as *rational choice, historical and sociological institutionalisms and particularly on the claims of the logic of consequentiality versus the logic of appropriateness*¹⁰³. The multi-level governance through EU cohesion policy provides contradictory views on the ways Europeanization is conceived by local governments. Proponents of rational choice approach *emphasize partnership as a mechanism for creating new opportunities for strategic interaction and thus suggest a zero sum power distribution*¹⁰⁴ between domestic actors as a result of EU membership. Alternatively, sociological approaches suggest that *partnership provides the potential for deeper transformation of actors' behavior and preferences*¹⁰⁵. Thus, Beate Kohler-Koch and

⁹⁸ *Ibid.* p.400

⁹⁹ KNILL, C., LEHMKUHL, D. The national impact of European Union regulatory policy: Three Europeanization mechanisms. *European Journal of Political Research*, 2002, Vol.41 (2), p. 255-280.

¹⁰⁰ CALLANAN, M. Domestic governance arrangement and Europeanization: The case of central-local relations in England, Ireland and Denmark, *op.cit.*

¹⁰¹ *Ibid.*,p.402

¹⁰² BULMER, S. Theorizing Europeanization. In: GRAZIANO, P., Vink, M.P. (eds.). *op.cit.* p. 48

¹⁰³ BACHE, I. *Europeanization and Multi-level Governance: Cohesion Policy in the European Union and Britain*, 2008, *op.cit.* p. 12

¹⁰⁴ *Ibid.* p.12

¹⁰⁵ *Ibid.*

her colleagues confirm the process as one that creates problem solving through socialization and ascribe multi-level governance rather than imposed decision-making style¹⁰⁶. For the purpose of our study, we will need to consider one more key component of the Europeanization research related to historical institutionalism¹⁰⁷.

The existing research and analysis on sub-national engagement within the EU has focused on EU level channels of influence, which Jeffery¹⁰⁸ characterizes as adjuncts to 'intra-state' channels. Some argue that intergovernmental relations and the way local government interacts with other levels is 'path dependent' and evolves according to different historical contexts, and is therefore likely to remain embedded in national traditions that pre-date the European integration project¹⁰⁹. National governments remain the most important actors for subnational authorities and the ability of the EU to influence intergovernmental relations is limited¹¹⁰.

Two distinct arguments have been advanced concerning the Europeanization of local government. The first is reflected by multi-level governance scholars who claim that the development of EU decision-making has disturbed traditional domestic patterns of intergovernmental relations, with regions and local authorities seeking out direct contact with the EU institutions and trying to influence EU decisions that may have impact on them. In particular, it is argued that EU cohesion policy has opened up a new arena for direct dialogue between subnational, national and supranational actors, challenging centralized decision-making within member states¹¹¹.

¹⁰⁶ THIELEMANN, E. Institutional Change and European Governance: An Analysis of Partnership. *Current Politics and Economics of Europe*, 1999, Vol., 9 (2), p. 181-197

¹⁰⁷ BACHE, I. *Europeanization and Multi-level Governance: Cohesion Policy in the European Union and Britain*, 2008, *op.cit.* p. 12

¹⁰⁸ JEFFERRY, C. L'émergence d'une gouvernance multi-niveaux dans l'Union Européenne: une approche des politiques nationales. *Politique et Management Public*, 1997, 15-3, p. 211-231

¹⁰⁹ GOLDSMITH, M. Twenty Years On: The Europeanization of Local Government. In *The Road to Europe: Main Street or Backward Alley for Local Governments in Europe?* VAN BEVER, E. REYNAERT, H., STEYVERS, K (eds.). 2011, p.31-49. Brugge: Vanden Broele.

¹¹⁰ *Ibid.*

¹¹¹ HOOGHE, L., MARKS, G.. *Multilevel Governance and European Integration*. 2001, Boulder: Rowman & Little-field

Borzel and Rise categorized the outcome of Europeanization pressures for domestic change and distinguished three different types of domestic responses to the EU: *transformation, accommodation and absorption*.

B - Processes of Europeanization

In order to analyze the impact of the Europeanization reform in the formation of child protection policies we will follow the historical development of the concept and test the relevance of previous definitions to the context of child protection.

1) Top-down or bottom-up interaction between the EU and member states?

With every new discussion of the subject, scholars note the need for a variety of approaches towards Europeanization that could embrace the dual interaction between the EU and member states, and not just the impact of the EU on domestic changes¹¹². The first definitions of the process linked the European dynamics with the transformation of domestic policy norms univocally had a top-down characteristic, stating that *political and economic dynamics become part of the organizational logic of national politics and policy making*¹¹³. Top-down Europeanization debates were closely linked to the enlargement process of the Union, often identified as one of the most controversial actions of the EU foreign policy as a whole. Driven from the assumption that *Europe matters*¹¹⁴, Europeanization is perceived as a top-down policy, which reshapes national policies according to the European Commission. Lawton¹¹⁵, on the other hand, describes Europeanization as the *de jure* transfer of sovereignty to the EU level, as opposed to the *de facto* sharing of power between member states and the European Union, also known as the *Europefication*. According to that definition *Europeanization is the independent variable which impacts upon domestic processes, policies, institutions*¹¹⁶. Thus, the process of Europeanization opposes, to a certain extent,

¹¹² FEATHERSTONE, K. Introduction in the Name of Europe. *op.cit.*

¹¹³ LADRECH, R. *The Europeanization of Domestic Politics and institutions, op.cit.*

¹¹⁴ PALIER, B., SUREL, P. *L'Europe en action. L'eupéanisation dans une perspective comparée*, 2007, L'Harmattan.

¹¹⁵ LAWTON, T. Governing the Skies: Conditions for the Europeanisation of airline policy, *Journal of Public Policy*, 1999, 19(1), p. 91-112.

¹¹⁶ BÖRZEL, T., RISSE, T. *When Europe hits home: Europeanization and Domestic change*. European integration online papers, 2000.

eminently domestic policies and those who are influenced by European policymaking. Borzel¹¹⁷ in particular puts more emphasis on the transfer of power from national to the European level and defines Europeanization as *a process by which domestic policy areas become increasingly subject to European policy making, and as a penetration of European dimension in national arenas of politics and policy*¹¹⁸. In their work, Borzel and Risse introduce the concept of misfit between the EU policies, practices and institutions and the state-centric ones, and conceptualize policy misfit and institutional misfit as the most possible ones, stating that *European policies can challenge national policy goals, regulatory standards, the instruments used to achieve policy goals (...) institutional misfit challenges domestic rules and procedures and collective understanding attached to them*¹¹⁹. Later in the thesis we will show how in the case of candidate states, as it was the case of Bulgaria prior to 2007, the policy misfit can be visible already within the EU requirements for accession and domestic policies. We will also claim that formal institutional misfit was also visible in the Bulgarian case and that it was exemplified through the lack of sufficient institutional and administrative capacity of the country to successfully negotiate the accession requirements, combined with informal institutional misfit in relation to child protection policies for abandoned children. As a result, there was a clash between the existing deep-seated domestic norms of care and the EU guidelines for creation of community-based care.

2) Outcomes of Europeanization

More recent literature testimonies that the evaluation of the top-down impact on nation states gives limited understanding of the reconfiguration of identities and *runs the danger of excluding those political and social developments that the EU and its actors cannot, or do not intend to, change*¹²⁰. As we show in our study, especially in the social policy sphere the transformation cannot be reduced only to adoption of administrative norms, and thus a more complex definition is necessary to understand the extent of Europeanization. We need to put more emphasis on the specific impact of the EU structures on domestic transformations and

¹¹⁷ BÖRZEL, T. A. Towards Convergence in Europe? Institutional Adaptation to Europeanization in Germany and Spain. *Journal of Common Market Studies* 37 (4), 1999, p. 573-596.

¹¹⁸ *Ibis*.

¹¹⁹ BORZEL, T. A. Deep impact? Europeanization and Eastern Enlargement, IN KUTTER, A. TRAPPMAN, V. (Hrsg), 2006, Das Erbe des Beitritts, Nomos.

¹²⁰ BAFOIL, F., BEICHEL, T. L'Européanisation D'Ouest en Est. 2008, L'Harmattan, p.18

on how national actors embody EU reforms. This is precisely the biggest downfall of the top-down models¹²¹. Francois Bafoil and Yves Surel underscore that domestic actors cannot anymore resist adaptation of the European dimension, and thus the question is not anymore *Does Europe matter?* but *How does it matter?*¹²²

Since this dissertation analyzes the interaction among actors and regional stakeholders, and not only the mechanisms that result from the integration of European guidelines for child protection, the model that better suits our objectives is the bottom-up perspective. As described by Radaelli and Pasquier: *The bottom-up approach starts and finishes at the level of domestic actors. The idea is to start from actors, problems, resources, and discourses at the domestic level at time zero (a policy system at a given time) and check if, when and how the EU provides a change in any of the main components of the system interactions.*¹²³ Therefore, in contrast to first generation definitions, we observe a *tangible shift in the meaning of the term Europeanization from independent to dependent variable*, where actors (be it international, national or subnational) can model and interact with the causal mechanisms proposed by the top-down models. It is a model that provides greater spectrum for capturing the complexity of changes that result from EU integration.

Also defined by Beichelt as the *transformation model, in which the domestic system is in continual process of transformation via domestic and international processes*¹²⁴, it better reflects the purpose of this thesis and foreshadows the dual process of transformation from both domestic and international actors. Beichelt's models, which criticize Borzel's identification of degrees of domestic change, tend to summarize the different meanings of the Europeanization process over nation states through the *misfit model, the macro model, and the Europeanization as a transformation model.*¹²⁵ The three models bear different implications of the Europeanization process and will be of a crucial importance for our comparison. Hence,

¹²¹ GRAZIANO, P., VINK, M.P. *Europeanization: New Research Agendas*. Basingstoke, Palgrave Macmillan; 2007

RADAELLI, C., ZEITLIN, J., POCHET, P. (eds) *The Open Method of Coordination in Action: the European Employment strategy and social inclusion strategy*, 2005, Brussels, PIE Peter Lang

¹²² BAFOIL, F., SUREL Y. Européanisation plurielle. In L'Européanisation d'Ouest en Est, *op.cit.* p.308

¹²³ RADAELLI, C., PASQUIER, R. Conceptual Lenses. In GRAZIANO, P., VINK, M. (eds), *Europeanization: New Research Agendas*, 35-45. 2007, Houndmills and New York: Palgrave Macmillan.

¹²⁴ BEICHELT, T. Dimensions of Europeanization, *op.cit.*,p.39.

¹²⁵ *Ibid.*,p.32.

the model that will best fits within the analysis of child protection policies will be the transformation model as explained below.

a) The misfit model (top-down model)

The misfit hypothesis exemplifies a domestic change as response to Europeanization, which occurs when there is some degree of misfit, or incompatibility, between European-level processes, policies and institutions on the one hand, and *domestic-level processes, policies, and institutions on the other*¹²⁶. Following rational institutionalism, the top-down model emphasizes that *Europeanization causes the assimilation of certain 'outside' policy processes but not without deviating at least in part from existing policies*¹²⁷. The process of adoption and then adaptation of EU rules depends to a great extent on the level of *openness or closure of institutions (an institutional fit or 'misfit') or in terms of capacity of certain groups to thwart or facilitate any process of adaptation*¹²⁸.

b) The macro-process model of Europeanization

As a part of sociological institutionalism, this model perceives the impact of the Europeanization process through the lens of a *socialization and collective learning process resulting in norm internalization and the development of new identities*¹²⁹. The assumption behind this process is that the interaction between the European Union and nation states is not linear but mutual, and that cognitive components of policy making are equally important. Radealli targets these components in addition to Ladrech's definition, including in the definition of Europeanization all *formal and informal procedures as well as shared beliefs and norms*¹³⁰. National actors in this framework are considered to be not only part of domestic policies, but also important figures on the European arena.

¹²⁶ BÖRZEL, T, RISSE, T. When Europe Hits Home: Europeanization and Domestic Change. *European Integration online Papers (EIoP)* 2000, Vol. 4, N°15

¹²⁷ CERAMI, STANESCU, (2009), RISSE (2001) and BÖRZEL (2005)

¹²⁸ BAFOIL F. *Central and Eastern Europe. Europeanization and Social Change. op.cit.* .p.9

¹²⁹ BÖRZEL, T, RISSE, T. When Europe Hits Home: Europeanization and Domestic Change. *op.cit.*

¹³⁰ BEICHEL, T. *Dimensions of Europeanization, op.cit.* . p.44

c) Europeanization as a transformation

The *Europeanization as a transformation* model describes the transformation of policies through the influence of the EU-induced adaptation process and the *importance of domestic factors for domestic change*¹³¹. In contrast to the top-down model and the macro-model, this model portrays the nature of changes in post-communist societies (such as Bulgaria), which were faced with the dual challenges of transition and accession, and in which the pro-socialist legacies and interest groups strongly influenced the result of European regulations¹³². Acknowledging the complexity of the domestic changes as a phenomenon that would hardly be explained by a single model, this paper applies the Europeanization as a transformation model in its quest to analyze the role of the Europeanization process in the formation of social policy in Bulgaria.

As we demonstrate later in the thesis, the *Europeanization* process happens differently at different stages of the development of a country's institutions. The Bulgarian child protection situation seems to destabilize the pre-existing scenarios for Europeanization of new member states, since very few of the pre-established necessary ingredients for it (such as consistency of EU legislation, states' individual participation in the setting of EU standards, or strong EU initiatives among non-EU members) held true. And yet, substantial Europeanization occurred in different periods of time, and as a result, contributed to new legislation that the country did not possess itself, invented new policy tools, and formed new stakeholders in cooperation with other international organizations. The central theoretical claim of this analysis is that the Europeanization process occurs through different means, but only when there is internal accommodation for it there are long-lasting effects.

In order to contribute to the existing theoretical and public debates concerning the impact of the Europeanization in policies related to child abandonment, the theoretical spectrum of this research spreads among two main axes — the shifting role of the European Union in development of coherent European policies for child welfare and the changing role of the state in the formation of policies for abandoned children. Furthermore, this research acknowledges the need to investigate the Europeanization process in the context of the

¹³¹ *Idem*, p.33

¹³² HUGHES,J.,SASSE,G.,GORDON,C. *Europeanization and regionalization in the EU's enlargement to central and Eastern Europe*. 2004, Houndsmills; Palgrave.

historical and cultural idiosyncrasies of Eastern European countries as a complement to the existing wealth of analysis pertaining to Western Europe¹³³. This thesis also falls within the theoretical debates on different models of transfer of European conditionality from old to new member states, not as a linear process of exchange of the *Acquis Communautaire*, but as a series of complex transitions¹³⁴. Through theoretical and empirical research, this study aims to establish if the European integration requirements in the social sphere were appropriate and justifiable, and if Bulgaria, as an aspiring accession country, possessed the capacity to adapt them accordingly. The object of the study is thus an examination of an EU member state's adaptation to new political, legal, and financial mechanisms for social care that result from the development of EU policies of child protection (such as the *Common European Guidelines on the Transition from Institutional to Community-based Care*). We stipulate that the Europeanization process is neither top-down, nor bottom-up, but constitutes an ongoing process that needs to be analyzed with a multi-layered perspective. Within the Bulgarian case, the main concern is to grasp how the bottom-up dynamics and reactions to the EU legislation fit or misfit within the national context of public policy. This is conveyed by looking at actions, strategies and cognitive responses of regional decision-makers in reaction to imposed EU policies. Our study looks not only at the concrete results and the convergence of the EU policies and practices in the field of child protection, but also at the process and its social impact. We investigate the European resources within their different dimensions — material (EU Funds) and institutional or cognitive (EU strategies and policies) — made available to the regional executives. The impact of these resources will explain why in some regions the reform succeeds, while it fails in others.

Here are some main constraints of the misfit model and the macro-model, which we consider important for the scope of our research. On the one hand, if one adopts the theory of rational institutionalism in the Bulgarian context in order to see how the conflict between European and domestic policies affects political actors, we should assume that the Europeanization process provokes the redistribution of power and thus leads to the

¹³³ COWELS, G., CAPORASO, M., RISSE, T. Transforming Europe: Europeanization and domestic change. *Op.cit.*.

¹³⁴ SAURUGGER, S., SUREL, Y. L'eupéanisation comme processus de transfert de politique publique. *Revue internationale de politique comparée*, 2006. vol. 13, (2), p. 179-211.

empowerment of actors.¹³⁵ However, our empirical research (described in Chapters IV and V) brings to the surface some issues (such as corruption, institutional rigidity, and economic instability and path dependency) that question the extent to which institutions and actors could immediately benefit from the liberal transition. On the other hand, mechanisms of social institutionalism do not yet fit the Bulgarian political platform, where the imbalance between European and local actors is still very visible. We assume that social learning is a necessary stage of the European integration process, which Bulgaria wants to take, but has not yet taken because of the heavy communist heritage, which still dominates the cognitive components of policy making (shown in Chapter III). The accession period in Bulgaria in relation to child protection policies influences not only how domestic institutions function but aims to transform the ideologies behind family norms and beliefs through the establishment of a new system of child protection. The results of this transformation will be largely analyzed in this dissertation.

The comparative analysis of childcare practices represents a difficult challenge due to the precarious nature of such social policy and its dependence on historical circumstances, social paths, and welfare regimes among others. While finding one unified child protection formula for all countries of the European Union is an unlikely scenario, it is nevertheless beneficial to analyze the Europeanization processes as a fundamental precondition for transformation of childcare, and to explore ways for improving the interaction between European and domestic political players. Throughout the research, we will explore to what extent the implied models of Europeanization prove relevant in different moments of social development and if there is a difference between liberal states and post-communist states, who were confronted with the dual challenge of transition and accession.

C - The abandonment of children

Abandonment of children and the existence of orphanages as institutions for care and support of children in need did not begin their existence under Communism. The share of responsibilities among state, family and society has always been debatable and caused political upheaval. It is also important to differentiate the ways through which the state

¹³⁵BÖRZEL, T, RISSE, T. When Europe Hits Home: Europeanization and Domestic Change. *op.cit.*

interprets the act of abandonment vis-a-vis children and families as either a moral act or a criminal act.

1) A Historical overview

Historical evidences from the literature¹³⁶ suggest that there is a visible lack of guidance and definitions of what defines *abandoned children* and what measures should be taken by the state and the families. What most of them identified in common, however, is the fact that the phenomenon of abandonment is correlated to religion and the development of the welfare state with its social and cultural specificities¹³⁷. This research will not cover the history of family policies and childhood perception in Europe. However, we find it important to mention that, according to Jack Goody¹³⁸ there are significant written proofs (from the Classical Periods in ancient Greek and ancient Rome) that *children were subjected to huge ignorance and abandonment in particular has been considered a normal procedure through which the state controls the number of people born and their gender, but also where people had freedom to get rid of their children based on personal will*¹³⁹. In the Middle Ages, poverty was considered a sufficient reason for abandonment, and the Church was the institution which took care of the children and conducted adoption procedures, so that they could continue to be the only recipients of an inheritance¹⁴⁰ (if applicable). The large spread of Christianity in Europe had an important role in the protection and even registration of children as individual social units. Evidences suggest that religious rules were dominant factor over state regulations in terms of the 1st child protection measures spread among Europeans and it was not until the 16th century that children's lives started to be regarded as valuable, and therefore it became publicly accepted obligation of parents to protect their children¹⁴¹. As a result, abandonment was judged as a crime depending largely on the family status of the parents (married or not) and not on the basis of biological relationship. This in practice meant

¹³⁶ ROBINS, J. *The lost children: a study of charity children in Ireland 1700-1900*. 1980, Dublin

¹³⁷ BOGDANOVA, M. *The abandonment of children- prevention and alternatives*. 2009, Sofia, Avangard Prima, p.435.

¹³⁸ Goody conducted a comprehensive comparative historical survey on the evolution of the European family in comparison to the sub-Saharan one in 1983

¹³⁹ GOODY, J. *The development of the Family and Marriage in Europe*. Cambridge: 1983, Cambridge university press.

¹⁴⁰ *Ibid.* p.30

¹⁴¹ BOGDANOVA, M. *The abandonment of children- prevention and alternatives*. *op.cit.*, p.435

that the traditional responsibility of the father vis-a-vis its biological, but illegitimate children changed. Since the beginning of the 17th century, it was considered that if the father is married and abandons the child, it will be the legal family of the father that will take the responsibility. As a result, orphanages were created massively across Europe.

Despite having Christianity as a common denominator, differences between the way Catholics and Protestants treated mothers and abandoned children persisted. In the Protestant part of the world, responsibility was still in demand from the fathers, which automatically decreased the number of abandoned children¹⁴². In France, even after the French Revolution, there was no real differentiation between legally recognized children and illegitimate ones. The different approach towards children continued throughout the 18th century, when Protestants pled against institutionalization of illegitimate children and the legal recognition of children was directly linked to marriage. Women who gave birth without being married, or from unknown fathers, were considered sinful, and thus their children were forcefully taken away and put in institutions. It is in 1556 that women in France become obliged to register their pregnancy and specify the name of the father so that responsibility was automatically demanded. Those who failed to follow these rules feared the death penalty until 1803, when such laws were removed from French legislation¹⁴³. What became clear at that time was that if the state tolerates children outside of marriage, then there is an increase in child mortality rates. In the late 19th century, the state started to share the responsibility of the Church vis-a-vis the abandoned children and financed homes for legally abandoned children (¾ of the children were of married parents and 1/3 of unknown fathers). Since then, most of the financial support came from charity organizations and eventually from municipality budgets, and thus the role of the Church as it was at the beginning of the century decreased. *It is interesting to notice that in England in the 18th century Queen Elizabeth, King George II, and King George III introduced laws which allowed any judge to demand prison for presupposed fathers if an unmarried woman gets pregnant. The alternative is to convince the mother to abort or the father to disappear, so that the church could continue to pay her back the social*

¹⁴² *Ibid.*p.32

¹⁴³ *Ibid.* p.31

*aid*¹⁴⁴. As a result, however, these policies stimulated fake testimonials on behalf of the parents and relationships outside of marriage.

Acknowledging this part of the historical development of the reasoning behind child protection is significant, since it shows that in practice, if the government continued to support children who were born illegitimate with social aid, it could on the one hand stimulate uncontrolled sexual relationships (as if it is the state that should pay for the irresponsibility of the parents), and on the other hand the non-provision of this aid could stimulate abortions and child mortality¹⁴⁵. Historically, child abandonment could be defined as different actions by the parents, including infanticide, abortion, and rejection of parental rights. Infanticide, or intentional killing of infants, most often by the mother, existed on every continent and social category, but is a rather usual practice nowadays, and it is illegal according to many national legal codes and religious doctrines. Even though this study will not deal with the moral and social dilemmas concerning abortion, it is important to ask if abortion could not be identified as a form of abandonment.

This brief historical view of the concept of abandonment is important for our analysis, since it gives us an indication of how complex and resistant the relationship between state, society, and children has been over the years. Dependent on political and social metamorphoses, the necessity of child protection policies persists and shakes the power struggle between the actors involved. In Chapters VII and VIII, we demonstrate how similar the reasons for abandonment are in Bulgaria and the UK today, including poverty, lack of education, early sexual initiation, and lack of psychological and financial support to the parents before and after birth. Abandonment as an act has always existed, and it is too optimistic to think that it will disappear. However, what our research demonstrates is that this remains one of the major reasons behind the existence of institutional care in Europe, and until the EU creates measures, which could preventively work on this matter, the need for these institutions in society will continue, since in both countries, the demand for places increases while places decrease.

¹⁴⁴ *Ibid.* p.32

¹⁴⁵ BOGDANOVA, M. *The abandonment of children- prevention and alternatives.* *op.cit.*p.31

2) The link of abandonment and institutionalization

The questions that we are trying to answer here are linked to the fact that today women still abandon newborn infants and older babies without officially rejecting their parental rights and giving them the chance to be adopted and taken care of properly. *Hard statistics are difficult to come by*¹⁴⁶, but the number of orphaned infants available for adoption has risen by as much as 20 percent in Italy and Greece in the last two years (2010-2012), according to Caritas and SOS Villages. The agencies say as many as 1,200 babies and young children have been abandoned in Greece in the last year alone, and nearly 750 have been abandoned in Italy, up from 400 the year before (2011)¹⁴⁷. Despite the fact that child abandonment is officially considered a crime punishable with prison and heavy fines, many countries overlook these crimes if the child is left in a secure place, like a church or a hospital. Eleven out of 27 countries in the EU allow the use of baby hatches, and make special concessions for anyone known to leave an infant there because the person is not abandoning the child on the streets¹⁴⁸. This, despite the fact that in 2012 the United Nations Convention on the Rights of the Child pled for the abolition of this practice of abandonment, declaring that by continuing to support and neglect this problem, states deny one of the main rights of the child: to know his parents and biological roots. *Baby boxes do not operate in the best interest of the child or the mother*, said UNCRC spokesperson Maria Herzog. *They encourage women to give birth in unsafe and life-threatening conditions*¹⁴⁹. In the past, the reason behind abandonment in such types of baby boxes was, as we previously stated, the illegality of parenthood outside of marriage. Designed for mothers who are unable to take care of their babies but do not want to abort and want to stay anonymous, the boxes represent a safer option for the unwanted child (this practice was particularly common the 1952). Once the box is delivered to a hospital or a church, the mother has two months to change her mind without criminal charges, or the baby is given directly for adoption¹⁵⁰. These cases foreshadow the fact that governments all over Europe are challenged to support parents before and after birth, so that they are not left

¹⁴⁶ Since individual hospitals determine their own privacy policies about whether to release information about abandoned children to the public

¹⁴⁷ NADEAU, B. Europe's growing crisis of abandoned babies. Rome Bureau Chief for The Daily Beast, 2012. <https://www.thedailybeast.com/europes-growing-crisis-of-abandoned-babies>

¹⁴⁸ *Ibid.* p.6

¹⁴⁹ *Ibid.*

¹⁵⁰ BOGDANOVA, M. *The abandonment of children- prevention and alternatives.* op.cit.p.29

without an option and forced to just abandon their newborn baby. As long as there is abandonment, there will be the need for the state to create conditions under which the abandoned children are given care and opportunities for a decent life. In most of the post-Soviet countries, the solution provided by the state is institutionalization.

In 2007, Bulgaria was the country with the highest number of children less than 3 years old left in institutions – 3,000 new born babies out of 9,000 abandoned children in total¹⁵¹. For comparison, in the Czech Republic in 2007 the Institute of Health Information and Statistics reported 1,407 cases; in Romania (which started deinstitutionalization reform together with Bulgaria), despite a new child protection law which forbids the placement of children under 3 years old in institutions, *maternity wards and pediatric hospitals effectively act as institutions in cases of child abandonment (4,000 newborns were abandoned in 150 medical units in 2004, according to UNICEF and the Ministry of Health). As a result of a procedural void, 31.8% of children left in hospitals/pediatric hospitals do not have identification papers, leaving them particularly vulnerable to exploitation, including trafficking*¹⁵². By 2014, the number of institutionalized children decreased to 3,800, but 1/3 of them were still under the age of 3. The high rate of abandonment at the European level, including Bulgaria, reflects multiple problems related to prevention, among which there is lack of adequate sexual education. Bulgaria is the European country with the earliest sexual practice for children under 15 years old — *29% of the pupils at school report that they have had sexual contact before the age of 13*¹⁵³. According to the World Health Organization, children in Bulgaria have risky sexual behaviors, and recent statistics testify to that. In the first three months of 2017, 531 girls under 18 years old had abortions, and in 2016 alone, there were 6031 children born of minors. In the UK, pregnancy among teenagers also represents a complex social problem. *Every year in the UK 39,000 girls under the age of 18 get pregnant; almost all local authorities have at least one hot spot where more than 6% of the girls between 15 and 17 give birth.*¹⁵⁴ As we shall demonstrate later in this chapter, in Bulgaria during the Communist period there was prenatal home care by midwives which was dedicated

¹⁵¹ UNICEF. At Sofia Consultation, Governments in South East Europe embrace child-care reform published on 30 July 2007 at http://www.unicef.org/infobycountry/index_40453.html

¹⁵² *Ibid.*

¹⁵³ UNICEF. Social Activities And Practice Institute. Report: Decentralization of institutions for children deprived of parental care in Bulgaria – challenges and opportunities. 2007.

¹⁵⁴ BOGDANOVA, M. *The abandonment of children- prevention and alternatives, op.cit.p.180.*

to detecting, reporting and preventing abandonment and family distress. The reasons behind abandonment is a very rarely researched problem, and our study proves that until governments analyze this process scientifically, states will not be able to put in place policies that can function as successful prevention. What is important to underline already at that stage of our thesis is that, as the above statistics show, abandonment is not a new phenomenon and solutions are complex and very much dependent on the individual institutional capacity of the state.

D - Understanding the nature of Institutionalisation for children

Institutional care, also known as residential care, could be defined as a *group living arrangement for children in which care is provided by remunerated adults who would not be regarded as traditional careers within the wider society*¹⁵⁵. If one follows this definition, one considers institutional care as a form of care that includes only *unnatural* care presented to children that are living in high risk environment and due to *unfortunate circumstances are forced to stay away from their family*¹⁵⁶. Our research shows that there is a continuing ambiguity about the role of residential care worldwide, and comparisons between family and institutional functions have followed the so-called anti-residential bias (Figure 11). *The negative experiences and poor outcomes of children and young people, along with a focus on the primacy of the family, have led to an anti-residential care bias which has had varying impact on the development of policy and practice*¹⁵⁷.

FAMILY	INSTITUTIONAL CARE
Good	Bad
Safe	Risky
Natural	Unnatural
Homely	Institutional

Figure 11 - Anti-residential bias

¹⁵⁵ TOLFEE, 1995 cited in STEPHENSON, P., GOURLEY, S. & MILES, G. (2004). Child Participation. London: Tearfund, p.9.

¹⁵⁶ KENDRICK, A., *Residential child care: Prospects and Challenges*. 2008, London: Jessica Kingsley.

¹⁵⁷ KENDRICK, A., STECKLY, L., McPHEAT, G.A. *Residential child care: learning from international comparisons*. In: Early Professional Development for Social Workers. British Association of Social Workers, Birmingham, 2011, p. 81-87.

Therefore, most of literature on the notion confirms that institutional forms of care are viewed as *contrary to the child's nature*¹⁵⁸ and consider *biological family reunification as the measure of success of residential treatment*¹⁵⁹. The questions of institutional care and its evaluation is often put in the simplistic way, where the biological unit is always considered to be superior to the substitute care provided by the state, and therefore *policymakers and most funders consider biological family reunification as the measure of success of residential treatment*¹⁶⁰. Hence, in country specific context such as South Asia or the Soviet Union this outcome is obviously too narrow and does not take into consideration the various forms of long term group living and traditional child upbringing¹⁶¹. What is more as scientists proved throughout the years most policy actions were taken based on studies of residential treatment which *vary widely in scope and suffer from an absence of control of comparison groups, poorly defined service units, sampling problems, and improper selection of measurement of outcome criteria and most importantly, improper aggregation of results. Colton and Williams (2002) noted the dearth of adequate information on Europe on basic questions such as the number of children entering and leaving residential care each year*¹⁶². In addition, scholars confirm that *the nature and availability of historical and empirical literature on residential care varies considerably from country to country*¹⁶³. On multiple occasions throughout our study we remark how diverse the interpretations of residential care could be. As a result we identified both positive and negative practices attached to similar practice. *The definition of residential care is problematic, and the different models of care emphasize this- depending on the local context there is an overlap between residential care and other forms of institution- such as hospitals, boarding schools or penal establishments*¹⁶⁴. Bilchik suggests that for a very long time by asking *Does institution work* scientists had a hard time including

¹⁵⁸ BUTLER L., McPHERSON P. Is residential treatment misunderstood? *Journal of Child Family Studies*. 2007. 16, p. 465–472.

¹⁵⁹ *Ibid.* p.3

¹⁶⁰ *Ibid.* p.3

¹⁶¹ KENDRICK, A. *op.cit.*

¹⁶² COLTON, M., WILLIAMS, M. Residential care: Last resort or positive choice? Lessons from around Europe - Editor's note, *International Journal of Child & Family Welfare*, 2002, 5(3), p.66-74.

¹⁶³ COURTNEY. M., IWANIEC. *Residential Care of Children: Comparative Perspectives*. 2009, Oxford University Press, p. 217.

¹⁶⁴ KENDRICK at al., *op.cit.*, p.3

differences in children and kinds of residential treatment¹⁶⁵. However, our analysis shows that despite the considerable difficulties in providing some genuine comparable cross-national statistics even in developed countries, institutions have been marked as being a sign of *bad child policy that deprives children of their basic human rights*¹⁶⁶. Our study demonstrates that the context of residential care and its functioning will largely depend on the political history, economic, legal and administrative frameworks of the countries in questions, and thus *residential care cannot be considered in isolation from these wider factors*¹⁶⁷.

E - The re-creation of the state - explaining political and social change in post-communist Bulgaria

After the fall of the Soviet Hegemony Bulgaria, alike other and Central Eastern European countries expressed strong will to join the European Union and catch up economically and politically with Western Europe and thus adopt the European welfare regime and not for instance the Anglo-Saxon or the Asian welfare¹⁶⁸. We should also underscore that Eastern European countries who passed through Soviet oppression were considered to be in need of Western counterparts to become more “European”¹⁶⁹. Since the fall of the Berlin Wall, there was no other model to follow, but the Western one, the only possible political and social direction left for the transition¹⁷⁰. *Hence, the communist welfare state, if there is such a thing, (...), must be something completely different from the European welfare state*¹⁷¹. The return to Europe of the ECE countries has been the *largest enlargement project since 1973 when the United Kingdom, Ireland and Denmark joined the Europe of the Six*. In contrast to the enlargement criteria in 1973 largely formulated at Copenhagen summit

¹⁶⁵ BILCHIK, S. A juvenile justice system for the 21st century. Washington, D.C.: Office of Juvenile Justice and Delinquency Prevention, 1998.

¹⁶⁶ KENDRICK, 2011 p.2

¹⁶⁷ COLTON, M., HELLINCKX, W. (eds.) *Child care in the EC: A country-specific guide to foster in residential care*, 1993, Aldershot: Arena.

¹⁶⁸ WAGENER, H. The Welfare State in Transition Economies and Accession to the EU. *West European Politics*, 2002, 25, (2), pp. 152-174. Available at <https://www.tandfonline-com-s.acces-distant.sciences-po.fr/doi/pdf/10.1080/713601579?needAccess=true>, Consulted on July 12, 2017.

¹⁶⁹ WOLFF, H. *Inventing Eastern Europe: The Map of Civilization on the Mind of the Enlightenment*. Stanford, 1994, CA: Stanford University Press.

¹⁷⁰ ARNASON J.P. *Designs and Destinies: Making Sense of Post-Communism*. Thesis Eleven 63, no. 1 2000, p.89–97.

¹⁷¹ *Idem.*, p. 153

next to the general condition of democratic rule of law and a functioning market order, it is the *acquis communautaire*, which erects the highest barrier to entrance of the Union¹⁷². However, as Wagener argues, while the Economic and Monetary Union is developed largely at the *acquis*, there was much less dedicated to social policies: the *European Union is not yet a social union and thus convergence of social conditions will be the outcome of economic convergence; it cannot be its precondition*¹⁷³. On the one hand, Eastern European candidate countries such as Bulgaria need to adjust to *a mixed economy of welfare, from bureaucratic state collectivist system of welfare and state paternalism*¹⁷⁴. On the other hand, policy makers at that time did not acknowledge the missing clear conception and patterns for Social European Model and left the candidate countries to engage into models of social policy that did not quite correspond to their cultural and administrative specificities¹⁷⁵.

The deinstitutionalization reform is a good example of a change that falls within a bigger transformation of the state and its foundations opposing authoritarian and democratic tools for institutionalization of social policies. To analyze *how European Accession has changed the concept and the actual practice of post-communist governance*, we find important to present an analytic distinction between the terms *accession* and *enlargement*. The European Social Policy literature proposes different possible interpretations of the concepts, insists on the multi-dimensionality of the accession and enlargement process and points out the necessity for a more *comprehensive theoretical framework that would capture the complexity of the on-going process and its impact on both EU and post-communist social policy*¹⁷⁶. The literature review on European studies also suggests that the topic is under-researched¹⁷⁷, and yet there seems to be a consensus that *the 'Enlargement literature' takes*

¹⁷² *Idem*, p.153

¹⁷³ WAGENER, H. The Welfare State in Transition Economies and Accession to the EU. *West European Politics. op.cit.* p.153

¹⁷⁴ DEACON, B. East European Welfare: Past, Present and Future in comparative context. In DEACON, B., ed. 1992. *The New Eastern Europe- Social Policy Past, Present and Future*. London: Sage Publication Ltd.Ch.1

¹⁷⁵ DEACON, B. STUBBS, P. Eds., *Social Policy and International Interventions in South East Europe*. 2007, Cheltenham: Edward Elgar.

¹⁷⁶ LENDVAI, N. The weakest link? EU accession and enlargement: dialoguing EU and post-communist social policy. *Journal of European Social Policy*, 2004, Vol. 14 (3), p. 319-333

¹⁷⁷ SCHIMMELFENNING, F. SEDELMEIER, U. Theorizing EU Enlargement: Research Focus, Hypotheses and the State of Research. *Journal of European Public Policy*, 2002, Vol.9 (4), p. 500-528

*the perspective of the EU, while the 'Accession literature' takes the point of view of candidate countries*¹⁷⁸.

As demonstrated by our case study, the institutionalization of EU social policy and the access to the European Social Fund creates preconditions for the emergence of a number of political and economic transformations. *European accession has no doubt defused the system of governance of the candidate countries with their legacies of centralized state structures both vertically and horizontally*¹⁷⁹. The horizontal institutionalization aims to decrease the gap between the institutional arrangements through successive reforms and institutional adjustments to EU norms and practices by the new comers¹⁸⁰. Vertical decentralization is indeed changing the concept and practice of social policy governance in Central and Eastern Europe¹⁸¹. In practice, for countries like Bulgaria during the accession period, the European and regional governance will be added to the previous two-sided system of central and local government. Cameron describes the accession process and its effect on the emerging new contours of the social policy regime: (...) *new members will be re-created as states, committed to processes of policy making and policy outcomes that in many instances bear little or no relation to their domestic policy-making processes and prior policy decisions but reflect, instead, the politics, policy –making process and policy choices of the EU and its earlier member states*¹⁸². Since 1997, building institutions and the adoption of administrative structures that would implement the *acquis* and the EU multi-level system of governance become an obligatory condition for accession¹⁸³. *From the point of view of candidate countries the term 'accession' reflects well on the process whereby they access or adopt a set of rules, norms, institutional structure, ideas, meanings, interests and identities (...) European accession is inherently an asymmetrical undertaking: conditionality, the adoption of the 'acquis' and broadly accession criteria are there to incorporate the accumulated results of*

¹⁷⁸ LENDVAI, N., *op.cit.* p.320

¹⁷⁹ *Ibid.* p.320

¹⁸⁰ IUSMEN, I. *Children's Rights, Eastern Enlargement and the EU Human Rights Regime*. Manchester; New York, Manchester University Press, 2014

¹⁸¹ LENDVAI, N. *op.cit.* p.321

¹⁸² CAMERON, D. The challenges of accession. *East European Politics and Societies*, 2003, 17 (1), p.24-41

¹⁸³ DIMITROVA, A. Enlargement, Institution-Building and the EU's Administrative Capacity Requirement. *West European Politics*, 2002, Vol. 25 (4), p.171-190

*the European integration process of which the candidate countries have not being part of*¹⁸⁴. Therefore, the governance of enlargement and the Europeanization of CEE countries should be regarded as a simultaneous transformation of the communist heritage through the EU tools, which automatically makes the accession process different. The order that emerges from the collapse of communism in Eastern Europe created preconditions for the survival of some political institutions while distracting others, and such transformations have been largely neglected by the EU in relation to social policy. According to Deacon, *the relative indifference of the European Commission in the transition process (...) suggests future development in the region will depend greatly on the determination with which the commission demands concessions to European type social policies for EU membership*¹⁸⁵.

The social dimension of EU accession targets and PHARE programs has been unanimously contested among scholars as mechanisms that do not focus on the *relevance to the overall social policy reform of the CEEC but on the direct input/output*¹⁸⁶. On the one hand, the overall critic of the accession country reports in relation to human rights has been also seen as a deliberate strategic step or *hidden neo-liberal agenda: it is not clear whether this hidden agenda is known to, and approved of by, all the actors of the Union, or whether 'left hand' and 'right hands' operate independently*¹⁸⁷. On the other hand, authors underline the danger behind the abrupt adoption of neo-liberal reforms by weak post-communist societies, where there is *underdeveloped social protection, general problems of social cohesion*, and emphasize the desire of new member states to *implement neo-liberal norms in a much more radical way than could be expected from European state*¹⁸⁸. Thus, Vaughan-Whitehead foreshadows the threat for Social Europe, if the post-communist countries transform in the pace they want. All these findings suggest that the type of welfare state in

¹⁸⁴ LENDVAI, N. The weakest link? EU accession and enlargement: dialoguing EU and post-communist social policy. *op.cit.*

¹⁸⁵ ALBER, J., STANDING, G. Social Dumping, Catch up or governance? Europe in a comparative global context. *Journal of European Social Policy*, 2000. Vol. 10 (2), p.99-119

¹⁸⁶ DE LA PORTE, C. DEACON, B. Contracting Companies and Consultants: The EU and the Social Policy of Accession Countries. GASPP Occasional Paper No.9/2002 (www.gaspp.org)

¹⁸⁷ FERGE, Z. A central European Perspective on the Social Quality of Europe. In BECK, W., MAESEN, WALKER, A. (eds). *The Social Quality of Europe*. Bristol, 1997, The Policy Press

¹⁸⁸ VAUGHAN-WHITEHEAD, D. *EU enlargement versus Social Europe? The Uncertain future of the European Social model*. 2003,Cheltenham: Edward Elgar.

post-communist countries represents a mixture of the liberal, conservative and socio-democratic type as explained by Esping Anderson. *All CEE accession candidate countries should be able to withstand competition from the Union and Union should not suffer unduly from competition from the acceding countries.*

Countries in post-communist Europe followed different micro and macro-economic programs depending on their individual political priorities and this became visible in the variety of industrial and agricultural programs adopted by the different states¹⁸⁹. CEE countries among them had also different paths of the events prior to 1989 and the reasons behind the fall of the system. While this subtle perception of 1989 as a ‘dawning’ of an accomplishment may have seemed considerably illustrative with regards to the types of revolutionary changes occurring in Poland, Hungary, or Czechoslovakia, the case of the Bulgarian revolution has a reality of its own. In the words of Richard Crampton, *Zhivkov’s fall was the work of the party hierarchy; it was a palace coup rather than a revolution, and ‘people power’ in Bulgaria was to be more the consequence than the cause of the change of leadership*¹⁹⁰ (see Chapter IV for detailed analyses of the transition from Zhivkov’s rule).

*Social and public policies were not considered as governments priority and if it was not for the pressure related to the great unemployment plans there would have not been any common social plans*¹⁹¹. The post-communist transition of child protection services in Bulgaria includes a profound change in the conception and delivery of social services, which includes decentralization and deinstitutionalization embodied by the opposite of communism and liberalism. Thus, the state is no longer the sole provider of public goods and social services but an *entity that helps empowered and free citizens (partners) accomplish their goals*¹⁹². The instruments through which the new liberal social policies manifested themselves included privatization of state institutions, open market competition, and greater choice of service providers. In terms of child protection, the liberal understanding was that state institutions needed to be eradicated, as they were seen as a holdover from the communist

¹⁸⁹ BAFOIL, F. *Le Post-Communisme en Europe*. 1999, Paris: La Découverte.

¹⁹⁰ CRAMPTON, R. *A Concise History of Bulgaria*. 2005, UK: Cambridge University Press, p.287

¹⁹¹ *Ibid.*, p.5

¹⁹² ROSE, N. *Powers of Freedom: Reframing Political Thought*. Cambridge, UK: Cambridge University Press, 1999.

state, and the role of the state should change from being *social* to more *enabling*¹⁹³. In other words, the state should give up its paternalist functions over children in need on behalf of communities and non-governmental actors who would suddenly start to seek for innovative care solutions for the abandoned children in need of protection¹⁹⁴. The more local communities are invested in the formation of alternative care, the more the state would be considered successfully liberalized¹⁹⁵. However, in reality the decentralization of power in the prism of neoliberal policies provoked even greater participation of the state in control and audit of the multiple actors. *Despite initial expectations that neoliberal policies would produce less overbearing government, the necessity to administer and audit independent providers created large new bureaucracies*¹⁹⁶. As we shall demonstrate Chapter IV and V, in Bulgaria the reform initiated the existence of three different state agencies for child protection and put in place an inter-ministerial group and

1) **Enlargement**

At the beginning of the 1990s, one could observe a mutual desire for EU enlargement – provoked by different reasons – from both the West and the East. On the one hand, the Europeanization of the continent became a logical answer to the Eastern European demand for a European catch-up after more than forty years of the Soviet order. On the other hand, the West saw the EU enlargement as a major precondition for reparation of historical divides. Under the shadow of the Cold War, the European integration of the West and the East was perceived as a major weapon against Russian hegemony over the region, and at the same time as a form of self-protection of European borders. The motivation of the West to reinforce collective security for the region was implied by distribution of common rights and duties shared by the member states. Such delegated solidarity is recompensed to the East through European aid and, hopefully, increased well-being. Although driven by mutual interests, the relationship between Western and Eastern (old and new) member states is far from

¹⁹³*Ibid.*

¹⁹⁴ SAVOIE, D.J., MULRONEY, T. In *Search of a New Bureaucracy*. Pittsburgh, PA: University of Pittsburgh Press, 1994

¹⁹⁵ ROSE, N. *Powers of Freedom: Reframing Political Thought*, *op.cit.*

¹⁹⁶ NEGOITA, M. A Model in the Desert: Modernization, Advanced Liberalism, and Child Protection Reform in Post-communist Romania. *Politics & Society*, 2010, Vol. 38, Issue 1, p. 95 – 117

symmetrical in many of the European regulations¹⁹⁷. Analysis of the European integration and the Europeanization phenomenon unveils these questions, showing how nation states live under the hat of the Union, which becomes more and more directive towards national institutions.

The democratic European conditionality is presented in the literature as the necessary ingredient for *respect for human rights, minority protection, conflict resolution and stability in Eastern Europe*¹⁹⁸. Conditionality policies were perceived as a positive measure, which leads to full membership in the EU. In cases where conditions were not fulfilled, there were no sanctions envisaged, except that the membership would not be granted. The inconsistency of the Union in the conditionality approach comes from the fact that once the countries become members of the Union, there are few or no mechanisms through which the country can be found responsible and controlled by supra-national institutions in cases of a breach of the democratic principles. Since there is no real monitoring of the implementation process of the EU norms, it could be limited to the copy paste formal adoption of required norms. As Borzel points out, *there is no particular reason for a country to put efforts into fulfilling the EU's requirements considering human rights or the rule of law, when the EU is neither willing to reward those who comply, nor is capable of punishing others who do not*¹⁹⁹.

Before defining Europeanization as one of the most explicit public instruments for change, we should point out to the fact that Eastern European countries who had passed through the Soviet oppression were considered to be in need of Western counterparts to become more “European”²⁰⁰. Scholars have articulated one of the methodological problems of Europeanization studies as the *distinction between the impact of the European Union on the national system from the impact of other possible sources, namely globalization and domestic*

¹⁹⁷ BAFOIL F. *Central and Eastern Europe. Europeanization and Social Change. op.cit.*, p.65

¹⁹⁸ SHIMMELFENNIG, F. EU political accession conditionality after the 2004 enlargement: consistency and effectiveness. *Journal of European Public Policy*, 2008, 15, p. 918.

¹⁹⁹ BÖRZEL, T. A. The Transformative Power of Europe. Reloaded. The Limits of External Europeanization. KFG Working Paper Series, No. 11, February 2010. Kolleg-Forschergruppe (KFG) *The Transformative Power of Europe*, Freie Universität Berlin

²⁰⁰ WOLFF, H. *Inventing Eastern Europe: The Map of Civilization on the Mind of the Enlightenment* 1994, *op.cit.*

politics²⁰¹. Cowles and Risse underline that *Europeanization may reinforce, capitalize on, or fend off the forces of globalization*²⁰². Since the fall of the Berlin Wall, there was no other model to follow, but the Western one, and therefore this one was the only possible political and social direction left for the transition²⁰³. The EU and the US assumed this opportunity to fill in the gap left by the fall of the regime, and during the accession *the EU created an idealized image of itself and used this image to judge the performance of candidate countries*²⁰⁴. Therefore, the European conditionality before and after the European membership turn into a powerful public instrument and focal point which embodies the demand for change in the region, but at the same time kills national upheavals for alternative governance. As some authors argue, *it was precisely Eastern perceptions of the EU as the repository of civilization and progress that gave post-communist modernization projects their transformational potency*²⁰⁵. Thus, on the one hand Bulgaria and other member states from the Soviet bloc voluntarily embraced the models and instruments that were conditioned by the EU and their liberal equivalents. On the other hand, we could ask ourselves to what extent the financial conditionality could have been resisted from countries in a complete budget breakdown. The extent to which there was an interior alternative to the top-down and bottom-up European models and the strategies of the actors who adopt them will be discussed in Chapter II and Chapter IV.

2) The Acquis Communautaire

Allying the Europeanization process with social policy is not a common approach, since social policy has been historically linked to the soft law field of EU action and thus an area where compliance has never been demanded. *It is a field of EU action in which the Open Method of Coordination (OMC) and benchmarking practices induce member states to*

²⁰¹ *Ibid*, p. 56

²⁰² RISSE, T., COWLES, M.G., CAPORASO, J.A. Europeanization and Domestic Change: Introduction, In M.G. COWLES, J.A. CAPORASO, RISSE, T. (eds.) *Transforming Europe: Europeanization and Domestic Change*, 2001, Ithaca, NY: Cornell University Press.

²⁰³ ARNASON, J. P. Designs and Destinies: Making Sense of Post-Communism. Review Essay, Thesis Eleven 63, no. 1, 2000, p. 89–97.

²⁰⁴ NEGOITA, M. A Model in the Desert: Modernization, Advanced Liberalism, and Child Protection Reform in Post-communist Romania. *op.cit.* p. 98.

²⁰⁵ *Ibid*.

converge through their own social policy choices²⁰⁶. However, we cannot ignore the impact of the *acquis communautaire* in the adoption of *new social programs and regulations in the fields such as child protection, health care, and social assistance*²⁰⁷. The French term *Acquis Communautaire* (*The EU as it is*) means that new member states have to adapt to the EU as they find it, regardless of the member country's internal policy. This could be considered as the only authorized way through which candidate countries are getting modernized – explicitly through the adoption of EU common law. Procedures that affect Europeanization are thus a kind of *normalization* – a process of meeting norms and standards numbering in tens of thousands²⁰⁸. The *normalization* of Europeanization is mostly perceived as a set of legal regulations, presented as the *Acquis Communautaire*.

*It is precisely with the Acquis Communautaire that the European Union imposed itself as the central actor which will control all opening and closing and evaluation of the chapters*²⁰⁹. The conditions for joining the European Union were also essential *to reassure EU states that the Central and Eastern European countries (CEE) will if they become members look like familiar, west European countries, not bringing instability, authoritarianism, or economic collapse into the Union*²¹⁰.

Once the country is driven by the incentive of adhesion throughout the accession period, EU influence can lead to some drastic changes, for instance through regularizing free movements of people, goods, and services and decentralization of power. Not only did the CEE Countries have to legally implement the whole body of EU policies before being allowed to join, they also had to put in place the legal and administrative infrastructure to apply and enforce EU policies²¹¹. New member states were faced with the challenge of adaptation and implementation of more than 80,000 pages of European legislation, containing

²⁰⁶ NACU, A. Anti-Poverty Policies in Romania and Bulgaria in the Context of EU-Accession: An Elusive Europeanisation. In BAFOIL, F., BEICHEL, T. (red), *D'Ouest en Est*. Paris, Harmattan, 2008.

²⁰⁷ *Ibid.*

²⁰⁸ BRUSZT, D., STARK, L. Who counts? Supranational Norms and Societal Needs. *East European Politics and Societies*, 17 (1), p. 74-82

²⁰⁹ BAFOIL, F. *Central and Eastern Europe, Europeanization and Social Change*, *op.cit.*

²¹⁰ GRABBE, H. European Union Conditionality and the 'Acquis Communautaire'. *International Political Science Review*, vol. 23, No.3, Enlarging the European Union: Challenges to and from Central and Eastern Europe. *L'élargissement de l'Union européenne*, 2002, p. 249-268.

²¹¹ BÖRZEL, T.A. Mind the Gap! European integration between level and scope. *Journal of European Public Policy*, 2005, Vol. 12, No. 2, pp. 217-36.

more than 1,000 directives, which would *regulate anything from drinking water quality to equal treatment in the work place*.²¹² It would be impossible to generalize the capacity of all the different member states, but to a great extent we may assume that *this process was set to be fast, rigid, and without regard to sectoral policies and administrative capacity*.²¹³ According to the top-down approach, the more the country candidate is deprived of its own mechanisms and resources (institutional, legislative, and civil), the more it would be open to implementing external regulative mechanisms without demonstrating a conflict of interests.²¹⁴ Börzel emphasizes that *institutional and policy effects of Europeanization over the CEECs has been more immediate and comprehensive than in the old member states because of accession conditionality; but at the same time, the long term outcome might be much shallower and also reversible*²¹⁵. If one looks at the implementation of the *Acquis* as the footprint of European policies in new member states, it becomes hardly negotiable that the Europeanization process demands legal and administrative capacity of nation states to change pre-existing institutions and their targets. If there are not enough preconditions for the creation of such institutional capacity, then in most situations the nation state may even adopt a norm, which is in conflict with its own economic interests and regulations. For example, in order to comply with the European standards for the protection of the environment, the Bulgarian state closed a nuclear power plant (NPP Kozloduy), and following some quotas reduced the production of many agricultural products (yoghurt, wine, etc.)²¹⁶. Bruszt and Stark even illustrate a positive correlation between the involvement of CEE countries into European competitive economies and *the pressure on their governments to use regulation more as a means of adjustment to the short-term requirements of increasing global competitiveness and less as a means to create newly enlarged more inclusive alliances coordinating diverse local considerations*²¹⁷.

²¹² TOSHKOV, D. Implementation of EU Social Policy in the New Member States, paper presented at the international conference *Transformation of Social Policy in Europe: Patterns, Issues and Challenges for the EU-25 and Candidate Countries* April 13-15, 2006

²¹³ *Ibid.*

²¹⁴ BÖRZEL, T., RISSE, T. When Europe Hits Home: Europeanization and Domestic Change. *op.cit.*

²¹⁵ *Ibid.*

²¹⁶ REGULATION (Euratom) No 647/2010 of the Council of 13 July 2010 on financial assistance of the Union with respect to the decommissioning of Units 1 to 4 of the Kozloduy Nuclear Power Plant in Bulgaria (Kozloduy Programme)

²¹⁷ BRUSZT, STARK. *Who counts? Supranational Norms and Societal Needs*. *op.cit.*

In this dissertation the *Acquis* pressures would not have been enough of a precondition for the fit of policies after the accession. The situation of Bulgarian institutional care foreshadows that legal pressures represented a factor that would trigger change in child protection, but (as we show in Chapter V) would not be a sufficient motive to close large-scale residential homes (from 1997 to 2010). The increased political will of actors to close childcare institutions can be seen as a culmination of the efforts of new emerging actors, who either transferred new models or adapted the pressures to the Bulgarian context²¹⁸.

F - Path dependency

Palier and Surel point out that neither interests (driven by capitalism) nor (neo-liberal) ideas alone can explain the recent absence of convergence in public policies: Despite the globalization, despite the neo-liberal turn each country seems to preserve the specific features that characterize its public policies²¹⁹. This is precisely what happened to the policies of child protection in Bulgaria. To understand the reasons behind the long process of convergence to EU norms, we will use the concept of *path dependency*. This notion becomes a trigger of some of our hypotheses related to the impact of EU institutions on public and private national actors.

Path-dependency aims at *the reconfiguration of institutional elements rather than their immediate replacement*²²⁰. As one of the pioneers of applying path-dependency to post-communist settings of institutional transition, David Stark defines its strength in explaining *outcomes where strategic players are deliberately searching for departures from long established routines and attempting to restructure the rules of the game*²²¹. Stark applied the concept of path-dependency to post-socialist privatization policies with regard to the moment of transition.

The concept of path-dependency breaks the linear causality of events and captures the dynamics behind external solutions and domestic alternative paths. Nostalgic actors, financial interests and pro-socialist values proved to be very much alive, if Bulgarian child institutions

²¹⁸ Bulgarian non-governmental organizations, civil actors and experts who studied abroad

²¹⁹ PALIER, B. SUREL, P. Les « trois I » et l'analyse de l'État en action. *op.cit.*

²²⁰ STARK, D. Path dependence and privatization strategies in East Central Europe. *East European Politics and Societies*, 6(1), 1992, p.17–54.

²²¹ STARK, D., BRUSZT, L. *Post socialist pathways*. Cambridge: Cambridge University Press, 1998.

managed to a great extent to resist to the Western neo-liberal norms and operate decades after the collapse of the regime. On the one hand, this fact could be explained by the lack of interest from the part of the EU to fundamentally challenge child welfare institutions, in contrast to the economic or political ones. On the other hand, their existence could also be explained by the inability of national actors to use the institutional vacuum after 1989 and break the social structures of isolation of the handicapped and the most marginalized members of the society. There were neither clear rules nor an alternative to the Communist child institutions until 2012, and thus there was no platform for the introduction of new incentives that would break and reshape the expectation of both the citizens and the elites. As we shall demonstrate in Chapter III, immediately after 1989, the country repeatedly changed governments, weakened dramatically, and did not have the political tools to reconcile conflicting interests and impose alternatives to the old mechanisms. There was no real break from the long-established ways of running both the managerial and the social aspect of those homes, and thus one can suppose that the post-communist transition in child welfare happened in practice much slower than predicted.

Throughout our analysis, we will put in perspective all the three aspects: ideas, interests and institutions, and analyze the non-linear relationship between them that provokes new policy outcomes. *These three elements tend to be interconnected, each one producing a significant impact in the final policy reform process*²²². What is important to underline at this stage is that the European Union has an important role to play in the formation of Bulgarian social policy reform process through systematic introduction of its *ideas, interests and institutions*. The result of this interaction is analyzed throughout the entire dissertation. As a result, we consider important the necessity to look at institutional transformations in the sphere of social policy not only through the prism of formal requirements, but also through the perspective of actors and their interests.

²²² CERAMI.A. Europeanization And Social Policy In Central And Eastern Europe, In BAFOIL, F. BEICHEL, T.(eds.) *Européanisation. D'Ouest en Est*. Coll. Logiques Politiques, L'Harmattan: Paris, 2008, p. 137-168

1) Public policy instruments

Public policy instruments have been largely discussed in academic literature. For the purpose of our study, we aim to distinguish between different types of public instruments which have determined the way deinstitutionalization reform has affected the quality of childcare in the Bulgarian context. We will base our analysis on Lascoumes and Le Galès' definition of a public policy instrument as *a device that is both technical and social, that organizes specific social relations between the state and those it is addressed to, according to the representations and meanings it carries. It is a particular type of institution, a technical device with the generic purpose of carrying a concrete concept of the politics/society relationship and sustained by a concept of regulation*²²³. It is worth pointing out that public policy instruments are still relatively less examined within academia, with the exception of some of the basics on the matter developed in the UK²²⁴, the US (instruments of economic regulations) and the Netherlands²²⁵. However, there is a clear correlation between the increase of the welfare state in the post-war period and the need for more and different types of instruments that accompany the state interaction in a variety of new sectors (child protection, environment, refugees, health, urban policies, etc.). The identification and comprehension of these instruments will constitute our analysis of the public policy change and its effectiveness. Our initial presupposition follows Lascoumes' analysis and foreshadows that public policy instruments implemented especially in the sphere of child protection are not *tools with perfect axiological neutrality, equally available. On the contrary, they are bearers of values, fueled by one interpretation of the social and by precise notions of the mode of regulation envisaged*.²²⁶ Therefore, the way Europeanization, decentralization, or liberalization will be thought to happen in one country will not have the same impact in another member state. This analysis aims to put forward all the risks that this lack of effectiveness could have on children in need. The effectiveness of the public policy instruments applied remains a dependent variable, due to the proliferation of actors, the coordination among them, and the danger of having *renewal of public policy instruments either for the development of depoliticized*

²²³ LASCOURMES,P. LE GALÈS,P. Introduction to the special issue of *Governance* http://www.eu-newgov.org/database/DELIV/D09D02_Special_Issue_Governance.pdf

²²⁴ HOOD,C. *The Tools of Government (Public Policy and Politics)*, 1983, Palgrave Macmillan

²²⁵ .KICKERT, W.J.M., KLIJN, E.K., KOPPENJAN, J.F.M (Eds). *Managing Complex Networks: Strategies for the Public Sector*. 1997. London: Sage

²²⁶ *Ibid.*

formulas in 'the new governance' or through fostering powerful mechanisms for the control and direction of behaviors²²⁷. The extent to which member states will adapt their bureaucracy to capitalism will determine, in Max Weber's phrase, *its capacity to produce calculability and predictability*²²⁸.

Consequently, in the words of Lascoumes and Le Galès, *public policy instrumentation is (...) a means of orienting relations between political society (via the administrative executive) and civil society (via its administered subjects), through intermediaries in the form of devices that mix technical components (measuring, calculating, the rule of law, procedure) and social components (representation, symbol). This instrumentation is expressed in a more or less standardized form – a required passage for public policy – and combines obligations, financial relations (tax deductions, economic aid) and methods of learning about populations (statistical observations)*²²⁹. Through the work of these two authors, we will look at the public policy instruments through which the transformation took place in order to analyze the measures used in the governance, implementation, and evaluation of the deinstitutionalization in Bulgaria.

2) Ideas, Interests and Institutions

The reasoning of this thesis is based upon the extensive analysis of Bruno Palier and Yves Surel's "3i" approach and its relevance when examining the conflicts and compromises between key stakeholders and their institutionally formatted key interests inherited from the past and formulated through cognitive normative and rhetoric frameworks. Analyzing ideas, interests and institutions in relation to child protection, we will look at the present actors, their strengths and weaknesses, and capacity to achieve positive results. Following Pallier and Surel, we also need to identify the cost of certain policies and the impact of such policies on citizens in case the polity fails or is in conflict with other major political decisions²³⁰. The 3i framework that we will adopt throughout the analysis of our empirical data offers a

²²⁷ HOOD, C., ROTHSTEIN, H, BALDWIN. The Government of Risk, Understanding Risk Regulation Regimes. 2001, Oxford: Oxford University Press. At Lascoumes Le Galès *Introduction to the special issue of Governance*

²²⁸ *Ibid.*

²²⁹ LASCOURMES, Le Galès *Introduction to the special issue of Governance, op.cit.*

²³⁰ SUREL, Y, PALIER, B. Les « trois i » et l'analyse de l'état en action. *Revue française de science politique* 2005/1 (Vol. 55), p. 7-32. DOI 10.3917/rfsp.551.0007

comprehensive set of variables to consider in the analysis of policy change²³¹. We stipulate that these independent variables interact with each other and shape policy transformations.

a.Ideas

Within the EU Social policy, ideas were mostly formed and presented by the DG Employment and Social Affairs, and related to the European Employment Strategy (EES) drafted in 1997. *The key elements of the EES concern an improvement in four pillars: 1) entrepreneurship; 2) employability; 3) adaptability; and 4) gender quality.*²³² Within the Lisbon European Strategy, the new EU member states are obliged to provide their social policy objectives in the forms of National Action Plans on employment and social inclusion and, more recently, on pensions. According to the legal framework of the community social policy presented at The Treaty on the Functioning of the European Union (TFEU), *member states and the European Union have joint competence regarding the social policy of the EU*²³³. *Therefore, the role of the EU in the process of designing a social policy is either to ensure national policies, or to initiate measures which are to be applied according to methods established by each member state*²³⁴.

According to most of the scholars who studied the notion of ideas, *ideas in policy sciences is broad and related to the content and strength of actors, values and knowledge in the policy process*²³⁵. *Ideas shape agenda setting, policy formulation and implementation by determining which representations of the problem and potential solutions will be heard and understood by policy-makers*²³⁶. The issues that have been identified so far with the implementation of ideas are linked on the one hand with the *ambivalence of the EU in promoting a clear social policy orientation*²³⁷ and on the other hand with the lack of information on how much progress has been made due to the nature of “soft law”

²³¹ LAVIS et al. 2002; LAVIS c2004; PALIER AND SUREL 2005; WADDELL ET AL. 2005)

²³² CERAMI.A. Europeanization And Social Policy In Central And Eastern Europe, *op.cit.*, p.142

²³³ CECHIN-CRISTA , P. MIHUT, A. at al. The Social Policy of the European Union. *International Journal of Business and Social Science Vol. 4 No. 10 [Special Issue – August 2013]*

²³⁴ *Ibid.*

²³⁵ HALL 1993; SUREL 2000; LAVIS et al. 2004 Why do policies change? Institutions, interests, ideas and networks in three cases of policy reform /

²³⁶ HALL 1993; SUREL 2000; SABATIER AND WEIBLE 2007

²³⁷ FERGE, Z. European Integration and the reform of social security in the Accession Countries. *Journal of European Social Quality*, 2001, 3:1, p.9-25

requirements as well as lack of clear EU benchmarks to show progress²³⁸. What has been achieved, however, is that *European institutions have contributed to promoting a cognitive and normative harmonization of social security reforms in Europe through the enforcement of a common language, common vision of reforms and common objectives.*²³⁹ The most popular examples of this statement were related to employment, pensions, health and social inclusion²⁴⁰.

The ESM is used to describe the *European experience of simultaneously promoting sustainable economic growth and social cohesion*²⁴¹. Definitions of the concept are loose and controversial, foreshadowing criticism to the social dialogue to be too formal, *unclear in nature and superficial*²⁴². Despite those critiques, in 2003 the European Commission stated: *There is no doubt that the social dialogue will be one of the keys to the success of the enlargement and the challenges to be met within the renewed European Union*²⁴³. We may assume that social institutions and their role in governance are different than the legal, welfare or economic institutions, because they *contribute to the formation of people's beliefs, which are then translated into specific political and economic orientations*²⁴⁴. Deinstitutionalization reform demands not only a change in the law on the rights of the child, but also a reconfiguration of power and counter powers and their policy interests. For a different social model to be implemented at the beginning of the *Acquis* period, the muted civil actors had to be woken from more than 40 years of communism and transformed into the new social actors whose power would be independent from the state. Breaking the monopoly on administrative pressures and the legal framework of Europeanization, the process has taken the form of a more cognitive change, where *shaping and reshaping of the perceptions of, and attitudes*

²³⁸ GRABBE, H. How does Europeanization affect CEE governance? Conditionality, diffusion and diversity. *Journal of European Public Policy*, 2018:6, p. 1013-1031, DOI.

²³⁹ MANDIN, C., PALIER, B. L'Europe et les politiques sociales: vers une harmonisation cognitive et normative des réponses nationales. Contribution à la table ronde *L'institutionnalisation de l'Europe*, Congrès de l'AFSP, Lille, 2002, 18-21 septembre

²⁴⁰ *Ibid.*

²⁴¹ JESSEN, M., SERANO, A.M. The European social Model: An Exercise of Deconstruction. *Journal of European Social Policy* 15, 2005, p. 231-45.

²⁴² *Ibid.*; AVDAGIC 2001; NOWAK, 1999

²⁴³ European Commission, Regular Report on Bulgaria's progress towards accession, 2003. http://ec.europa.eu/bulgaria/documents/abc/rr-bg-final-2003_en.pdf

²⁴⁴ CERAMI, A. Europeanization and Social Policy in Central and Eastern Europe. *op.cit.*

towards, social problems and the way to tackle them²⁴⁵. The closure of institutional care is an example of a social policy reform leading to adoption of a Western policy for childcare by new member states. However, it is also an example of how the nation states change European policies.

b. Interests

Interests is a more subjective notion than *ideas*, because *interests* are embedded in the power struggle of policy actors and explain their preferences (see Figure 34, Chapter VII). The introduction of new social policy norms shakes some long-lasting social stigmas and might drastically change policy priorities. As a result of this process, new interest-based relations arise and a conflict between the new and the old actors becomes almost inevitable. Behavioral schools of policy change assume that the outcome of the policy that has been implemented largely depends on actors' interests and behaviors²⁴⁶. *The ability of actors to attain and exercise their interests depends on the distribution of resources and power in a policy domain, as well as individual capacity and skills. Further, most interest-based theories acknowledge the structural constraints on individual agency*²⁴⁷.

With the presence of private providers of social services (on compulsory or voluntary basis) fully introduced in all post-communist countries, *private pension funds, for instance, engaged in lobbying activities to ensure that interests were at least heard, if not clearly supported by governments*²⁴⁸. Similarly, health care reforms in the region, which were almost in all countries characterized by the introduction of health insurance, have engaged in *intense inter- and intraministerial communication and bargaining activities*²⁴⁹. In order for the European idea of *accessible, high quality and sustainable health and long-term care*²⁵⁰ to materialize, member states were submerged by the introduction on the behalf of exterior powers of models and structures that were able to provide an alternative to the pre-existing

²⁴⁵ RADAELLI, C. *Wither Europeanization? Concept scratching and substantive change*. Paper presented at the Political Studies Association Annual Conference, London, 2000.

²⁴⁶ HALL, P. A., TAYLOR, RCR. Political science and the three new institutionalisms. *Political Studies*, 1996, 44, p. 936–57.

²⁴⁷ CECHIN-CRISTA, P. MIHUT, A. at al. *The Social Policy of the European Union, op.cit.*

²⁴⁸ CERAMI, A. *Europeanization and Social Policy in Central and Eastern Europe, op.cit.*

²⁴⁹ *Ibid.*

²⁵⁰ *Ibid*, p.148

model through private insurances and health services. The distribution of power among the actors is largely determined by access to resources and possibility of the lobbyist to answer the normative expectations of people²⁵¹. Being a vector of social policy, child protection policies remain in the shadow of other policies that aim at ensuring social inclusion or reducing poverty. As we will demonstrate later in this research, from 1989 to 2000 there were almost no coordinated social or political mobilizations concerning children in institutional care. The increased interest in vulnerable groups (such as children, but not only) was predominantly pushed by the strong presence of international organizations and the emergence of Bulgarian non-governmental organizations who got involved in increased negotiations between the different levels of the decision-making process. There are different reasons for the weak interest in abandoned children prior to 2000s, but this case provides a good example of one of the main concerns of social policy: *the field of action: the question whether it includes the entire population or is limited to defavorized groups and the degree in which the state can and should intervene in the housing policy*²⁵². As Cerami points out, *not only the identification of ideas is important, but also the classification of interests is crucial in understanding how public policies are conceptualized and implemented at national and EU level*²⁵³. The classification of interests on behalf of the EU was partially structured through the PHARE programs, especially in relation to anti-poverty regulations (also adopted after 2000) and other aspects of EU conditionality related to minority protection. *From the beginning these anti-poverty measures were surrounded by on-going tension between concerns related to European legislative harmonization and internal budgetary restrictions*²⁵⁴. Decentralized from 1990s to 2002, the provision of social aid was dependent on local counsels as a result of *a serial fiscal crisis the country was facing, but also due to additional pressures from the IMF and World Bank encouraging this type of policy of decentralization*²⁵⁵. The results of this decentralization were much worse than expected, and in 2002 the state was forced to recentralize its benefits; *social benefits were the least indexed after inflation rates (least of all*

²⁵¹ SHIFFMAN J. Knowledge, moral claims and the exercise of power in global health. *International Journal of Health Policy and Management* 2014, 3, p. 297–9.

²⁵² CECHIN-CRISTA, P. MIHUT, A. at al. The Social Policy of the European Union. *op.cit.*

²⁵³ CERAMI, A. Europeanization and Social Policy in Central and Eastern Europe. *op.cit.*

²⁵⁴ NACU, A. Anti-Poverty Policies in Romania and Bulgaria in the Context of EU-Accession: An Elusive Europeanisation, *op.cit.*

²⁵⁵ *Ibid*, p.175

welfare benefits)²⁵⁶. These facts are important to exemplify the general context into which the deinstitutionalization has taken place in Bulgaria since 2000s. Further in our analysis, we will demonstrate the conflicts between the ideas and interests of the actors involved in the Europeanization of the Bulgarian child protection system.

c. Institutions

Institutions are the *rules of the game*²⁵⁷. To define *institutions* we will start by using that of North, who describes them as *the humanly devised constraints that structure human behavior*²⁵⁸. Institutions give the *structure in policymaking in ways that favor some outcomes over others; shape policy change primarily through the ways in which they create and distribute incentives and learning*²⁵⁹. There are two types of institutions – formal, which create the specific administrative structure (for instance parliament or electoral system), and informal, which combine the *set of formal and informal norms that govern human behavior*²⁶⁰. Both types will be analyzed throughout this research, but informal institutions are particularly pertinent in the study of child protection policy change, because they suggest the boundaries of some policy *ideas* and the conflict between *interests*. It is interesting to note that the European Union has been largely active in both formal and informal institutional building process even before the opening of official negotiations for membership²⁶¹. *In fact, PHARE Annual Report from 1998 to 2004 shows an innumerable number of projects sponsored and co-financed in all countries in the most desperate areas of social protection*²⁶².

One of the three-pre accession instruments financed by the EU in Bulgaria was set to launch the deinstitutionalization reform (already as part of the pre-accession period), and resources were oriented towards the deinstitutionalization of care not only of children, but

²⁵⁶ *Ibid.*, p.175

²⁵⁷ NORTH DC. A transaction cost theory of politics. *Journal of Theoretical Politics*, 1990, 2, p.355.

²⁵⁸ CERAMI.A. Europeanization and Social Policy in Central and Eastern Europe.*op.cit.*p.141

²⁵⁹ CECHIN-CRISTA,P. MIHUT, A. at al. The Social Policy of the European Union. *op.cit.*

²⁶⁰ MARCH. J.G., OLSEN, JP.Rediscovering Institutions. New York: The Free Press In CERAMI.A. *Europeanization and Social Policy in Central and Eastern Europe*, In BAFOII,F. BEICHEL,T.(eds.) *Européanisation. D'Ouest en Est*. Coll. Logiques Politiques, L'Harmattan: Paris, 1989, p.141

²⁶¹CERAMI.A. Europeanization and Social Policy in Central and Eastern Europe.*op.cit.*p.149

²⁶² *Ibid.*,p.150

also of elderly and disabled people²⁶³. The reform implies according to the pre-accession instruments put in place that governments will undertake some major obligatory stages:

- develop a national strategy and action plan for deinstitutionalization;
- establish a legal framework;
- assess the present situation;
- develop a range of services within the community;
- allocate financial, material, and human resources;
- support individuals during the transition;
- monitor and evaluate the transition to community based care²⁶⁴.

Our analysis evaluates the way actors dealt with the implication of these obligatory stages and seeks to understand how the formal institutional building has interacted with informal exchanges among old and new member states in similar arenas of decision making. In this context Europeanization will be regarded as a *meaning making* mechanism²⁶⁵.

G - Bulgaria and the UK in search of a welfare model

An initial overview of child care policies in Europe oriented our focus on Bulgaria and the UK as some of the most prominent cases characterized by a history of abuse and pedophilia scandals in childcare homes. In addition, both cases call into question the consistency and coherence of social policies within the European Union and their ability to protect the rights of abandoned children. Regarding the evolution of institutional care in the UK and Bulgaria we will endeavor to determine how recent political reforms foreshadow the transformation of childcare, which are deemed to be part of a supranational debate over child protection policies. Paradoxically, today there are tendencies in the New Labour social policy that have led to one of the most liberal welfare regimes in Europe - the UK- towards new child welfare provisions close to universal state based care. At the same time, after the British public put enormous pressure on EU and UN institutions to close state run institutions in Bulgaria and adopt decentralized social policy provision, the Bulgarian government adopted

²⁶³ For instance within the PHARE pre-accession program- one of the three pre-accession instruments financed by the EU to assist the applicant countries of Central and Eastern Europe in their preparations for joining the EU.

²⁶⁴ IVANOVA, V., BOGDANOV, G. The Deinstitutionalization of Children in Bulgaria. *op.cit.* p.205

²⁶⁵ LENDVAI, N. Remaking European Convergence: Transition, Accession, Integration. In NEWMAN, L. (ed), *Remaking Governance. Peoples, Politics and the Public Sphere*. Bristol: Policy Press, 2005, p. 59-81

the national vision for deinstitutionalization of child care homes in the country. The comparative approach is inevitable when analyzing the notion of Europeanization. As Bafoil and Surel point out, *speaking of Europeanization implies reflecting on in parallel about the similarities and the differences which characterize the evolution of the sectors of public policy concerned, the member states or even the individuals and the groups affected by the EU*²⁶⁶. As a result, *policy and institutional misfit only leads to Europeanization if its acted upon by domestic actors and the process is mediated by domestic institutions*²⁶⁷. The outcomes of the process of this interaction have been distinguished by Bafoil and Surel in four types: *inertia, absorption, translation and rejection*²⁶⁸. The outcome could be considered to be *inertia* when national institutions ignore outside pressures from EU and continue to function through their old mechanisms. On other matters, opposed to *inertia*, the state may imply an *absorption* strategy which is defined as a: *complete implication of the European policies and norms*²⁶⁹. The intermediary scheme is *translation* in which there are *some transformations at national level, but national rules and policies are not being aligned with the EU standards*²⁷⁰. The final stage is considered by the authors as the least probable one when *European pressure ends up by increasing differentiation of public national institutions and/or actions*²⁷¹.

In our quest to comprehend the power struggle between state, society and children under the hat of the European Union governance, we examine if the EU or the state prevails in the influence over the formation of child protection policies in Bulgaria. Touching upon Radielli and Borzel's definition of the Europeanization process, we identify through our empirical work the envisioned and unintended consequences of the development of EU policies over nation states. What is more, to follow the dynamics between the external and internal actors, as well as the power struggle between them, we enrich our theoretical framework with analyses of the accuracy of public instruments applied in the transformation of institutions for child protection. The exhaustive analysis of the 3i of the

²⁶⁶BAFOIL, F., SUREL Y. Européanisation plurielle. In L'Européanisation d'Ouest en Est, *op.cit.*, p.302

²⁶⁷TEKIN, A., GÜNEY, A. *The Europeanization of Turkey Polity and Politics* 2015, Abingdon Oxon; New York, NY: Routledge, 2015.

²⁶⁸BAFOIL, F., SUREL Y. Européanisation plurielle. In L'Européanisation d'Ouest en Est, *op.cit.* p.312

²⁶⁹*Ibid*, p.312

²⁷⁰*Ibid*, p.313

²⁷¹BAFOIL, F., SUREL Y. Européanisation plurielle. In L'Européanisation d'Ouest en Est, *op.cit.* p.312

deinstitutionalization reform in Bulgaria presented in the next three chapters gives further layers of ...and compare the results of the same reform in the UK.

Candidate to the European Union countries need to be aware of the importance to choose welfare regime, which corresponds to their stages of development and social culture. However, in some of the social policy areas such as child protection older member states -the UK- with strong representation through IO's and their loan programs set up goals that prove challenging for new member states such as Bulgaria.

III - Bulgarian Social Policy between Three Different Political Regimes (1919 and 1989)

In this chapter, we will show the agenda behind the development of child protection institutions during communism and describe the actors who were behind the centralized child protection system. We will do that by first describing the construction of Bulgarian child protection policy after liberation from the Ottoman Empire in 1878 up until 1944 and its drastic transformation during the Communist times. Second, we will give an overview of the Communist ideology that ruled over the Bulgarian child protection system for more than four decades and analyze what made it so resistant as to still be functioning twenty years after the fall of Todor Zhivkov's regime²⁷². It is important to follow the dynamics before and during the Communist period because they predetermined, to a great extent, the way the Europeanization process evolved, even before the Council of Europe was created as the first pan-European organization. Third, we will describe the transition period after 1989 and its negative impact on the social policies of the state. This chapter will look at the evaluation of the state and its social protection system vis-a-vis children by demonstrating in each period the number of children in institutional care, the objectives of state policies, and the state apparatus through which the reforms were executed, including institutions, laws and actors. Through a critical reading of history, we will question the extent to which in less than one hundred years three different political regimes had an impact on the formation of child protection policies in Bulgaria. By looking at the pre- and post-communist heritage, we foreshadow the relevance of the path dependency concept in relation to child protection policy and the formation of deinstitutionalization reform. The link between past and present will eventually help us depict the positive and negative implications of the development of the reform from today's perspective. Throughout the chapter, we will conceptualize the historical data related to the different historical periods while identifying the major challenges of each period. What were the major triggers for the creation of child institutions? What was the role of the state and how did it fit or misfit with the overall ideology of each period?

²⁷² 10th of November 1989, the Bulgarian Communist leader resigned

Bulgaria's small surface and well established borders²⁷³ could be enough preconditions for a relatively independent development of the state welfare. However, its history proves that in the past century the country's policies has been hardly influenced by other regional and global powers²⁷⁴. Situated in a crossroad between two continents, within the Balkan's multicultural, multi-religious and politically unstable environment, Bulgaria witnessed continuous foreign influence in the formation of its institutional and cultural reality. It seems that in the 20th century, our geo-political situation and shaken economic stability will turn into preconditions for global powers to invest and establish a zone of influence in our geographical territories.

A - The denied legacy of the Pre-communist Period 1919-1944: Decentralised strategy of child protection

In comparison to other countries in Central Europe, the Bulgarian nation was a *relative late-comer to the modern nation-building processes (...) established as a modern state in 1878 after the Russian-Turkish War (1877-1878), after five centuries of Ottoman rule over the Bulgarian lands*²⁷⁵. At this stage, it is important to acknowledge that Europe had always been a present player in Bulgarian political life. The pro-European orientation of the country can be traced back to before the end of Ottoman rule. This period (1919-1940) can be characterized by the establishment of the European social policy²⁷⁶. The last three decades of the 19th century and the beginning of the 20th century was associated with an unprecedented desire for a new integrated policy approach in terms of child protection that combined health, education, and social security policies. *The solutions to high child mortality rates and low life expectancy of mothers are considered to be a complex mixture between state financial aids, housing allowances, obligatory free education for children, free access to health care, as well as free food provision at schools and day care centers*²⁷⁷. Especially for Western Europe, this was a strategic period for the development of child protection policies and national plans for

²⁷³ Since the beginning of the 20th century after the Balkan War and the 1st World War

²⁷⁴ KALINOVA, E., BAEVA, I. Bulgarian Transitions (Bulgarskite Prehodi 1939-2010). 2010. Paradigma.

²⁷⁵ ZHELYAZKOVA, A. *Bulgaria, Nations and Nationalism*. A Global Historical Overview, Vol. 2: 1880-1945, eds. Guntram H. Herb and David H. Kaplan. Santa Barbara, CA: ABC-CLIO, 2008, p. 570-582.

²⁷⁶ MOMMSEN W.J. (ed.). *The Emergence of the Welfare State in Britain and Germany, 1850-1950*. 1981, London: German Historical Institute.

²⁷⁷ BALOUTZOVA, S. *State Legislation on Family and Social Policy in Bulgaria*, *op.cit.* p.233

social policy development. The reasons behind this development are close to the motives of the communist governments a couple of decades later and include factors such as industrialization, urbanization, as well demand for healthy working and military forces. Up until the 1930s and the world economic collapse, there were many charity and community-based organizations, which were an active force in the social provision of services. However, the crisis was so massive that states realized that it was only governments that could create measures through which to fight against poverty, demographic deterioration, and insecurity²⁷⁸.

The Bulgarian paper *Napredak*, published in Istanbul (1874-1877), provides evidence of this proactive search and even direct copying of models, ranging from political (i.e. import of ideas and ideologies) and cultural (e.g. cabaret shows popular in Europe at the time) through to architectural (architectural styles of buildings and city planning)²⁷⁹. At the beginning of the 20th century, France and Germany became firm favorites with young Bulgarians²⁸⁰. There were many Bulgarian-German societies established in that period²⁸¹. The access and transfer of different cultures and politics and ideologies gave the young Bulgarian state a taste for the European model of governance and social policies. *At the same time, the fact that many young Bulgarians received their education and then worked across the continent strengthened their self-perception as Europeans*²⁸². The pre-WWI period could be seen as the period of the most active and enthusiastic adoption of the European models although this was manifested mostly through architecture, fashion and lifestyle, and very rarely through the public-political practices²⁸³.

²⁷⁸ BOCK, G., THANE, P. Introduction. In Gisela Bock and Pat Thane (eds.) *Maternity and Gender Policies. Women and the Rise of the European Welfare States, 1880's-1950's*. London: Routledge, 1991, p.1-20

²⁷⁹ KOSSEVA, M at al. Catching up with the uncatchable: European dilemmas and identity construction on Bulgarian path to modernity. Bulgarian case report. International Centre for Minority Studies and Intercultural Relations (IMIR), 2009.

²⁸⁰ PRESHLENOVA, R. *High Education in Austria-Hungary and Bulgarians 1879-1918 – New Mentalities and New Possibilities*. Sofia, Bulgarian Society for the Studies of the 18th Century. <http://www.bulg18.com/Rumi.htm>

²⁸¹ KOLEV, Y. *Bulgarians outside Bulgaria*. Sofia: Tangra Tannakra, 2005, p. 265–269.

²⁸² KOSSEVA at al. Catching up with the uncatchable: European dilemmas and identity construction on Bulgarian path to modernity. 2009. *Op.cit*

²⁸³ *Ibid.*

1) *The Union for Child Protection –the 1st public-private partnership in child protection*

Childcare policies in the period between 1878 and 1944 can be characterized by the lack of a centralized state approach. Similarly to the European model at the same historical period, the only organizations responsible for the protection of the most vulnerable children who had lost their parents were charities and private individuals acting as sponsors. In 1928, a group of intellectuals, pediatricians and lecturers together with the Prime Minister at the time Andrei Lyapchev²⁸⁴ created the Union for Child Protection, which purpose was to put the interest of the child in the center of all interests by combining the efforts of the government in two main directions: state policy (including ministries, laws and regulations) and social sphere (including the church, charity organization, teachers and journalists). The Union represented one of the first civic organizations in the region. It was extremely proactive in establishing community-based services around the country for families with working mothers. For instance, the Union created a mobile Child Health Service, which travelled around the country showing people how to raise physically and mentally healthy children. It published a monthly journal, *Our Child*, providing practical information about the various civic organizations working with children, as well as the Union's program of events and initiatives²⁸⁵. In 1927, the Union announced an annual Child Holiday meant *to spread awareness of children's rights and unify childcare policies and funding*²⁸⁶. Up until 1944 and the regime change, the Union remained one of the most active players in the development of child welfare policies in Bulgaria.

First of their kind normative documents for child protection were enacted in 1891 and 1892: The Child Custody Law and The Law for Illegitimate Children and Orphans, which established the foundations of child protection legislation in the country²⁸⁷. At the beginning of WWI, there were already a couple of orphanages in different parts of the country. In 1931, the Union answered an international appeal from Geneva and *organized policy actions that*

²⁸⁴ Andrey Tasev Lyapchev (Tarpov) (Bulgarian: Андрей Тасев Ляпчев (Търпов)) (30 November 1866 – 6 November 1933) was a Bulgarian Prime Minister in three consecutive governments.

²⁸⁵ KRIVIRADEVA, B. *Organization and activity of social educational institutions for children, op.cit.*

²⁸⁶ *Ibid.*, p.38

²⁸⁷ POPOVA, K. *The national child. The charity and educational activity of the Child Protection Union of Bulgaria*. Sofia, LIK, 1999.

would help children of unemployed parents²⁸⁸. On September 15th, 1931 for the first time in Bulgaria there was a national fundraising campaign targeted at children from disadvantaged families of unemployed parents²⁸⁹. Although there was no state-coordinated approach up until 1944, one could say that through The Union for Child Protection, Bulgarian civic society managed to establish the foundations of an organized childcare service and their improvement. It is striking that the concept of family-type institutions that seems so distant and dysfunctional to Bulgarians today, was already in existence in 1936. Proposed by the International Service for Child Protection in Geneva, the new service of *little families* for children got popularized in Bulgaria through the journal *Our Child*. According to articles in the journals of that period, even at that early stage, the Union for Child Protection aimed to close orphanages and replace them with family-based care.

2) First Home for abandoned children

The first home for infants²⁹⁰ deprived of parental care was created in March 1878 (straight after Bulgaria gained independence from the Turkish Empire) in the city of Plovdiv. Children were affected by the continuous wars in the region and there was a strong necessity to accommodate the increasing number of orphans. With the extensive financial aid and unprecedented charity initiative for the regions, Nathalia Stolipina – the wife of General Arkadii Stolypin²⁹¹ – transformed an abandoned house to an orphanage engaging most of the existent cultural society to donate and support the needs of the institution. The home was reconstructed and enlarged multiple times, and in January 1950 started to receive full annual allowance from the communist state.

There are traces within the scientific literature from 1920s about the existence and development of homes for infants, which dates back from 1924. In the 1930s, the new institutions were called *permanent kindergartens*, and their number was limited. In Sofia, there were four such kindergartens with hundred beds, in Plovdiv – one with thirty beds, in Ruse – one with twenty beds, and in Pleven – one with forty beds. The maintenance of the

²⁸⁸ *Ibid.*

²⁸⁹ KRIVIRADEVA, B. *Organization and activity of social educational institutions for children*, *op.cit.*p.45

²⁹⁰ Infants are children from 0 to 3 years old

²⁹¹ Arkady Dmitrievich Stolypin (1822–1899) was an Imperial Russian general of artillery, governor of Eastern Rumelia and commandant of the Kremlin Palace guard

permanent kindergartens was mostly guaranteed through donations, and there was no qualified staff. The children that were accepted were mostly *social orphans* or children with living parents who were not properly taken care of and therefore suffered from different diseases or neglect. An official report from 1944 of the Communist Party stipulated that there were a total of 340 children who had passed through the *Permanent Kindergartens*: 102 of them had returned to their parents, 25 had been adopted and 109, or 32%, had passed away²⁹². During that period, there were three *Social Centers* in the whole country, with a total of 100 beds – predominantly for children with neurological health problems in General Nikolaevo (40 beds), Careva Koria (30 beds) and in Valchedrym (30 beds). The estimated needs at that moment were, however, incomparably higher: up to 20,000 beds.

Similarly, *Health Centers* specifically for children who are abandoned but needed constant medical assistance were also rare and insufficient: until 1944, their total number was four, with overall capacity of 219 beds. In Sofia, the child clinic part of the Medical University could accommodate up to 138 children; in Plovdiv, there were child departments within the main hospital that could accommodate 54 children, in Shumen 14 children and in Sofia 16 children (see Figure 12). When one takes into consideration the high level of contagious diseases spread across the country and the low level of immunization at that stage together with the post-war high rates of orphans the estimation for the need rises to 6500 beds²⁹³. According to the order of the Ministry of Interior Affairs and Public Health (1935), the first staff members had to be women between age 21 and 35 years old with a high school diploma and a specialized training for child tutoring; *It is their responsibility to reassure the correct physical and spiritual education of every child, to respect the needs of every child, to maintain connection with the biological parents when that was possible*²⁹⁴.

²⁹² KRIVIRADEVA, B. Organization and activity of socio-pedagogical institutions for children in Bulgaria- past and Present. 2009. Sofia University Press

²⁹³ *Ibid.*

²⁹⁴ Rules of procedure of child institutions, State Journal, number 62/ 20.03.1943

Year	1930-1944		
Institutions	Permanent Kindergartens	Social Centers (3 in total)	Health Centers (4 in total)
Available beds	304	100	219
Estimated needs	Not Available	20,000	6500
Cities (capacity)	Not Available	General Nikolaevo (40 beds) Careva Korja (30 beds) Valchedrym (30 beds)	Sofia Plovdiv Shumen

Figure 12 - Development of Child Services 1930-1944

3) First attempt at foster care in Bulgaria

The first attempt at creating and establishing foster care in Bulgaria happened between 1936 and 1938 and was a collective initiative of the American Near East Foundation, the Bulgarian Union for Child Protection, The National Ministry of Health and the social department of Sofia Municipality²⁹⁵. The collaboration between the Bulgarian national and non-governmental actors and the American foundation started during the first two decades of 20th century. Already in 1926, experts from this group in the field of agriculture, economics, and public health led a tour throughout the country with the aim to create a coordinated philanthropic policy in the Eastern Mediterranean²⁹⁶. The main office of the foundation was situated in the working-class refugee neighborhood of the capital called Koniovica and had served as a health and social center since 1931²⁹⁷. The social health center was financed by

²⁹⁵ ANGELOVA, M. Care, Observation, Control - first attempts for foster care in Bulgaria (1936-1938) *Balkan forum*, vol. 1, 2001

²⁹⁶ ANGELOVA, M. The Rockefeller Foundation and the American New East Foundation in Bulgaria- social work initiatives in the 1920's and 1930's. *The American Charity in Bulgarian between the two wars*. 1994

²⁹⁷ BASHEVA, H. Bulgarian Foster Care and the Bulgarian Culture until 1950's. *Bulgarian Science*, 85, 2006. (<https://nauka.bg/priemnata-grizha-v-blgariya-i-blgarsk/>)

the American foundation, Sofia municipality, and the Bulgarian Women Union. From the research of H. Basheva, we may conclude that the new center managed to investigate the living conditions of around 1000 families. Through very well-equipped offices and highly qualified personnel, which included 2 pediatricians, 2 midwives, and ward maids, the center managed to serve the neighborhood and help newborn abandoned babies to find foster care families and avoid institutionalization. At the beginning of 1937, the Ministry of Interior Affairs and National Health passed legislation which stipulated that *children who are orphans from both father and mother between three and eight years old need to be accommodated by parents with no capability to have biological children or by rich families until the age of eighteen*²⁹⁸. According to the new law, the costs were covered partly by the state budget, and the *New East Foundation*, which assured for 16 of these children qualified health care and control of the financial allowance. However, reports from 1939 done by the personnel of the center and external experts of the American foundation testify for the challenges in front of this new law for foster-care parenting. Almost two years later it became clear that the center and the state did not have the capacity to control the process and in some cases the child was moved to a different family within less than a year. The report also shows that:

*(...) children were moved to different cities far away from where they were born and that created stress and shock not only for them but also for the foster care families. The transportation of kids follows under the state strategy for inclusion of other regions of the country except Sofia. However, the move was done very mechanically. What is more, there was evidence of aggressive physical and psychological behavior towards the abandoned children*²⁹⁹.

Consequently, despite the enthusiastic beginning at the end of 1939, the foster care experiment in Bulgaria was put to an end. As a conclusion from this experience, we can already understand the complexity of protection policies vis-a-vis abandoned children. Already at that early stage of the new Bulgarian government it became apparent that neither state social policy for child protection nor charity organizations could be successful on their own. Although with time this experience has been almost erased from the state's collective memory, we found it important to show its relevance in today's struggle for the establishment

²⁹⁸ *Ibid.*

²⁹⁹ *Ibid.*

of alternatives to institutionalization. What is more if one does not know the year of the above cited report, one could think that it reveals some of today's challenges. Almost hundred years later the successful implication of the alternative community based centers meets the same difficulties.

All these historical particularities of European social policy concerning children and family would form the roots of the Bulgarian communist legal and political framework concerning children. The new government after the 9th of September, 1944 was influenced more than it is usually understood by this historical continuity. As S. Baloutzova proves in her PhD, despite the pioneering socialist domination over childcare policies before the regime was established, the Bulgarian monarchist government already had numerous initiatives for child development and prosperity³⁰⁰. Stepping up on the pre-socialist legislation, the Communist party used what had been already established and twisted it towards its own legacy over the next couple of decades. In the socialist ideology of social action, the logic behind children laws was fused with the state's desire to control the family unit and its planning.

B - The Bulgarian centralized state approach and the Soviet Influence (1945-1989): Full state control and institutionalization of child protection

Before arriving at the current deinstitutionalization reform, we will map the route of how and why institutionalization prevailed in Bulgaria. After WWII, Bulgaria cut its bonds with the Western practices and became a Soviet satellite. The period between 1944 and 1989 was marked by centralization of childcare services, during which the Bulgarian Communist government was the sole body responsible for the education and welfare of children deprived of parental care³⁰¹. There was no involvement on the part of the wider society and Western influence in this sphere was reduced to a minimum.

It is important to note that during the Soviet Era, the concept of Social Policy *became an empty concept due to the fact that all the policies during Communism were 'social' by*

³⁰⁰ BALOUTZOVA, S. *State Legislation on Family and Social Policy in Bulgaria, 1918-1944*. University of Cambridge, UK: PhD Dissertation, 2005, p.233

³⁰¹ KRIVIRADEVA, B. *Organization and activity of social educational institutions for children*, Gabrovo:2009.

definition³⁰². The main motto of the Communist period was: *All in the name of the person. All for the benefit of people*³⁰³. Such an approach empowered the state to reallocate resources in the name of the public good. It aimed to provide free healthcare and education for all (based on Marxist ideology), public pensions for all citizens equally, *and a safety net for those incapable of taking an active role in the socialist work life; put in other words the 'paradise of egalitarianism or classless society'*³⁰⁴. The state had the means to raise funds and finance the social sphere so that everyone got access to and benefited from it. The discrepancy between ideology and reality occurred when those who contributed the most got back disproportionately little or no benefits. The political elite, represented by a single political force – the Communist Party – had all the power to determine what the social policies would be and who would benefit from them.

In the Constitution of the People's Republic of Bulgaria (1945-1999), the communist regime, from the very beginning of its power, initiated changes in the regulation of the social, family and child policies³⁰⁵. According to the new legislation, all children were granted equal rights despite the marital or extramarital status of their parents (1947), new measures were also adopted concerning health care and pregnancy prevention (1946) and increase of the fertility instruments encouraging families to have more than one child (1951, 1967, 1968, 1985)³⁰⁶. The biggest mass public- political organization of socialist Bulgaria –*The Fatherland Front*³⁰⁷ – published the book *Let's Live and Work in a Communist Way*, which described the framework of the socialist family. Inside, inspired by the governance period of Stalin, the Bulgarian (or any socialist) family was recognized as the basic cell of society, and the state as the body, which provides all necessary conditions for the cell's survival and well-being. Instead of the bourgeois family tradition, the regime established a framework of the family unit that soon would become the pillar of socialist ideology.

³⁰² CERAMI, A. *Europeanization and Social Policy in Central and Eastern Europe*, *op.cit.*

³⁰³ Such slogans were considered to be one of the main instruments of the political propaganda.

³⁰⁴ *Ibid.*

³⁰⁵ OFFICIAL JOURNAL vol. 284, 1947 (<http://dv.parliament.bg/DVWeb/index.faces>)

³⁰⁶ BALUTZOVA, S. *The denied legacy: Pre-socialist roots of child welfare legislation under socialism (1918-1944)*, *op.cit.*

³⁰⁷ The Fatherland Front (Otechestven Front) was originally a Bulgarian political resistance movement during World War II.

In order to put in place the new child welfare, the first communist Prime Minister Georgi Dimitrov, put as a priority two major policies related to female employment and communist education of the youth. *The party wanted to see families based on the independence of the spouses from the older generation, economic and legal equality between husband and wife, and their dedication to socialism*³⁰⁸. These policy goals required new legislation, which included in October 1944 a government decree declaring *all women and men equal before the law in all domains of economic, governmental, and socio-political life*³⁰⁹. This measure was followed by a new marriage decree, which *gave spouses all opportunities to choose their profession and obliged them to contribute to the family income according to their possibilities*³¹⁰. This ideology was married to the idea that the state will save women from their *home slavery* by constructing multiple facilities for exterior care of children (including kindergartens, orphanages, canteens, etc.), which will relieve women and at the same time give free arena of the state to deliver the “right” education and disseminate propaganda from the earliest age possible.

Children who were born from unmarried mothers represented a complicated case for the Communist party, since its doctrine was pronatalist and at the same time affirmed civil marriage as an important precondition for a “moral” socialist family. Therefore, from the very beginning, the socialist legislation (Constitution from 1947/1971) stipulated that *children born in and out of the wedlock were equal*³¹¹. However, despite this precondition, the state authorities knew that they had to discourage and prevent extramarital births. Since there was no sexual education at school, it was up to the parents to protect and control the sexuality of their children, and more importantly daughters, so that the whole family was not stigmatized as failed³¹². To a great extent, the *Mother and Child Homes* had as a mission to balance the increased fertility rates and the moral condemnation of unmarried couples. In cases of social or medical complications, in order to protect the family and its units from “failure” (most

³⁰⁸ BRUNBAURER, U. KASSANOVA. A. Household and families in the Balkans Two decades of Historical families, *op.cit.*

³⁰⁹ OFICIAL JOURNAL, vol. 227/1944:1 (<http://dv.parliament.bg/DVWeb/index.faces>)

³¹⁰ BRUNBAURER, U. KASSANOVA. A. Creating a socialist way of life: Family and Reproduction Policies in Bulgaria: 1944-1989 (2004), in KASER, K. Household and families in the Balkans Two decades of Historical family research at University of Graz. Studies on South East Europe, 2012, vol. 13, LIT Verlag Münster, p. 625.

³¹¹ *Ibid.*

³¹² *Ibid.*

often expressed by an inability to perform in the workplace), the child would be taken away from the family and sent to a child care home or institution. However, the state apparatus soon realized that taking care of the children was counterproductive to the social order (the number of “unwanted” children increased from 2.4% to 10% by the 1960s) and more expensive for the state budget in a long term.

All other sources of influence, including most religious rituals and traditions, were strongly criticized and accused of being the source of negative attitudes and degradation of the well-being of the socialist family. The family as a whole (not only men or women, but both together) became the actor of policies, which aimed at penetrating into the deepest layers of the personal and professional development of people. The majority of these policies were unified under the so called “Family Codes”. The priority of these Codes might have changed over time, but included, for instance, the eradication of divorce:

*The extensive propaganda in the media since late 1960s, as well as corresponding activities by the Fatherland Front, presented marriage as the only normal way of life and called it the precondition of the development of socialist personality*³¹³.

This quote exemplifies the centralized state social policy since the early 1940s, when, through fast and most often undemocratic methods such as widespread *expropriation of property, collectivization of resources, and rapid industrialization*, the Soviet state aimed to replace monarchist capitalism and its economic basis with socialism³¹⁴. In relation to children deprived of parental care and attention, the socialist order implied the very same principles as with the rest of the population and implemented a state-centered approach which was soon legalized through the *Law of Social Care, Protection and Education of Children*³¹⁵. After the devastating impact of WWII, most of the family support social schemes introduced first throughout the USSR preached institutional care as the best alternative to a family for abandoned children. The new legislation centralized any public policy in relation to children and established their future role in the formation of a *strong and healthy socialist society*³¹⁶.

³¹³ KASER, K. Household and families in the Balkans: Two Decades of Historical University Research at University of Graz. *Studies on South East Europe*, 2012, vol. 13, p.625

³¹⁴ CERAMI, A. Europeanization and Social Policy in Central and Eastern Europe, *op.cit.*

³¹⁵ STATE JOURNAL, vol. 242 from 22nd of October 1926 replaced by SG 76 from 2nd of April 1948

³¹⁶ STATE JOURNAL, *Law for public care and child education*, 1946- p.94

Children were used as a policy instrument and the purpose of child and family policies was entirely subjected to the interest of the state as a whole.

*Children and youth represent the citizens of tomorrow that will construct our future (...) For the state governance, it is important to protect and stream the new wave of youth and to be reassured that the new generation will be strong and with pure spirit and not immoral and degraded*³¹⁷.

Any legacy from the previous regime (religious, political, and/or social) was viewed as extremely negative, and so it had to be replaced by a new and stronger ideology. Children were perceived as the driving force and the future of this change. Following the great economic upheaval in the 1960s and the 1970s, the government introduced a considerable increase of social family aids and switched its focus of critique from the lonely mothers to the mothers who abandon their children. *Now mothers who left their children were said to be full of egoism and bourgeois behavior, searching for a comfortable life and adopting “Western models”*³¹⁸.

1) The beginning of institutional culture (1947-1960) - Institutions as *Social Utility*

In 1947, the Ministry of Social Policy put in place a new set of rules for orphanages as well as for hostels for children in need and from socially disadvantaged backgrounds. This legal framework was the beginning of the centralized state approach towards care and education of children in need. Since 1947, the legislator differentiated between two groups of children: the ‘biological orphans’ and the ‘social orphans’. On the one hand, the framework defined orphanages (hostels for orphans) as institutions for children and young people in care who are biological orphans between 3 and 25 years old, who have neither living parents nor relatives. On the other hand, it created a separate category children and young people whose parents/ parent cannot raise their children due to poverty, incarceration, physical abuse, abandonment, physical or intellectual disability etc. Individuals who met one of these definitions were provided with either of the two placements, which aimed to provide material

³¹⁷ GERDJIKOV, D. *Central council for social care and education of children. Social Laws*.1948, book 7-10, p.250

³¹⁸ BRUNNBAURER, U. KASSANOVA. A. *Creating a socialist way of life: family and Reproduction Policies in Bulgaria: 1944-1989* (2004), *op.cit.*, p. 481

and moral conditions for the correct physical and spiritual development; love for labor, healthy habits and respect to the nation.

At that period, the orphans could stay in the institution until they were twenty five years old or even longer, if they were yet to complete higher education. Such state measures put the beginning of a series of actions towards a decreased level of child mortality and the provision of optimal conditions for children in need. Both types of institutions were managed by a director who had to have at least a primary teacher's diploma and who was responsible for the entire educational and administrative management realization of the institution. Article 40 of the interior regulations states that a new opening could be also initiated by social organizations for public care if they follow the norms and rules set by the *Ministry of Social Affairs*. Despite the normative control, it should be pointed that such a clause allows and encourages public organizations (some of which existed before 1944) to participate in the recovery and wellbeing of the children in need.

By 1952, the state had all legal tools to take over the management and control over the homes for children, initiating a new set of rules: *From the year 1952, the Homes for Children and Youth move under the supervision of the Ministry of Education*³¹⁹ (article 31, p.61). According to this new norm, the children who were eligible to be accommodated in the Home are: *children without parents, children living under the poverty line with one or no parents, children whose parents had severe disabilities or are considered dangerous for the wellbeing of the children* (article 23). Thus, under the new rules, the biological and social orphans were merged together. The functions of directors of institutions remained the same, but his/her duties were monitored and supported in case of need by a Council composed of representatives of the Party, the Youth organizations, the Bulgarian Red Cross, and other public organizations (article 17). The Council operated until the next legal transformation in 1974, when to the above-mentioned child profile, the Party added *children whose parents work outside of the city or whose parents did not find appropriate school for their children* (article 29). Such an increase of the target group could be explained by the economic advantage of the institution and the facility of the communist state to use the institutional type of care instead of providing social support to the families in difficult economic or social situation. The rupture with the Council also put the institutions into a much bigger isolation

³¹⁹ In Bulgarian: Narodna Prosveta

than before, keeping visible only its material and physical existence. As a result, the integration of the institutionalized youth, as well as family reunification were left out as priorities.

What should be pointed out is that the regulation voted in 1974 was valid until year 2000, when the Ministry of Education adopted the latest regulation for homes management. The regulation from 1974 practically replaced the old one, and according to many its practical implementation was controversial. Article 2 of the new law changed the name of the institutions from *Homes for Children and Youth* to *Homes for Children Deprived of Parental Care* and defines the institutions as places with social utility and national value whose aim and function is determined by the *Ministry of Education*. However, when one reads the law, it becomes clear that there is an ambiguity in the definition of the term “social utility”. Article 26 mentions that within these institutions there is rehabilitation, corrective and educative function.

Children from 0 to 3 years old were accommodated in state pre-kindergarten institutions, or the so-called *Homes of Mother and Child*. However, the staff taking care of the children was hired by the *Ministry of National Education*. Children from 3 to 7 years old were put in orphanages, boardinghouses or hostels for orphans, which were under the responsibility of the *Ministry of Social Policy* – since 1947, the *Ministry of Labour and Social Affairs* – and since 1951 under the *Ministry of National Health and Social Care*. Children from 7 to 18 years old fell under the *Ministry of Education*. All these different institutions were named “homes” to strengthen the idea that when parents could not take care of their children, education, care and housing would be provided by the state authorities. This fragmentation of responsibility over child protection lasted until the end of the regime and was associated with never-ending disputes over resources among the different ministries. As a result of the fragmented budgeting of services, the infrastructure and the material conditions of the institutions at the beginning of the regime were very limited. According to the national archives, in the 1940s and 1950s there were *outside sanitary facilities such as toilets and bathrooms, no hot water, bedrooms with 20-30 beds in the same room (very often two children slept in one bed), no regular heating, and kitchens situated in humid basements*³²⁰. These living conditions were however also true for the majority of Bulgarian citizens in the

³²⁰ *Ibid.* p.95

post-war period until the end of the 1950s. Research from 1977 by the Bulgarian sociologist C. Kuranov concluded that *equality within the developed socialistic society* was only a chimera.

*Within the group of the poorest citizens of the country at that period there were between 80 000 and 100 000 citizens, and even according to socialistic reviews their life was more than miserable, with no running water, no running electricity, and houses made out of mud*³²¹.

Hence, the poor living conditions of the Homes were not a reason for the population to raise against the existence of the child institutions. On the contrary, in some situations, families lived in such misery that they would voluntarily send one or two of their children to the state institutions. The institutions represented, in some cases, the only possible option for families, and according to resources from that time, directors could not manage to provide enough spaces for the demand (2015/19).

*In a report for the Ministry of Social Affairs in 1948 a director points out that for the orphanage in Plovdiv there were 700 demands for 250 places coming mostly from families with one parent*³²².

Already in 1955, Bulgaria had 1,101 % of its total children in institutional care³²³. This is some of the highest percentages in comparison to the other twenty seven countries of the Soviet Union. As Figure 13 shows, the highest rate of institutionalized children for that period is in Romania (1, 8%) in contrast to the lowest percentage in Albania (0, 05%). The statistics presented below should be taken with precaution because as the authors of the study foreshadow there was no common database with statistics covering all countries of the region. What is more, similarly to the situation at the present time there is no common standard for measurement and categorization of institutionalized children. What is more, *country classifications of children by level of disability are increasingly arbitrary, and some*

³²¹ CEKOV, N. The myth for the good life during socialism. Deuche Welle, 2014, available at: <http://www.dw.com/bg/митът-за-хубавия-живот-при-социализма/a-18062414>

³²² *Ibid.*

³²³ TOBIS, D. Moving from Residential Institutions to Community Based Social Services in Central and Eastern Europe and the Former Soviet Union, World Bank, 2000.

residential institutions have inflated the number of children on their rosters to increase government funding for those institutions³²⁴.

³²⁴ *Ibid.*

Number of Children in Residential Institutions in
Central and Eastern and the Former Soviet Union 1995

Country	Total number of children under 18	Children in residential institutions			Share of total children in institutions (percent) ^b	Share of children with disabilities in institutions (percent) ^b
		Without disabilities	With disabilities	Total a		
Albania	1,246,000			585 ^c	0.05	
Armenia	1,213,000			10131	0.80	
Azerbaijan	2,828,000	1,148 ^c	695	1.843	0.20	0.07
Belarus	2,655,000	5.587	1.841	7.428	0.30	0.70
Bosnia and Herzegovina	933.000					
Bulgaria	1,903,000	12.718	8.246	20.964	1.101	4.0
Croatia	1,034,000					
Czech Republic	2,400,000	8,684 ^d	11.583	20.267	0.80	5.0
Estonia	358.000	1.47	404	1.874	0.50	1.0
Georgia	1,529,000	723	1.634	2.357	0.20	1.0
Hungary	2,250,000	9.708	738	10.446	0.50	0.3
Kazakhstan	5,890,000					
Kyrgyz Republic	1,904,000					
Latvia	609.000	1,751 ^e	420	2.171	0.40	0.70
Lithuania	957.000	5.037	1.790	6.827	0.70	0.2
Macedonia FYR	636.000					
Moldova	1,382,000	1.084	600	1.684	0.10	0.4
Poland	10,589,000	30,265 ^d	37.700	67.700	0.60	4.0
Romania	5,646,000	39,622 ^d	62.230	101.852	1.801	11.00
Russia	37,115,000	106.094	231.433	337.527	0.90	6.00
Slovak Republic	1,468,000	6.815	4.386	11.201	0.80	3.0
Slovenia	426.000					
Tajikistan	2,842,000					
Turkmenistan	1,887,000					
Ukraine	12,377,000	16.433	8.525	24.958	0.20	0.7
Uzbekistan	10,614,000					
Yugoslavia	2,678,000					
Total for countries with data available	115,369,000	247.139	372.225	630.08	0.70	4.0
Total estimate for countries with no data available	28,844,000	79,188 ^f	122.72	201.908	0.70	4.0
Total	115,369,000	326.327	494.945	821.272	0.70	4.0

Figure 13 - Number of Children in Residential Institutions in Central and Eastern and the Former Soviet Union 1995

2) Institutionalization covers the whole country

Starting in the 1940s, the construction of institutions grew gradually, and by 1965 every regional city had its own institution (see Figure 16)³²⁵. Despite the limited data before 1989, one should be careful not to minimize the main political priority behind child institutions before 1989 as an instrument of repression and control. On the one hand, institutions represented an important alternative to the devastated post-war situation of the Bulgarian state. On the other hand, by marginalizing and isolating these children in separate groups the state could easily influence and control the transformation of these vulnerable children to ideal communist citizens. The Party had to reassure that no other actors are involved in the formation of the socialist society and thus no other values are spread to the Youth. Further, the main accusation of segregation in rural areas also does not seem fully accurate, since at that point in time there was a strong state policy for activation of territorial development and establishment of post offices, schools, train stations, hospitals, etc. in rural areas. Few of these child institutions were outside of an active rural region with no direct access to services. The Institutional Homes had to provide education, medical services, and pleasures so that children do not need to go out of their environment and put them in danger. However, our study shows that such isolation created preconditions for the development of a specific institutional culture and understanding that everything is allowed behind institutional walls.

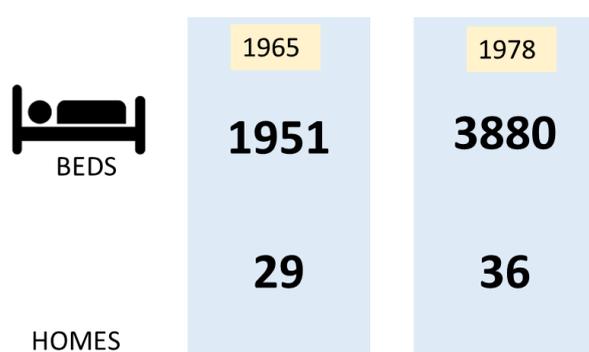


Figure 14 - Number and Location of Homes and Beds for Disabled Children in Bulgaria 1965 versus 1978

³²⁵ DOICHINOVA, A. Review of the development of large scale institutions for babies. *Journal Grow Without Parents*, Sofia, A.S., 1999, p. 99-112.

The demand for institutional care increased drastically throughout the whole Soviet Union and in 1978 there was an international conference in Moscow dedicated to the abandoned and disabled children living in institutional care. Proclaimed by the Party to be the International Year of Children, Russia stipulated for the first time that *despite the fact that it is the state that is responsible for the institutions, the mass social movements should be also involved in the integration of the young populations and their contribution to the economic and cultural well-being of the Soviet Union*³²⁶. Already in the 1980s, the Bulgarian Women's Movement started to communicate with the local homes and discuss institutional issues at the local level through the Fatherland Front and the respective ministries. Such multi-level communication was rare and innovative for its time. By the 1990's *at least 820,000 poor vulnerable, or children with disabilities in the 27 countries of Central and Eastern Europe and the former Soviet Union live the early years of their lives isolated in 5,500 large, regimented residential institutions (including 495,000 children with disabilities)*³²⁷.

a) Homes for Mother and Child

Within the period 1944-1952, the kindergartens and the *Homes for Mother and Child* started gaining more popularity among politicians and on 31st of August 1946, the Bulgarian government voted the Law for Health Protection of Children. The same year the number of available beds increased from 100 to 200 in the capital's *Homes for Mother and Child*. Alarmed by the rising child mortality, the government voted higher budget for the development and construction of more of these homes, and by 1947 increased the availability of beds to 650, especially in the areas where child mortality went up to 200 children out of 1,000: Tervel (274), Momchilovgrad (294.7), Kubrat (197.5). By 1953, these were the municipalities where the state constructed thirteen more *Homes for Mother and Child* and the number of beds reached 860. Deficits of specialized personnel, difficulties in supervision and supply of food and medications, as well as lack of research on maternal and child health were among the key problems identified within this period that were reflected in slow decrease of child mortality that put Bulgaria in one of the last places in Europe. According to Conev,

³²⁶ CENTRAL NATIONAL ARCHIVES fund.2582, year 1, archive unit. 45 , p. 1

³²⁷ TOBIS, D. Moving from Residential Institutions to Community Based Social Services in Central and Eastern Europe and the Former Soviet Union, *op.cit.*

these problems undoubtedly affect the development of the second stage (1952-1965) of the pediatric help and evolution of *Homes for Mother and Child*.

By 1965, the state set a priority to construct homes for children deprived of parental care in every regional city. The so-called third period of the evolution of pediatric care and prevention in child health is characterized by the construction of child health services in the little villages which are attached to the regional hospitals and even faster development of kindergartens and institution for orphans. At the end of this five-year period in 1970, the available places reached 2,478. The historical analysis shows that within the period 1944-1975 the care for children at risk from zero to three years old deprived of parental care, or coming from divorced or sick parents became more and more structured and centralized around the construction of *Homes for Mother and Child*. These homes were defined as health and educational institutions where the state also placed infants with physical disabilities. To compare, if in 1944 there were only four homes of this type with a capacity of 190 beds (the permanent kindergartens), by 1975 the care became much more structured and professionalized with around 3,000 beds. Figure 15³²⁸ illustrates that by 1973 the institutions for young children were present in every administrative district of the country, in addition to two specialized institutions for children born outside of marriage and one specialized home in Buzovgrad (village next to Kazanlak) for children with severe malformations. These numbers also show the increase in specialized medical staff which led to a considerable decrease of child mortality. By 1974, the average level decreased almost four times to 25.5 per 1,000 live births. The historical data from Kriviradeva's study also demonstrate that child mortality rates were not the same among the different ethnic groups: among the Turkish ethnos – 38%, Roma 36%, Bulgarians 21.3% and thus the proportion of the population in the *Homes Mother and Child* also includes children from different ethnos.

³²⁸ KRIVIRADEVA, B. *Child protection in republic of Bulgaria, op.cit.*

Year	1960	1965	1970	1973
Number of Institutions	19	28	31	32
Beds	1280	2098	2478	2712
Doctors	31	48	51	72
Medical Staff	280	408	560	892

Figure 15 - Development of Homes Mother and Child 1960-1973

b) Categories of children

Differentiation among children within the norm for physical and mental health and children with pathologies follows the medical model of the pre-WWII period, which was developed in the 19th century and was a dominant one in most European countries as well as North America. Within the existent national archives up until 1960s there is no record on the ethnical or religious background of the children. As of the category of children born outside marriage, until the beginning of 1960s the only differentiation was between parents with tuberculosis and mentally retarded parents. In the 1960s, a new category appeared: “students”. It was later divided into “Bulgarian students” and “foreign students”, and by the end of the 1960s it represented the second largest category of children accommodated in institutions, after the “social category”. At the end of the 1970s and 1980s, the official categories were: children from families with 1) social and financial deprivation, 2) mentally disturbed parents. According to reports from that time, within the group of children with socially deprived parents fell all children from different ethnical background – such as Roma or Turkish, explicitly mentioned in governmental reports after the 1970s. It must be emphasized that during the communist period it was a taboo to publicly express any of the problems related to ethnic minorities. According to Kassabova, there was a secret logic behind the accommodation of ethnic minorities within the institutions for child care, and that was the desire of the state to redefine social space for these groups of people and thus impose more control on the ethnic borders within the society: *When I became a director of the institution in the 1980s, the majority of children were from Roma ethnicity. Most of them arrived directly from the maternity... parents just abandoned them with no interest until they turn three years*

old. Legally, the institutions had no right to publicly reveal the children's origin and thus each child institution had its own way of listing the background of the children, which is entirely dependent on the opinion of the home's main doctor and director. There is no precise data that would allow us to conclude that the children belonging to ethnic minorities were adopted less often than Bulgarian children. However, even the absence of such transparency provokes questions related to the public efforts for integration of the different children in need and their protection. At the beginning of the 1950s, all charity organizations which were established prior to the regime were dismissed from the public spectrum. As Kassabova points out in her analysis the period 1944-1950 was characterized by institutional chaos and increasing distance from *uncomfortable state agents who were resistant to the changes in the first year of the new regime*³²⁹. The social political agencies took some time to find their place among the most vulnerable members of society, and that was directly reflected in the case of abandoned children.

Regardless of the individual situation of the child, children with physical or/and mental disabilities were categorized and labeled together as a risk category (see Figure 15), for which parents could not provide in-home care and for whom the state provided large state-run institutions, so that the parents could follow their social obligations without being distracted. There was also a third group of children with physical disabilities who were placed in low-difficulty work depending on their disability (usually in factories). Thus, collective interests took priority over the individual. This summarizes precisely the thinking behind the so-called *ideology of defectology*³³⁰. Anyone who deviated from the accepted norm was automatically marked as defective, and thus his or her place within the society was questioned. By taking care of the "different" children, the state reaffirmed its ideology, protecting the new generation from the bad influence of the old bourgeois regime. However, it should not be ignored that the state also found a way to integrate disabled people into the workforce (through special work places in factories) and thus decrease their dependence. The risk categories determined by the state included children whose parents were physically,

³²⁹ KASSABOVA, A. The state child. Etatisation of childcare in socialist Bulgaria. In ELENKOV, I., KOLEVA, D., *Childhood under Socialism: Political, Institutional and Biographical Perspectives*. Centre for Advanced Studies: Riva, Sofia, 2010, p.94-108

³³⁰ VANN, H. B. Deinstitutionalization and community living-outcomes and costs: report of a European Study. Country Report Bulgaria. In *Deinstitutionalisation and community living outcomes and costs: report of a European Study, 2001 Volumes 1-3*: Canterbury: Tizard Centre, University of Kent http://www.kent.ac.uk/tizard/research/research_projects/DECLOC_Volume_3_Country_Reports.pdf

emotionally or financially unable to take care of them; children whose parents were in prison, homeless, etc.; and children who committed a crime or suffered from a physical or mental condition.

From Figure 16 and 17³³¹ it becomes clear that in comparison to 1965, the number of beds for disabled people almost doubled by 1978, and this could testify the preparation of the state to welcome greater numbers of disabled people in residential care. In 1965 there were total of twenty nine homes (for physical and psychic disability and children who work) with a capacity of 1951 beds. There were only two homes for children with physical disabilities in Lovech and Plovdiv and 17 homes for children with psychic disabilities situated in twenty eight cities spread across the territory of the country. The institutions for disabled were distributed almost equally across the country with only Plovdiv and Sofia with more than one institution for children who work or study in special factories in the same city. It is interesting to note that in Plovdiv and Varna (the second and the third biggest city in the country) there were no Homes for children with psychic disabilities. On contrary in Mihailovgrad (today known as Montana), situated thirty kilometers from the Serbian border in the northwestern part of Bulgaria, we detect both in 1965 and 1978, the biggest Home for children with psychic disabilities numbering 135 and 140 beds. In 1978, the total number of Homes did not increase in proportion with the beds availability. Within thirty six institutions the state provided 3880 available places for all categories of children. Hence, there were certain cities such as Burgas, Kustendil, Sliven or Tolbuhin where the institution grew with approximately hundred new beds. Stara Zagora (administrative capital of the Stara Zagora Region) and the sixth largest city in Bulgaria acquired two new institutions with 145 beds available for children with psychic disabilities All this data serves us an indication for the distribution of institutional care across Bulgaria throughout the second half of the communist rule. We underline that the availability of beds shows the maximum amount of children that can be accommodated in it. There was no reliable data on what percentage of these beds were occupied in the different periods of time. Our research demonstrates that this lack of accuracy in the statistics persists until today and it is true for both national and international sources.

³³¹ Data retrieved from the National Statistical Institute in October, 2017

INSTITUTION FOR DISABLED CHILDREN - DISTRIBUTION PER TOWN 1965

	Children with <u>physical</u> disabilities		Children with <u>psychic</u> disabilities		Children who work/ study in special factories	
	Homes	Beds	Homes	Beds	Homes	Beds
Blagoevgrad			1	73	1	107
Burgas			1	60		
Varna					1	60
VENKO			1	45	1	155
TARNAVO						
Vidin			1	70		
Vraca			1	60		
Gabravo						
Kardjali			1	40		
Kustendil			1	40		
Lovech	1	50				
Mihailovgrad			1	135		
Pazardjik						
Pernik			1	60		
Pleven						
Plovdiv	1	50			2	145
Razgrad						
Ruse			1	42		
Silistra			1	50	1	105
Sliven			1	54		
Smolian						
Sofia			1	70	3	106
Sofia region			1	105		
Stara Zagora						
Tolbuhin			1	50		
Targovishte			1	60		
Haskovo			1	40	1	119
Shumen						
Yambol						
<i>Total</i>	<i>2</i>	<i>100</i>	<i>17</i>	<i>1054</i>	<i>10</i>	<i>797</i>
total homes	29					
total beds	1951					

Figure 16 - Distribution of institutions for disabled children per town 1965

INSTITUTION FOR DISABLED CHILDREN - DISTRUBUTION PER TOWN 1978						
	Children with <u>physical</u> disabilities		Children with <u>psychic</u> disabilities		Children who work/ study in special factories	
	Homes	Beds	Homes	Beds	Homes	Beds
Blagoevgrad	1	110	1	40	1	140
Burgas			2	190	1	102
Varna					1	300
VENKO			1	55	2	430
Vidin			1	70		
Vraca			1	60		
Gabravo						
Kardjali			1	85		
Kustendil			2	140		
Lovech	1	170				
Mihailovgrad			1	140		
Pazardjik						
Pernik						
Pleven	1	60				
Plovdiv	1	50	1	40	1	300
Razgrad						
Ruse	1	152				
Silistra			1	60	1	153
Sliven			1	112		
Smolian			1	60		
Sofia			1	81	2	94
Sofia region	1	101	1	120		
Stara Zagora			2	145		
Tolbuhin			1	115		
Targovishte			1	85		
Haskovo					1	120
Shumen						
Yambol						
<i>Total</i>	<i>6</i>	<i>643</i>	<i>20</i>	<i>1598</i>	<i>10</i>	<i>1639</i>
total homes	36					
total beds	3880					

Figure 17 - Distribution of institutions for disabled children per town 1978

This research will not attempt to analyze in detail why certain categories were considered by the government more of a risk than others. However, it is important to note the variations on the definition of “risk” and its “categories” when considering what type of child policy the state follows. In that historical period, the risk was perceived as a threat faced not so much by the children, but by those around them. Those individuals needed to be isolated and educated away from public schools. The homes for social care (both physical and mental disabilities) were located in both rural and urban areas (see Figure 14). Against today’s conviction that mental institutions were isolated in rural areas, the statistics show that they were present in big and small cities, as well as in villages. During the transition period, however, as we will demonstrate later, most of the small regions were deserted, and the institutions’ isolation started to be more and more visible due to lack of policies for stimulation of rural regions.

The institutionalization during that period had both a positive and a negative impact on the population. For instance, it undoubtedly contributed to the decrease of child mortality and early childhood sickness. On the other hand, since there was no real discussion over the institutionalization measures in the society, there was no real assessment of these policies on the long-term development of children. As a result, the ones that dominated were built upon the importance of discipline and collective life³³². Between the 1917 and 1922 Russia counted roughly around 7 million homeless children, *which started to be evacuated by state authorities into state driven facilities*³³³. The Soviet Society was challenged upon the understanding that collective upbringing was more effective than individual one in the formation of the Soviet ideal citizen. Asked to create a rehabilitation program for the 7 million homeless children, *Anton Makarenko in the 1920’s and 1930’s formed the basis for the collective upbringing approaches used for the next fifty years in the Soviet Union. (...) His approach could be summarized as one which emphasized work, collective discipline and group competitiveness*³³⁴. The accent on discipline eradicated, to a great extent, the notion of individual care and personalized attention. Our empirical analysis and the personal experiences of social workers in Bulgaria brought awareness to the fact that, from a

³³² FILONOV, G. N. 'Anton Makarenko (1888–1939)', in Prospects: the quarterly review of comparative education UNESCO: *International Bureau of Education*, Paris. vol. XXIV, no. 1/2, 1994, p. 77-91.

³³³ TOBIS, D. Moving from Residential Institutions to Community Based Social Services in Central and Eastern Europe and the Former Soviet Union, *op.cit.*

³³⁴ *Ibid.*

contemporary perspective, this tendency remained, and there is still a dilemma between care and control in children's institutions. Most of the methods utilized in the orphanages include strict restrictions, sanctions, and severe disciplinary tools.

Another misconception about this period widely spread by the media is that of the discrimination of Roma citizens. Despite our detailed search, no records of state policy against Roma citizens as representatives of a different ethnic group from that period have been found. On the contrary, the Roma population was made to attend full-time education at least until the age of 16 and, as a result, had high employment rates. The increased number of Roma children out of full-time education, along with high levels of illiteracy and poverty, today demonstrates the erosion of their social status. The state also had a direct influence on birth control and regulated the number of children per family, *thus aiming to control the qualitative and quantitative constituent of the new socialist generations and assuring a stable Communist future*³³⁵.

Before 1989 the state was the sole provider of social services and thus the party together with the respective Ministries was also the only actor who could evaluate and control the provision of services and the wellbeing of children accommodated in institutions. At that time, child mortality was one of the leading factors behind the construction of the institutions on first place and thus the decrease of its levels turns out to be one of the factors of success for their existence. In the beginning of the 1980's the vice- minister of Health Gerassim Mitrov declares in one of his speeches: *The success of our fruitful work with child institutions and the unconditional professionalism of health providers is visible through the statistics. In comparison to the 1930's the number of children with lethality has been reduced 20 times*³³⁶. The few representatives of social organizations such as the vice president of the Committee of Bulgarian Women- Jordanka Tropolova- talked more openly about the problems that might occur behind the walls of the institutions. However, we cannot ignore the fact that all official speeches and reports by the organization insisted on the *excessive efforts of the Communistic Party and the Bulgarian government to compensate for irresponsible families, lack of love and attention within the family realm*. Therefore, the information that was exposed publicly

³³⁵ BALOUTZOVA, S. The denied legacy- pre-socialist roots of child welfare legislation under socialism (Bulgaria,1918-1944) In ELENKOV,I. KOLEVA,D. *Childhood Under Socialism: Political, Institutional, and Biographical Perspectives*, Sofia,2010, p..82-94

³³⁶ KASSABOVA, *op.cit.* p.219

emphasis on the fact that the people responsible for the failures in the provision of quality of care in some of the institutions were not the politicians but *people from inside the institution, who provide administrative, medical or pedagogical assistance to the children and who liberated from parental control, do not serve children with the necessary accuracy*³³⁷. Despite the great censorship during this period, the public rhetoric at that time allowed some journalists to raise questions about infrastructure, food supply and hygiene and lack of guidelines for the personnel. These modest attempts to change some of the existing bad practices did not have any long-term effect but put the beginning of discussions related to economical costs and alternative care *The monthly cost of living of one child in our Baby Home in 1982 is 249,50 BGN. This is an incredible cost for the state and thus we need to search for alternative ways to support babies left apart by their families. For instance, in Czechoslovakia and Poland they are more financially effective methods such as the home upbringing (today foster care)*³³⁸. Despite these brief attempts of some of the directors to open the institutional problems towards society, children remain institutionalized and doors closed for any public collaboration. We might conclude that, on the one hand, the communist state policy gave protection and reassured survival and greater chances for independence of many disadvantaged children. On the other hand, however, the Communist Party visibly ignored one group of children - those categorized as *inadequate to serve the state and work for its prosperity*³³⁹ remained closed behind the institutional curtain. What strikes the attention is that at the end of the regime 1986 for the first time a Bulgarian journalist – Nikolai Volev- created a documentary “Dom N 8” dedicated to show to the public the degree of violence in institutional care for mentally retarded children at that time. Despite being largely praised abroad (multiple French and German praises for documentaries) the film did not provoke any public revolution throughout the transition period. Unfortunately, the BBC documentary ten years later only confirmed the long lasting negative impacts for the “forgotten children” and the repetitive nature of problems before and after the political transition.

³³⁷ *Ibid*, p.220

³³⁸ *Ibid*, p.223

³³⁹ *Ibid*.

Historical periods and their uncertainties

The genesis of this thesis is grounded in the controversial mechanisms involved in the transformation of large-scale institutions in parallel with exterior involvement in the country's political and social transformations. The central questions addressed by the analysis of Chapter III review the internal and external factors that stimulated political changes in the sphere of child care before Bulgaria became a member of the European Union, as well as the important preconditions for long-term solutions of the problem. To understand the context of the new reform of deinstitutionalization of services for abandoned children, as well as the positive and negative effects of the development of the post-transition period, we presented the main characteristics of child protection policies that have dominated the country since 1919.

When one studies the period between the two World Wars until 1944 in terms of child protection policies, what comes to the surface is a chaotic number of initiatives and no common strategy for child protection. To deal with high rates of child mortality and increased post-war poverty levels, the state counted predominantly on the aid of charity organizations and social initiatives of intellectuals and pediatricians. However, their number was not sufficient to mobilize the political elite and create real changes in the public policies for children. Thus, what we witness since the 1920s is an unstructured, chaotic distribution of services across the country, visible also through resistant levels of overall child mortality in the country in comparison to other countries up until the first part of the 20th century. The common social understanding was that orphans will be taken care of their relatives and extended family and thus children policies were not separated from family policies. Despite the lack of common state policy in relation to protection of children deprived of parental care, the country started to develop socio pedagogical theories and practices related to the education and social integration of these children. Child welfare started to develop slowly driven predominantly by social initiatives. The Monarchy together with the Church did not have monopoly over service provision and on the contrary stimulated social initiatives across the country.

The Communist ideologies in People's Republic of Bulgaria were a foreign imposed doctrine that ruled through repression and imposition over personal freedom. However, after strong state propaganda society embraced the family values that were set and got used to the

idea that the state is the actor that carries superior responsibility to that of parents over children. Inspired by Stalin's ideology, the Bulgarian state established a new policy framework in which the family is considered to be the smallest *cell of society* and as such is totally dependent on the state as the only institution that is responsible for its survival. Hence, the sole actor of child welfare throughout this period was the state and all legislations led to the development of new centralized homes for children divided in different categories. In the second stage of the communist governance the categorization of children deprived of parental care increased and included social and biological orphans as well as children with disabilities. The main driver behind the strong investment of the state in children policies at that period was the dominant logic behind social reforms, which included greater participation of women on the labour market and large implication of the Youth in the establishment of socialist values. Besides the legal transformations and the large spread of institutionalization process across the country, the socialist state managed to convert people's mentality drastically. Twenty years after the fall of Zhivkov's regime, institutional care as the sole response to child protection remains deeply engraved in people's mentality. As we shall demonstrate in Chapter IV after the collapse of the regime in 1989, Homes for Children Deprived of Parental Care remained active despite that most of state institutions failed and degenerated quite fast. However, influenced by the overall political and economic upheavals and high poverty levels, quality of care decreased and children gone into isolation, deprived of basic support for health, education, and general wellbeing. It was not until the year 2000 that the state pushed by European accession criteria unveiled the communist heritage of institutional care and voted new law of child protection (for the 1st time since 1974) together with the establishment of community based care. As the next chapter demonstrates, the post-communist historical period aims to transform the overall framework of state child protection policies and will turn the previous legacies towards a pro-European decentralized system of community based care. Our analysis demonstrates that child protection policies prove to be closely dependent on the political legacies at the different historical periods. Our historical analysis also proves that post to the Ottoman Empire period there is a systematic interchange of centralized and decentralized political strategies in respect to child protection (see Figure 18). From the different scope of responsibilities given to municipalities and social organizations we can judge the extent to which state authorities adopted decentralized governance enlarging the scope of municipalities and other intermediate bodies of child protection (1919-1944) or fully

centralized regulations upon children deprived of parental care (1944-1989). The post 1989 period regarded in the following Chapter IV will bring the evidences for the obstacles present in front of the return of decentralization measures in social policy.

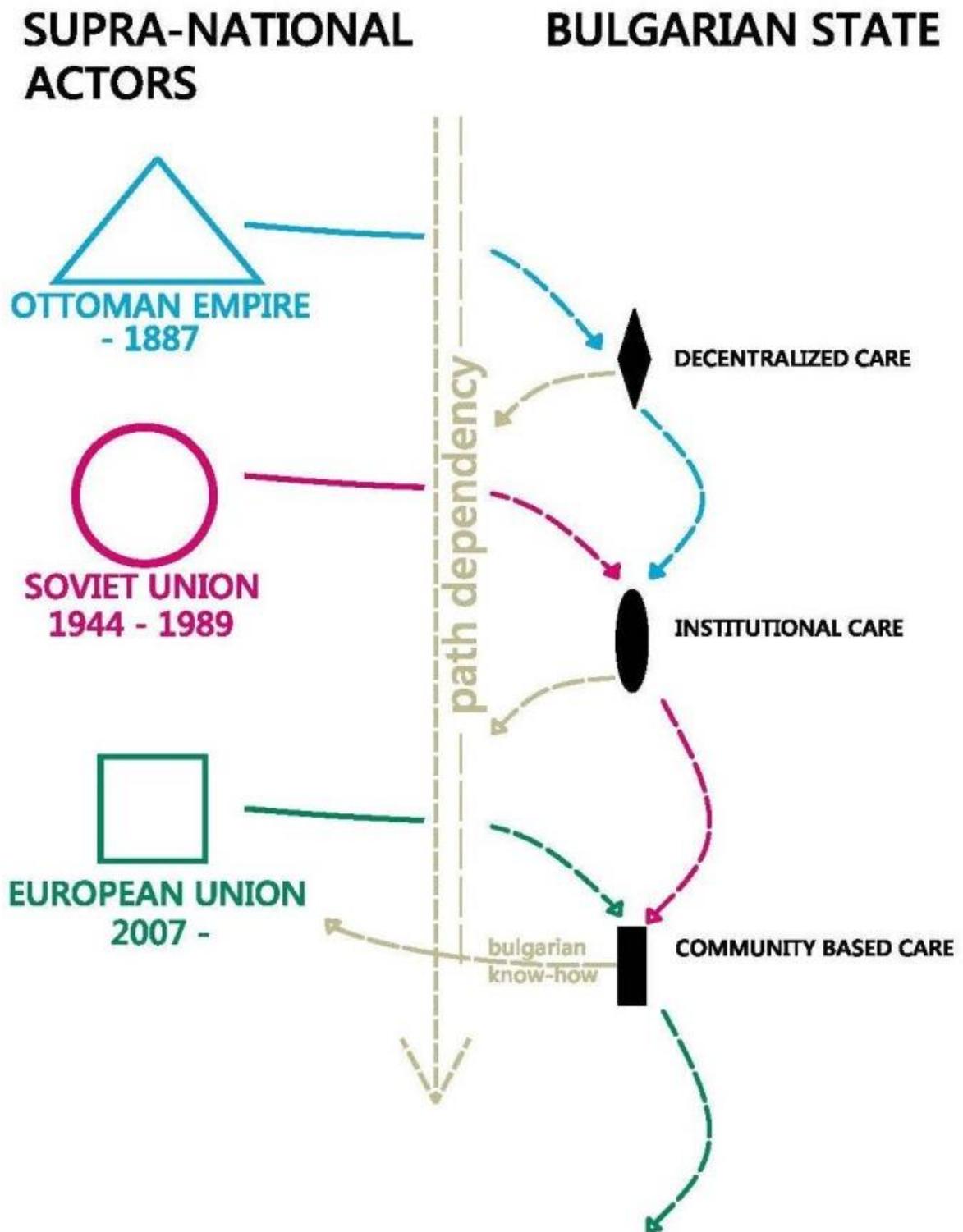


Figure 18 - Schematic representation of the evolution of child policies in Bulgaria since the Ottoman Empire. The impact of path dependency

IV - The Arduous Transition - The Path from Communist to European Child Welfare (1989-1999)

No one ever thought that the transition would be so complicated, hard and extensive. I remember the other candidate for president in 1990, M. Dertliev, planning a two-year transition. I proved to be a little less naïve foreshadowing a five years transition. We were both wrong³⁴⁰.

Zh. ZHELEV, 1st Democratically Elected President of
Republic of Bulgaria (1990-1997).

The condition of Bulgarian childcare policies did not remain untouched by the collapse of the country's forty years political system, and therefore it is important to underline the challenges emerging from the post-communist transition. This chapter will be divided in two parts. First, we will describe changes that occur with the welfare state between 1989 and 1991 and their impact on the maintenance of institutions for children in need. Looking at Todor Zhivkov's last years on power³⁴¹ helps us to contextualize the revolutionary dynamics within the Bulgarian state and check the status of Bulgarian civil society and any alternatives of the regime immediately after its fall. The second part of the chapter depicts the year of 1997 as a corner stone of the Bulgarian transition to market driven competitive welfare and the fast and aggressive erosion of the social state. As an example of the effects of such erosion we regarded the relationship between the economic collapse of the country and the increased need of institutional care. For some scientists the transition period of Bulgaria is still ongoing. However, for the purpose of our study we will consider the end of the transition period to be the date when the Bulgarian state was invited to start the negotiations for accession into the EU - 10th of December 1999. In the next chapter we will demonstrate the immediate

³⁴⁰ J. JELEV, 1st Democratically Elected President of Republic of Bulgaria (1990-1997).

³⁴¹ Todor Zhivkov retired on the 10th of November 1989

impact of the negotiations with the establishment of the first post-communist legal framework of child protection in 2000.

A - The collapse of communism

The collapse of Communism should not be viewed as a spontaneous and independent political act, but rather as a process identified by a variety of factors. The collapse and replacement of the single-party totalitarian regime by a multi-party political system, followed by free democratic elections and freedom of speech was not exactly what occurred in Bulgaria. As E. Simeonova describes in her article *A revolution in two stages: the curiosity of the Bulgarian case*³⁴², the Bulgarian revolution as a fundamental change of the political, social, and economic order occurred in two stages: *The first (November 1989 to July 1991) was marked by an overhaul of the political system. The second (December 1996 to February 1997) cleared the way for the restructuring of the economy and state social provision.* This part of the chapter aims to depict the period between the two stages of the revolution, which can be distinguished as:

*economic breakdown and permanent political and social instability caused by institutional inefficiency, frequent governmental turnover (in the period 1990–1997, seven successive governments came to power), ever-shifting parliamentary majorities, the dominance of non-parliamentary over parliamentary means of political competition, and concomitant high levels of public discontent and protest*³⁴³.

The transition period, with its economic, social and political instability, served as a precondition for the decrease of quality of child care and seriously questioned the direction that the Bulgarian welfare state should take in order to protect children who are deprived of parental care. In the following lines, we will explain some of the main causes behind this failure of the state to protect its most vulnerable citizens.

First and foremost, one should not ignore the fact that, even before the collapse of the regime, there were some severe economic problems which destabilized the country.

³⁴² MCDERMOTT, K., STIBBE, M. editors. *The 1989 Revolutions in Central and Eastern Europe: From Communism to Pluralism*. Manchester University Press, 2013

³⁴³ *Ibid.*

Starting with Gorbachev's *perestroika* in the Soviet Union and the end of Soviet economic assistance, Bulgaria – the *spoiled child of the USSR*³⁴⁴ – - started to feel some serious economic deprivation. *For example, Bulgaria profited from the remaking and re-export of cheap Soviet petrol on the world market, earning more than \$2.2 billion from this activity in the years 1981–1983. Another privilege was the subsidy of 400 million rubles for agricultural production, which Zhivkov had obtained from Brezhnev in 1973*³⁴⁵. In contrast to what had been negotiated with Brezhnev in the 1970s, Gorbachev's new policy was to stop any privileged relationships with its satellites and trade on market mechanisms: *In August 1986 when Gorbachev attempted to implement market mechanisms in the established system of the Council for Mutual Economic Aid (COMECON), whereby member states had received Soviet raw materials and in return supplied finished products regardless of quality*³⁴⁶. As it could be expected, the severe dependence on the USSR in both agricultural and energy sectors could not be overcome overnight, and the new arrangements necessarily provoked a real shock for the country and deteriorated its economic condition. People immediately felt the difference due to frequent electricity cuts and lack of heating, and that strengthened the overall feeling that the political system was not functioning anymore. The international reputation of the country also deteriorated, and Bulgaria was often thought to participate in terrorism and trafficking³⁴⁷. More disturbingly for the USSR and his own co-party members, Zhivkov acknowledged that *we have lost the competition with capitalism, and therefore:*

At a prolonged session of the Politburo, held on 25 and 28 August 1989, it was decided to:

- 1 Change the constitution taking into account the 'necessity for political pluralism, ownership transformation and the protection of civil rights';*
- 2 Change the statute of the Bulgarian Communist Party (BCP), introducing the principle of regular, multi-candidate elections in order to eliminate the possibility of permanent dictatorship by a self-selecting ruling elite;*

³⁴⁴ MCDERMOTT, K., STIBBE, M. editors. *The 1989 Revolutions in Central and Eastern Europe: From Communism to Pluralism. op.cit.*

³⁴⁵ *Ibid.*

³⁴⁶ *Ibid.*

³⁴⁷ In 1982, the state was even accused of participating in the attack against Pope John Paul II together with the Turkish terrorist Ali Agca in May of 1981.

3 *Enact a draft law for the health care system overseeing the end of free care, the reorganization of medical help with the stress on family doctors and the establishment of health insurance funds*³⁴⁸.

Bulgarian civil society in the late 1980s, in contrast to other Eastern European countries, cannot be identified as one that welcomed the fall of Zhivkov's regime with active participation and an alternative³⁴⁹. The dissidents in Bulgaria, such as *The Independent Society for the Protection of Human Rights*, *The Committee for the Protection of Religious Rights, Freedom of Conscience and Religious Values*, and the trade union *Podkrepa* started to form very gradually and did not gain popularity until the 1990s. *The main reasons for this marginality are that they were founded by relatively unknown figures, who had returned from abroad; they had few members, the majority being ex-political prisoners; and their activities were orientated outside the country toward foreign embassies, international organizations, and western radio stations*³⁵⁰. The first serious attempt at creating a consolidated coalition among thirteen opposition organizations of non-conformist intellectuals was the *Union of Demographic Forces* (UDF), which was founded on the 7th of December, 1989. The lack of clear alternatives to the communist ideologies and a consolidated opposition was also visible in the newly elected government in February 1990, which was entirely formed by some of the strongest communist party members and anti-Zhivkov opponents, naming Andrei Lukanov as prime minister and Petar Mladenov as head of state. The old communist government with a new name decided to reject (at least through their Manifesto of Democratic Socialism) the Soviet model and adopt a social democratic alternative. The year 1991 was marked by the transition of five governments during the next six years, the first direct presidential elections and the first fully democratic parliamentary elections were held and the Union of Democratic Forces won.

These last reforms of Todor Zhivkov only brought the country to greater isolation, insecurity and disorder. In May 1989, the Turkish population initiated a new massive protest, and by May 29th Zhivkov was forced by the protesters to publicly promise foreign passports

³⁴⁸ KALINOVA, E., BAEVA, I. Bulgarskite prehodi, p. 249. In MCDERMOTT, K., STIBBE, M. editors. *The 1989 Revolutions in Central and Eastern Europe: From Communism to Pluralism*. Manchester University Press, 2013. JSTOR, www.jstor.org/stable/j.ctt18mbg00.

³⁴⁹ TOMOV, T. *Prevratat 10–17 noemvri* (So a, 1998), p. 68–75.

³⁵⁰ MCDERMOTT, K., STIBBE, M. editors. *The 1989 Revolutions in Central and Eastern Europe: From Communism to Pluralism*. op.cit.

to all Bulgarian Turks who would like to join either Bulgaria or Turkey. This act marked the beginning of a movement which affected around 300,000 Bulgarian Turks and which was defined by foreign observers as *ethnic cleansing*. All of these last political actions of the leader pushed party members (especially Petar Mladenov, Minister of Foreign Affairs, and Andrey Lukanov, 1st Vice-Chairman of the Council of State) to consolidate their power against Zhivkov together with support from the USSR. On 9th of November, 1989 Zhivkov proposed his resignation, which was approved the following day by the Central Committee of the BCP. Nobody defended the leader, and the army did not intervene, since even the Minister of Defense, Dobri Djurov, was among the plotters. As Stark and Brust explain, the year 1989 *was not the year of transition in Eastern Europe, but a period of a plurality of transitions with diverse paths to different types of political institutions*³⁵¹. Bulgaria, like other Soviet satellites, could have taken different directions in development, and either fully oppose the socialist policies, or continue the Soviet legacy on new terms. Many opposition candidates did not realize how path-dependent on the Soviet legacy the social actors really were. Therefore, parties like UDF, which emphasized the repression of the Soviet regime, failed to gain popularity. On the contrary, BSP chose the strategy of continuation of socialist benefits under a new type of democratic socialism. The outcome was that unemployment sharply rose (see Figure 18), and with the enormous wave of economic migration, the state institutions failed to operate.

³⁵¹ BRUST,D.,STARK,L. Remaking the political field in Hungary; from the politics of confrontation to the politics of competition, *Journal of international affairs* , vol. 45:1

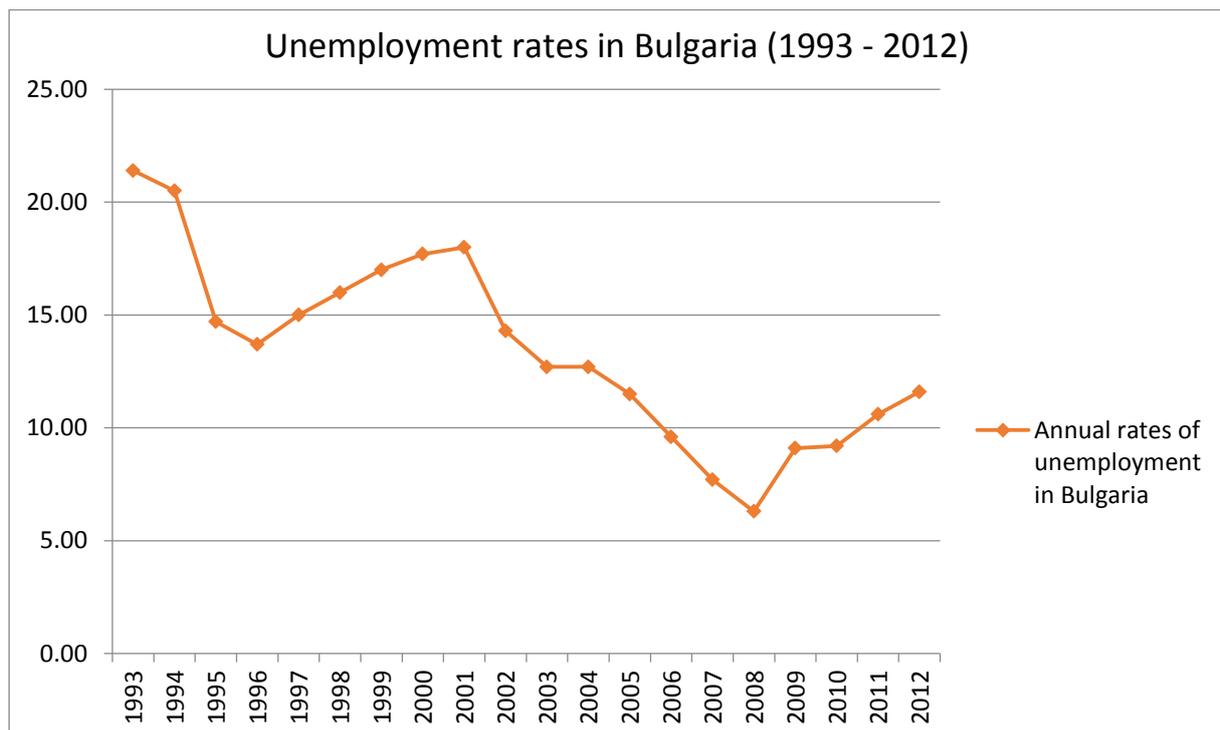


Figure 19 - Annual rates of unemployment in Bulgaria 1993-2012 in percentage³⁵²

The end of the social state led to a growing uncertainty amongst the population, fear, and blind preoccupation with the pursuit of European membership. The lack of alternative strategy for social changes left a void in the existing mechanisms for social care, and thus encouraged dependency on Communist policies or total submergence to the accession requirements.

The use of early retirement became generalized at the central level to offset the successive shocks of recession, while simultaneously in the enterprises previous social benefit levels were maintained in the areas of social services, child care, health care, vacations and employments. The Soviet-style welfare state, based on promotion of labor, extensive paternalism and clientelism, remained unchanged in the initial years; whereas, financial constraints had tightened fiercely³⁵³.

³⁵² Source: NSI; Data updated November 2012(http://www.nsi.bg/publications/NSI_129g.pdf)

³⁵³ BAFOIL, F. *Central and Eastern Europe. Europeanization and Social Change. op.cit.*

Political, economic and social transitions in the early nineties were strongly influenced by international actors and Bulgaria had to demonstrate quick progress with social policies on her path to EU membership³⁵⁴.

B - 1997 - Let's close the factories of illusions³⁵⁵

The year 1997 could be underlined as a cornerstone of the Bulgarian transition period. On the one hand, the country witnessed its most powerful massive public demonstrations (January-February 1997) and on the other hand, the new government of the UDF leader Kostov³⁵⁶ engaged in fast and drastic political reforms. Bulgarians who went out on the street to protest were predominantly students and young people who so much believed in the alternative welfare models presented by the Western world that without any reservation supported the presidency of Petar Stoyanov and the new configuration of the Union of Democratic Forces. The new Prime Minister S. Sofiyanski³⁵⁷, rushed to submit the Bulgarian will to join NATO (17th of February 1997) and a month later signed a Memorandum with the International Monetary Fund. Since the left wing governance left once the most successful of the old Soviet satellite nations on the brink of bankruptcy, the Union of Democratic Force got established as a solid Christian Democrat alternative *driven by values of freedom, solidarity, human dignity and responsibility*³⁵⁸. With great public support on the 19th of April, 1997 the Democratic Union won the elections with 52, 26% or 137 members of parliament out of 240. It should not be ignored, however, that despite the economic and political instability related to the Socialist governance the Bulgarian Social Party gained second position and 22, 07% and 58 members of parliament³⁵⁹. This could be seen already as a sign of the engraved nostalgic feelings towards the communist times.

³⁵⁴ DEACON, B., Eastern European welfare states: the impact of politics of globalization. *Journal of European Social Policy*, 10 (2), pp. 146-161

³⁵⁵ Petar Stoyanov - President of Bulgaria (1997-2002)

³⁵⁶ Ivan Kostov : the 47th Prime Minister of Bulgaria in office from May 1997 to July 2001 and leader of the Union of Democratic Forces (UDF) between December 1994 and July 2001

³⁵⁷ Stefan Sofiyanski: Prime Minister 1997 and Leading member of the Union of Democratic Forces

³⁵⁸ KALINOVA, E., BAEVA, I. Bulgarskite prehodi, *op.cit.*

³⁵⁹ The Alliance for National Salvation, 19; the Euroleft coalition, 14; and the Bulgarian Business Bloc, 12.

The reformist Kostov defines his program “Bulgaria 2001” as one which should accomplish:

*(...) positive financial stability and conditions for the development of the private initiatives; we should privatize state factories so that all of them have a responsible manager; reconstruct or close the loosing factories, so that the state stops paying for them tax money; restore completely the private property over the land and revive the Bulgarian agriculture*³⁶⁰.

On the 24th of July, 1997 the International Monetary Fund provides the country for the second time with 140 million dollars and the Bulgarian Lev got attached to the German Mark³⁶¹. Since 1992, foreign investment has reached \$3.5 billion to \$800 million in 2000 alone. Throughout the first months of Kostov’s governance the EU issued a report, which praised Bulgaria for its privatization process, especially within the banking, health and pension systems³⁶². As a result, some of the most sensible areas of the transformation were the destruction of the social policy established during the communism. In the years of transition, the full state provision of health, education and child services could not be guaranteed by the government in bankruptcy. Hence, unable to adapt to the market driven economy the provision of social services became largely commercialized and suffered severe deterioration of quality: *provision of health services became subjected to financial contribution; there were no more free of charge student books; students now had an option to pay for their university admission*³⁶³. The critical development of Bulgarian health policies post 1989 was also reported by the World Health Organization. In 2000, the quality of health care in the country is ranked on 102 positions out of 191 countries by the criteria of life expectancy, equal access of services and efficiency of the health service³⁶⁴.

³⁶⁰ The Program of the government of Republic of Bulgaria 1997-2002, 1-2

³⁶¹ “The World Bank approved a \$50 million loan to help Bulgaria meet environmental standards set by the EU as well as a \$63.3 million loan for a program that will revamp the health sector. The sale of Bulbank, the largest state-owned bank, for 360 million euros, represents Bulgaria’s largest privatization operation. In August, under pressure from the EU, Bulgaria agreed to shut down four reactors at the Kozlodui nuclear plant, considered to be one of Europe’s most dangerous installations, as yet another condition for membership”.

³⁶² KALINOVA, E., BAEVA, I. Bulgarskite prehodi, p. 249. In MCDERMOTT, K., STIBBE, M. editors. The 1989 Revolutions in Central and Eastern Europe: From Communism to Pluralism., *op.cit.*

³⁶³ *Idem.*, p.310

³⁶⁴ WORLD HEALTH ORGANIZATION. The World health report: 2000: Health systems: improving performance. Geneva: *World Health Organization*. <http://www.who.int/iris/handle/10665/42281>

Similarly, UNESCO gives Bulgaria as a negative example of a country where the budget for education dropped with $\frac{3}{4}$ and confirms the crisis in the Bulgarian educational system³⁶⁵.

C - The transition and child welfare

Similarly to education and health care, the condition of child protection was also ignored by the domestic actors of social policy:

(...) the whole pre-accession was based on making the system aligned with the European Union and since child protection is a domestic issue it's not covered by the key areas and there weren't many specific requirements; it's not like the labor law where you have very specific requirement, or internal affairs that requires very specific legislative changes. Social policy is more open and considered as a domestic issue ... (Policy maker, IO, Bulgaria)³⁶⁶.

This gap between the unstable Bulgarian government and the unclear European guidelines created a precondition for quality decrease and chaos in the administration of the child welfare. European funds were not easy to comprehend and administrate by the newly created state administration and thus we found out that *even when funds were secured, sometimes due to lack of personnel and knowledge in a particular government agency, they were not spent*³⁶⁷. The strategies for inclusion of the European policies were not unified by the state and often that created discrepancies among schemes of policy makers and the actions of professionals. Furthermore, as the literature by Bulgarian disability activists stipulates *EU inclusion agenda is frequently misinterpreted by professionals*³⁶⁸ and there are examples of situations where *some residential homes were closed just temporary to meet EU demands, whilst children living in those institutions were transported in a rush without notice or explanation to another residential home*³⁶⁹.

³⁶⁵ KALINOVA, E., BAEVA, I *Bulgarskite prehodi, op.cit.* p.311

³⁶⁶ BECIREVIC, M., DOWLING, M. The role of non-government organisations (NGOs) in advancing the inclusion of children with disabilities in Bosnia and Herzegovina (BiH) and Bulgaria. In: RASSEL, M., IARSKAIA-SMIRNOVA, E., eds. *Disability in Eastern Europe and the Former Soviet Union*. BASEES/Routledge Series on Russian and East European Studies, 1. 2013, London: Routledge

³⁶⁷ *Ibid.*, p.2

³⁶⁸ PANAYOTOVA, K. Country report on the implementation of policies supporting independent living for disabled people: Country Bulgaria. *op.cit.*

³⁶⁹ BECIREVIC, M., DOWLING, M. The role of non-government organisations (NGOs) in advancing the inclusion of children with disabilities in Bosnia and Herzegovina (BiH) and Bulgaria. *op.cit.* p.3

There are no official state statistics of this period because as our findings showed, the Bulgarian government did not acknowledge publically any of the above mentioned difficulties but strongly confirmed its will to accomplish the deinstitutionalization and unlike non-governmental organizations and international observers presented quite positive versions of the development and implication of the reform. The image the Bulgarian state wanted to create however was in conflict with the reality of institutional care in this period and the rhetoric about the optimistic versions of the current developments did not mirror the unprecedented rate of children placed in institutions³⁷⁰. It should be underlined that as of today's perspective most of the governmental reforms in relations to the closure of child institutions seem to be too ambitious and went beyond the capacity of the state and are described by professionals as *reforms done for the sake of gaining membership*³⁷¹.

During this period, the European Union had little measurable effect on Bulgaria, especially in terms of child protection. Most of the political pressures from the EU were related to Western pressures for liberalization of the market and privatization of the public sphere. The country had such a strong political and economic upheaval that during the transition governments none of the national institutions or political leader initiated the implementation of changes in child protection policies within the rocky post-communist transition period. Bulgaria had major strategic and political goals to join NATO (2004) and then the EU (2007), but other than that, its preparation for real economic and social changes was doubtful. The path-dependency with the communist order, combined with the strong conditional pressure turned the country into a passive recipient of regulations. In the analysis, we will not regard all EU conditions, but only those that are related to child protection, for instance the Copenhagen criterion linked to human rights, *that require a country to be a stable democracy, respect human rights and the rule of law and protect minorities*³⁷². Despite the fact that children have no specific mention in it, the EU experts that we met underline explicitly that child protection is an important part of human rights and thus government needs to take immediate action against the development of institutional care. The Rate of Children in Institutions Increased Proportionately to the Economic Collapse of the Country

³⁷⁰ *Ibid.*,p.3

³⁷¹ *Ibid.*, p.4

³⁷² The Copenhagen Criteria and the Enlargement of the European Union. (Consulted on July 5, 2017). https://ec.europa.eu/neighbourhood-enlargement/policy/glossary/terms/accession-criteria_en

After 1989, the number of children in need of institutional care started to increase and there was an important shift in these institutions away from being dedicated predominantly to orphans, and towards accommodating abandoned children or children at risk. *In the pre-accession period Bulgaria was heavily criticized by the EU monitoring report on the conditions of children and people with disabilities and especially children and people living in institutions. At that time we almost had no community services and family support service and there was quite a pressure on government to start creating different alternatives*³⁷³. The economic collapse and general dysfunction of the political system were some of the main reasons for an unprecedented increase in the percentage of children placed in specialized institutions:

*The rate of children up to the age of three placed in infant homes managed by the Ministry of Healthcare increased from 873.8 per 100,000 in 1989 to 1,299.6 per 100,000 in 1998. The rate of disabled children up to the age of 17 placed in specialized institutions increased from 108.4 per 100,000 in 1989 to 121.0 per 100,000 in 1997*³⁷⁴.

Bulgaria was not the only post-communist state with such negative tendency. From 1989 to 1999, throughout Central and Eastern Europe in 10 out of 14 countries in the former Soviet Union the number of children who live under residential care³⁷⁵. *In Lithuania; the number of residents in infant and children's homes increase 32% between 1990 and 1995. In the Kyrgyz Republic the number of young children under residential care jumped 69% between 1991 and 1994*³⁷⁶. Similarly to Bulgaria, the profile of the abandoned children across the region included predominantly children from ethnic minorities; children with disabilities and infants abandoned as of the maternity clinic.

1) The financial cost of the political transition

The financial costs of the political transition (1989-1999) had an enormous negative impact on Bulgarian children. Those who were left in institutions and amongst the more vulnerable

³⁷³ *Ibid.*, p.2

³⁷⁴ BOGDANOV, G. IVANOVA, V. The Deinstitutionalisation of children in Bulgaria. *Social Policy and Administration* Vol.47, No2, April 2013, pp.199-217

³⁷⁵ UNICEF. Children at Risk in Central and Eastern Europe: Perils and Promises. *Economies in Transition Studies Regional Monitoring Report 4*. Florence, 1999, Italy: UNICEF International Child Development Centre.

³⁷⁶ TOBIS, D. Moving from Residential Institutions to Community Based Social Services in Central and Eastern Europe and the Former Soviet Union, *op.cit.*

parts of society were deprived of basic support for health, education, and economic wellbeing. To compare, an *estimated 790,000 children with and without disabilities were living in residential institutions in Central and Eastern Europe and the former Soviet Union at the start of the transition*³⁷⁷. In the 1990s, Bulgaria witnessed the worst decrease in GDP among all other countries in the Eastern Block-27 % by 1993 (see Figure 19). The substantial decrease in overall living standards was accompanied by rising levels of income inequality and higher mortality rates. Consequently, between 1992 and 1997 *public expenditures for orphanages fell by 70%*³⁷⁸.

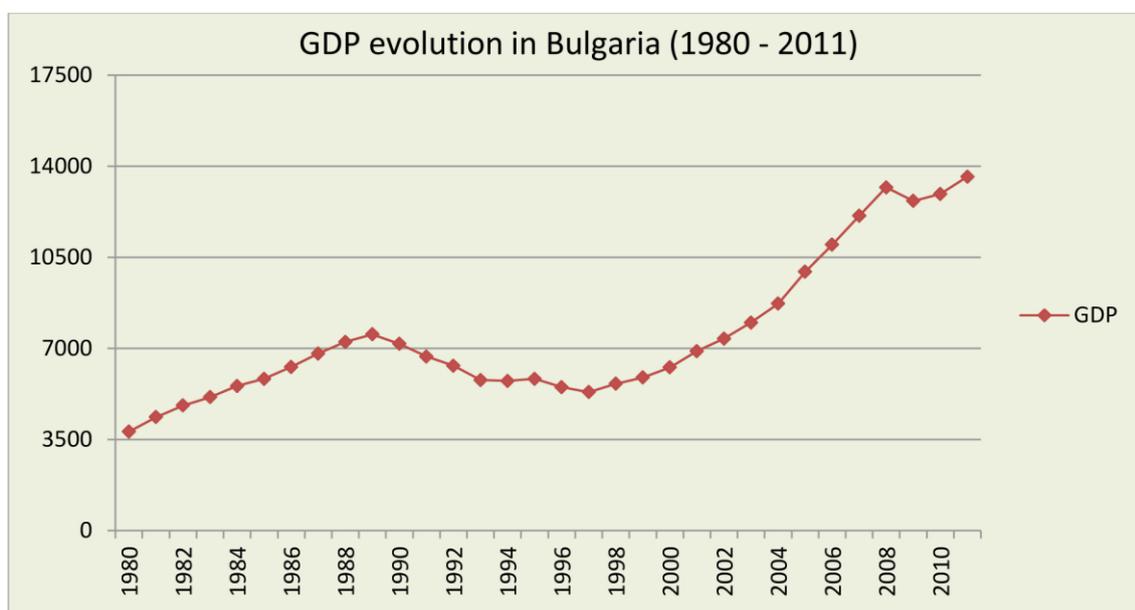


Figure 20 - GDP evolution in Bulgaria 1980 – 2011

³⁷⁷ Interstate Statistical Committee of the Commonwealth of Independent States (ISCCIS). *Official Statistics of the Countries of the C.I.S.* 1997. Moscow.

³⁷⁸ National Statistical Institute. *Living Standards – Economic and Social Indicators*, Sociological Survey. 1999, Sofia: National Statistical Institute. Source IMF; Data updated: November 2011

Considering those conditions and the sharp deterioration in living standards for a whole generation, it becomes clear why the number of single teenage mothers who abandoned their out-of-wedlock children increased from 45% to 70 % from 1989 to 1998. This neglect of adequate social support was mirrored in many households, which were left with no choice, but to leave their children in state care. Some of the most common reasons for mothers to abandon their children in institutions were poverty and incompetence, or lack of parenting abilities to take care of their child and mostly in cases of disabled and/or seriously ill children – “children at risk”. On the side of the providers, there was also mistrust towards the parents’ capacity and resistance to support their parenting, especially in the case of poor or illiterate parents. Combined with weak economic background there was a strong pressure for deinstitutionalization. The overall negative outcome of the transition drastically slowed down Bulgarian political and economic performance in comparison to other post-communist countries and made Bulgaria, still in 2016, the poorest country in the European Union (as measured by GDP per capita), followed by Romania, Croatia, Poland, and Hungary³⁷⁹.

The situation was not that different in Russia, where projects such as *UNICEF Trans MONEE* reported that the rate of child poverty had increased 1.5 times more than the overall poverty rate for the region (UNICEF 1997) and according to GOSKOMSTAT, the Russian Statistical Committee, in 1997 33% of all households with children lived below the minimum subsistence level³⁸⁰. It is important to note that following the UNDP statistics, countries in the region of Eastern Europe, fell an average of 32 positions in their ranking on the Human Development Index between 1990 and 1994, and at the same time many of the financial and social supports that had been available during the socialist period were eliminated, reduced in size or scope, or deteriorated in quality³⁸¹. Many of the social services that had been previously free became privatized, and thus the most marginalized and vulnerable members of society lost the entitlements they had been granted before.

In 1993, there were 31 Homes of Mother and Child which accommodated approximately 6,115 children. What were the life conditions in these institutions was the aim

³⁷⁹ National Institute Of Statistics, www.nsi.bg (accessed 16 July 2016).

³⁸⁰ HOLM-HANSEN, L.B., KRISTIFERSON, MONICA, T.: *Orphans in Russia: Policies for family-like alternatives*, NIBR Report 2003:1, BLINDERN, Norway: Norwegian Institute for Urban and Regional Research.

³⁸¹ TOBIS, D. *Moving from Residential Institutions to Community Based Social Services in Central and Eastern Europe and the Former Soviet Union*, *op.cit.*

of a qualitative survey done among doctors in 1991-1992 in five different institutions in Sofia, Varna and Pernik. In the survey, there were seven main questions and the grades given by the doctors did not differ largely depending on the region. The author of the survey summarized three main conclusions: *[There] is great risk of food deprivation in the institutions, 25% of the food supply still depends on donations and there is weak coordination between the suppliers of food and the institutions; Second, in two of the institutions medications were not delivered on time; Third, doctors agreed that the weak remuneration affects the quality of their work.* The answers of the survey also put forward problems related to effective budget distribution, claiming that in the institutions which have independent accounting services there is less financial disturbance. The general conclusion related to the wellbeing of children signaled danger in the psychological development of children due to lack of adequate social interactions and emotional deprivation. The next section of the chapter further underlines the risks behind institutionalization throughout this period.

2) Death cases in child care institutions

Unfortunately, during the transition period there was a serious degradation of the quality of life in children's institutions to the extent that many children lost their life due to negligence and lack of resources. Busy to deal with the overall social transformation all child institutions that were put in place during the communistic period were left with almost no evaluation and control throughout the whole transition period. As if the complexity of childcare reforms was visible to the transition governments but none of them had the courage to launch it. Below we describe the situation in one of the analyzed regions of Plovdiv municipality. We find important to describe the living conditions and the circumstances in which the tragic events happened because they illustrate the gravity of the problem and the link between the overall economic collapse of the nation and the neglected child welfare.

In 2013, the European Court for Human Rights convicted the state of Bulgaria for the death of fifteen young people with severe mental and physical disabilities in the State Institution Djurkovo. All deaths occurred in the winter of 1996-1997, but the lawsuit was opened only in 2006 after constant efforts by some of the biological parents³⁸² and the non-governmental organization Association for European Integration and Human Rights to find

³⁸² Most of the children in institutions had alive biological parents

the reasons behind the deaths of the teenagers. The Home for Children with Mental Disabilities in which the children lived and died is situated in the heart of the Rhodope Mountains with no direct access by car during the winter. In 1996, the budget per child per day was 0.8 EUR, (equivalent of 1.62 BGN) including food, heating, clothes, and medical care. The personnel was more than insufficient with one social worker serving twenty children in one shift. Against any official rules, when nurses were gone, it was the social worker that followed up on the medical condition of the children and provided them with medication.

There was no doctor, even though the closest hospital was located forty kilometers away. Cars or ambulances could not access the building, and the temperature inside the building was between 12 and 15 degrees Celsius, with heating only one hour in the morning and one hour at night. The food was insufficient both in terms of quantity and quality, and most children survived only thanks to the voluntary participation of the surrounding villagers. It was practically impossible to wash and dry the sheets and blankets, and therefore children who had no physical capacity to move to the toilets were forced to sleep in their own excrement³⁸³.

Within these horrific living conditions the first death occurred on the 15th of December 1996³⁸⁴, and in the next months twelve more children were found dead. After the autopsy, it becomes evident that children were agonizing for weeks before the tragic end- children who were 13-14 years old were only 18 kilograms³⁸⁵. Despite these obvious signs for the limited budget and dysfunctioning of the Home, on the 22nd of January 1997 eight new children were transferred to the institution following a decision of the Ministry of Labour and Social Affairs. The director of the institution warned the authorities and the public numerous times about the incapacity of the institution to provide proper care to the children, but the home continued to exist, predominantly thanks to private donations. On the 22nd of February 1997, a seventh child passed away. After his death, the director wrote to the Minister of employment and social affairs asking for emergency measures, including immediate financial aid. As a result, some financial support was provided, but still by 4th March 1997 fifteen children were

³⁸³ GENOVA, A. Djurovo: beyond survival, 27th of October 2011
<http://www.bghelsinki.org/bg/publikacii/obektiv/aneta-genova/2011-10/dzhurkovo-otvd-ocelyavaneto>
(Consulted on May 12, 2012)

³⁸⁴ 18 years old Maria Petrunova

³⁸⁵ GENOVA, A. *op.cit.*

dead, four of whom were among those transferred on January 22nd. Two years later, there were pre-trial proceedings regarding the deaths of the children, but not all fifteen of them. Experts concluded that the reasons for the deaths of the children included: pneumonia, hypothermia and hypotrophy. There were accusations against the director, the nurse and the paramedic; however, since the state institution was under the control of the municipality, the Ministry of Social Affairs was unable to provide any documentation to the public prosecutor's office in relation to the cases and all signals of the director. Surprisingly enough, when the prosecutor's office demanded documentation from the Ministry of Finance, the minister at the time replied that since the legal deadline had passed, the archives had been destroyed. The same response was given by the municipality. That was the last effort of the public prosecutor to seek responsibility from public actors. On the 17th of January 2005, the three staff members were indicted by the court in Plovdiv for the deaths of 13 children. Despite the participation of the parents as witnesses, the court found the staff members not guilty. In January 2007, the High Constitutional Court confirmed the verdict, and since then there has been no other trial or process meant to discover a relationship between the deaths of the children and any other person or institution.

Public- private partnership was not very well developed throughout that period and most often the actors that appeared in the field were religious charity organizations providing clothes, shoes, food or helping with the maintenance of water and heating facilities. These donations were only registered in the interior files of the home and were not centralized by the ministries. Therefore, there is no data that shows the input of private actors during the transition period in relation to the child homes. High mortality rates, high risk of sickness, lack of health services, infant malnutrition, and abandonment (and consequential institutionalization) led to children dropping out of school early and having a considerable deficiency in social and cognitive capacities. The vicious cycle was strengthened by the negative tendencies of institutional children to suffer from premature pregnancies, criminality, prostitution, unemployment, and constant precariousness.

The crash between market driven economy and the social state

After decades of complete isolation from the West and total dependence on the USSR, Bulgarian Communist dictator Todor Zhivkov left the country in international isolation and

severe economic crisis and political instability. Such post 1989 context should be underlined as one of the most important indicators for the difficult switch from state provisioned institutional care to community based child support scheme. As we demonstrated, adjusting from centrally planned economy to market conditions and finding stable political alternative to the previous authoritarian regime as well as strong enough social opposition to the communist doctrines was not an automatic process. In 1999 the Prime Minister Kostov declares that the arduous transition of the Bulgarian state is over. He argued that *the structural reform is over since all factories, which were not beneficial were privatized or liquidated*³⁸⁶. Despite the optimism of the Prime Minister however the transition to competitive market economy was far from being over. What the analysis of child institutions reveals is that the established during communism institutions were not destroyed eminently throughout the transition period. However, their functioning could not be guaranteed in the post-communist economic liberal model because their structure was not sustainable under the rules of the new welfare (and this was visible in all social spheres- health, education, pensions, etc.). Such collision between the rules of the market driven economy and the social state represents the main difficulty of the Bulgarian transition to liberalism. The aggressive push of the International Monetary Fund to manage social policy through market driven regulations resulted in serious deterioration of the quality of life and well-being of people. The newly constructed state lacked national strategic plan for long term transformations and counted only on reforms which fall within the larger framework of EU membership but miss to analyse the implication of the economic changes on domestic institutions. The negative characteristics of the economic reform included also *corruption, the creation of monopolies as political structures and new forms of entrepreneurship that instead of creating new opportunities destroyed the existing once*³⁸⁷. The state was weak and poor and could not answer the expectations of its citizens. This disappointment was illustrated in the autumn of 1999 when the state held elections for local authorities and lost against the Bulgarian Socialist

³⁸⁶ KALINOVA, E., BAEVA, I. Bulgarskite prehodi, p. 249. In MCDERMOTT, K., STIBBE, M. editors. The 1989 Revolutions in Central and Eastern Europe: From Communism to Pluralism., *op.cit.*

³⁸⁷ *Ibid.*, p.313

Party. The political conclusions from the unexpected results³⁸⁸ of these elections were summarised by the President Stoyanov:

*The Union of Democratic Forces did not manage to replace on 100 % the left wing party BSP as was expected (...) Bulgarians are disappointed not from the reform or the choice to follow the European example but from the politicians that lead the reform. (...) on the day we were elected we admitted that the reform will be complicated but we did not say that it includes corruption on every level of the political governance*³⁸⁹.

This quote foreshadows that the transition process in Bulgaria had two distant stages. The first stage includes the ideological understanding that the welfare state will be transformed from communist to liberal, putting the European Union membership as the ultimate accomplishment and the goal of the transformation. The membership was described by Kostov as the *elevator through which Bulgaria will go back on the time line of history and join the head of humanitarian development, technological and scientific progress*³⁹⁰. In order to transform its welfare however, *the state has an important preliminary stage: transformation of the state*³⁹¹. The equilibrium between the political, economic and social systems and their functioning depends entirely on the strength of the reformed state: *The solution to this conundrum lay at the roots of transformation success. Successful transformers, after the inevitable transitional crisis, resumed economic growth and accomplished in-depth structural changes*³⁹². Our research shows that to a great extent the state did not manage to reconstruct its full governance capacity throughout this transition and thus got overwhelmed by the exterior pressures and especially in the social sphere adopted models which relevance is still questionable.

³⁸⁸ In 14 municipalities the Bulgarian Socialist Party won the elections against 11 won by the Union of Democratic Forces

³⁸⁹ STOYANOV, P. (In Bulgarian: Браво на народа! Отрезви политиците). *24 часа*. 25th of October, 1999

³⁹⁰ KOSTOV, I. Interview on the 10th of December 1999 in front of journalists of *Sega* newspaper.

³⁹¹ WAGENER, H. The Welfare State in Transition Economies and Accession to the EU. *Op.cit.*

³⁹² *Ibid.*, p.158

V - Deinstitutionalization and Decentralization of Bulgarian Child Institutions

The first part of the chapter analyses the influence of prior to the accession EU policy requirements to the formation of the Bulgarian legislation for child protection in the 2000's. We demonstrate what were the main legal transformations of Bulgarian child policies in the 2000's, analysing the impact of the 1st Law on Child Protection on the creation of the Bulgarian National Vision of Deinstitutionalization (2010).

The second section is dedicated to the decentralization of services in relation to child care provision and aims to depict which are the mechanisms for governance, control and evaluation of the service providers at the different stages of the Bulgarian strategy for decentralization of social services. The case study of Mogilino is regarded as an example of the first closed state institution unveiling what are the challenges in front of the implementation of the Vision and the extent to which child welfare was institutionally strong enough to use EU funding and benefit from European tools and mechanisms for increase of community services and family support at this early stage of democratic governance.

The third part gives description of some of the main institutions that we examined throughout our empirical work while emphasizing their diversity and unpredictable quality of care depending on the management skills of the different directors. All institutions presented in case studies had existed before the deinstitutionalization reform began, and while some passed through a significant transformation and continued functioning, others were closed. This detailed comparison throughout our interviews with staff and directors was necessary to test the degree to which one can make any generalized conclusions on the effects of these institutions over children before and after the deinstitutionalization process.

The data presented and analyzed in this chapter were retrieved from the National Archives of Bulgaria³⁹³ and the SS. Cyril and Methodius National Library³⁹⁴. We should underline that our initial idea was to find official statistical data on the numbers of children in institutions throughout the years, as well as a detailed map of the regional distribution of the institutions across Bulgaria. However, despite the extensive search in in libraries and multiple

³⁹³ <http://archives.bg/>

³⁹⁴ <http://nationallibrary.bg/wp/?lang=bg>

public information requests from the respective ministries, we conclude that there is no unified data on children deprived of parental care and the existing figures both from national and international sources remain dispersed and approximate. The maps included in this chapter are results of our own research.

A - The formation of the Bulgarian child legislation (2000-2010)

The European Union³⁹⁵, UNICEF³⁹⁶ and the OECD³⁹⁷ together with smaller international agencies have the same broad inclusion agenda for the transition from institutional to community-based care and the inclusion of children deprived of parental care within society. However, what we identified is that the strategies for the implementation of these guidelines vary significantly and states have a relevant choice to adopt different policy approaches. The choice that Bulgaria made was to eradicate institutions and provide community based services for children in need *after being exposed to closer scrutiny by the EU, IMF and the World Bank*³⁹⁸.

Influenced by the European trend to harmonize national legislation with European legislation³⁹⁹ in 2000 the Bulgarian Government drafted a new *Law on Child Protection* in strict compliance with the *UN Convention on the Rights of the Child*, the *UN Convention on the Rights of Persons with Disabilities*, as well as the *EU Antidiscrimination Law*. The newly passed law aimed at modifying and replacing all pre-existing legislation and formed the basis of a new framework of children's rights. Through this law, the state intended *to co-ordinate the actions of all parties, provide protection and guarantee for the basic children's rights in all social domains and for all social groups in accordance with their age, social status, physical and mental health by the provision of decent financial, social and cultural*

³⁹⁵ EUROPEAN COMMISSION, Report of the Ad Hoc Expert Group on the tRansition from Institutional to Community-based Care. 2009. Directorate General for Employment, Social Affairs and Equal Opportunities.

³⁹⁶ UNICEF. *Promoting Rights of Children with Disability*, Innocenti Digest, 2007, N 13. Florence: Innocenti Research Center

³⁹⁷ OECD. *Student with Disabilities, Learning Difficulties and Disadvantages in the Baltic States, South Eastern Europe and Malta*. Educational Policies and Indicators. 2009, Paris: OECD and European Commission

³⁹⁸ BECIREVIC, M., DOWLING, M. The role of non-government organisations (NGOs) in advancing the inclusion of children with disabilities in Bosnia and Herzegovina (BiH) and Bulgaria. *op.cit.*

³⁹⁹ YOUNG, E. QUINN, L. *Writing Effective Public Policy Papers- A Guide For Policy Advisers In Central And Eastern Europe*. Budapest: Open Society Institute, 2002.

*platform*⁴⁰⁰. In contrast to previous normative legislation, which treated the child as a passive recipient of care and protection, this law describes the child as an active legal participant with independent rights. The guidance chapter of this document obligates all legislative institutions to function according to Paragraph 1, Item 5 of the Law, which states that *the child has to grow up and remain with his biological parents, and that any measures for placing the child outside the family should be left as a last resort*⁴⁰¹. The new clauses do not judge parents as responsible for their low economic status, but emphasize new family support schemes and prevention of abandonment. Consequently, parents have a right (at least a theoretical one) to obtain greater social packages in cases where economic, physical or social statuses are at risk.

The Bulgarian government is the first in Europe that has voted to close all of its state institutions and replace them with community-based services. The policy of deinstitutionalization began in 2001 with a ministerial act and the vision for deinstitutionalization. This served as the formal declaration of political will to deal with the issue of child abandonment. Within the vision of the deinstitutionalization reform, the government engaged in a multi-institutional plan for the creation of community-based services, new legal regulation and financial provision, and closure of all residential institutions. The vision of deinstitutionalization is part of a more significant shift in the role of the state in the education of children and their position in society. In 2001, the government voted for a reform, which aimed at the increasing wellbeing of children through deinstitutionalization, prevention, and economically effective alternatives to institutional care⁴⁰². One of the most significant results of the project was the creation of the National Agency of Child Protection and the Department of Child Care within the Ministry of Labour and Social Policy. The project was financed with approximately 22 million euros donated by the World Bank, the Bulgarian Government, the British Government, and the Japanese Fund for Social Development and the Swiss Agency for Cooperation and Development⁴⁰³.

⁴⁰⁰ KRIVIRADEVA, B. Child protection of Republic of Bulgaria. *op.cit.*

⁴⁰¹ Child Protection Act (31 May 2000) Republic Of Bulgaria Thirty-Eighth National Assembly (consulted at <https://www.crin.org/en/library/legal-database/bulgaria-child-protection-act-2000>)

⁴⁰² Ministry of Labour and Social Policy. *Reform for the increased wellbeing of Bulgarian Children*. Project paper. Consulted on February 13, 2015 at www.mlsp.government.bg/bg/projects/children/indicators/index.htm

⁴⁰³ *Ibid.*

1) Legal framework: the beginning of the deinstitutionalization reform

The 2000 Law on Child Protection incited the creation of The National Strategy for Child Protection⁴⁰⁴ for the 2008-2018 period and the adoption of a plan for the implementation of the National Vision of the Deinstitutionalization of Bulgaria⁴⁰⁵. At the beginning of the reform in Bulgaria there are more than 34 thousands children in institutions which corresponds to 1,7% of the overall children population⁴⁰⁶. The specialized child protection bodies are the chairperson of the State agency for Child Protection and the Social Assistance Directorates at the Agency for Social Assistance. Social Assistance Directorate is a body of child protection at the local level within which operates the Child Protection Department (CPD). CPD social workers take protective measures with regard to children at risk. Other bodies of the child protection system are: the Minister of Labour and Social Policy, the Minister of Interior, the Minister of Education and Science, the Minister of Justice, the Minister of Foreign Affairs, the Minister of Culture, the Minister of Health and the mayors of municipalities⁴⁰⁷.

At the time of the adoption of this Strategy (2011), there were 127 such institutions: 31 for children between the ages of 0 and 3 years old under the supervision of the Ministry of Health, 24 homes for children with disabilities managed by the local municipalities, and 72 homes for children deprived of parental care, also managed by the municipal authorities⁴⁰⁸.

⁴⁰⁴ This Strategy aims at the closure of existing childcare institutions and their replacement with alternative community-based services

⁴⁰⁵ Adapted on 24 of November 2010 by the Bulgarian government

⁴⁰⁶ UNICEF. Social Activities and Practice Institute. Report: *Decentralization of institutions for children deprived of parental care in Bulgaria – challenges and opportunities*. <http://nmd.bg/wp-content/uploads/2013/90.pdf>

⁴⁰⁷ Ministry of Labour and Social Affairs https://www.mlsp.government.bg/index.php?section=POLICIESI&I=263&lang=_eng (Consulted on January 20, 2017)

⁴⁰⁸ National Strategy for Child Protection

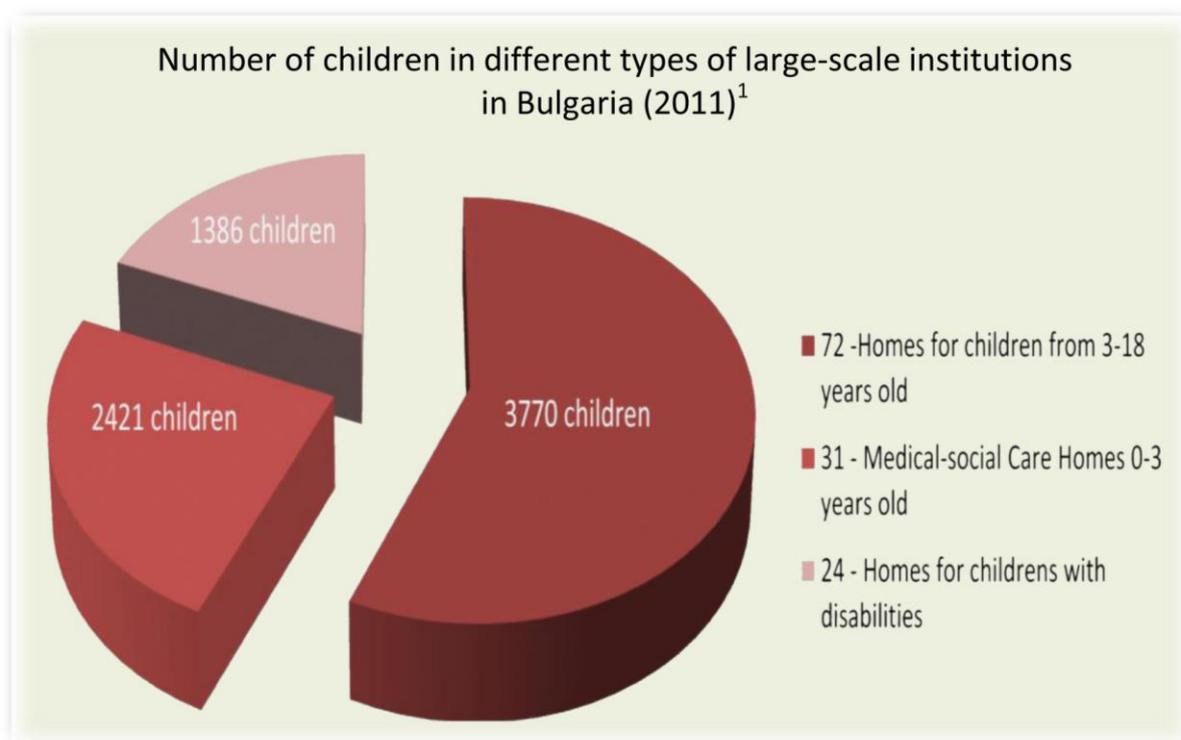


Figure 21 - Number of children in different types of large-scale institutions in Bulgaria 2011⁴⁰⁹

In accordance with the UN Convention, the institutional practice of childcare will be ended, and support will be provided for children to remain with their biological families and removed only if they are in danger. In order to provide an alternative form of care for children removed from these institutions, the state voted and passed Article 31 of the *Law on Child Protection* which defines the concept of a foster care parent and the criteria for it:

According to Article 4, Item 1, Point 4, a child could be accommodated in a foster care family only after a judicial decision or with an order from the director of direction “Social support” the local Social Services Department as a protective measure of the plan for the deinstitutionalization.

Since the Parliamentary Reform of 2000, the Court of Justice has become the supreme authority responsible for the decision to send a child to an institution and the only legal authority responsible for an individual assessment of children in institutions and their removal and placement with alternative structures. This parliamentary reform encompasses all institutions, except for special schools and juvenile institutions. Any child could be sent to

⁴⁰⁹This graphic is based on data from Ministry of Labour and Social Policy of Bulgaria, 2011

live in an institution if he or she becomes an orphan; if the parents neglect the child; or if the child is in danger of physical violence or psychological abuse. The Special State Agency for Social Support, part of the Ministry of Social Policy and Labor, can enforce the delivery of social assistance to intervene in cases where the State Agency cannot locate the parents, or they refuse state support.

The Law on Child Protection is not the only a legislative document related to the protection of children. There are at least twenty other normative documents divided among different of institutions, including the Ministry of Health and Ministry of Education, which are directly involved in and responsible for child protection. The existence of such a large number of uncoordinated independent institutions, all with varied and sometime self-contradicting normative biases and all regulating the protection of children in Bulgaria, presents a considerable challenge and a serious obstacle to the introduction of European legislation and achievement of positive outcomes from deinstitutionalization reform.

Narratives gathered during this research corroborate the assessment that *The Law on Child Protection* could be perceived as the cornerstone of the Bulgarian policy of child protection, since up until year 2000 there was no other mechanism through which one could make policies affecting children. The overall understanding among the actors from the national and non-governmental sector interviewed throughout this research was that this Law was crucial and much needed. The reform aims to consider and respond to children and their parents in a more individual way. As the program director of UNICEF Bulgaria puts it:

Up to 2000, the only alternative that children received from the state was the institution model; not because it was the best one, but the only one available. The system was constructed to function with very standardized mechanisms regardless of the individual situation of the child and his parents (2012/07).

The immediate result of this law was the creation of the National Agency of Child Protection and the directory of Child Protection to the Ministry of Labour and Social Affairs. During our interview with one of the authors of the reform, V. S.⁴¹⁰, she stated that since there were no social services, this reform was greatly challenging and almost surreal for the Bulgarian reality. However, there were two major and unconditionally positive changes that occurred as a result of this law:

⁴¹⁰ Valentina Simeonova deputy minister of the ministry of Social Affairs, at the time of the interview (2015/06) works in the Know-how Center as a coordinator of a project for monitoring of the deinstitutionalization reform.

First, the Bulgarian state was able to construct a network of child protection both on governmental level through the agency of child protection and on regional level through the regional directories in all major municipalities; second is the multiplication of child and family services meant for prevention of abandonment and child poverty from 0 to 500 in 2015 (2015/06).

This legal basis, together with the vision, was meant to serve as the bridge from a system with child services based on state-provided institutional care to a decentralized complex system for care and prevention. At the beginning of the reform, the state commissioned an official census of all children living in social, medical, and educational institutions, and their number exceeded 35,000. Up until 2003, the project aimed to accomplish the preparatory stages of the reform, which included:

- 1) Identifying pilot municipalities for implementation of the new services,
- 2) Procuring preliminary construction permits for the new centers for family services,
- 3) Preparing social workers to lead individual assessments for the children that the plan aimed to move out from institutional care.

Already in 2000 certain non-governmental organizations with foreign financial aid started to openly express the necessity to transform institutional care in Bulgaria and push society to think in this direction. Despite the fact, that their efforts were not consolidated enough to make an eminent impact on society and politicians, alternative models of care started to emerge and were later accepted by the state. Important motivators for the creation of alternative centres at that time were associations representing parents whose children had special needs. Even before the government initiated official decentralization measures, there had been rare examples of cooperation between such parental organizations, municipalities and donors for the creation of alternative to the institution facilities. In the city of Dobrich we discovered an example of such cooperation where parents of handicap children pled for the creation of a day care center adapted for children with disabilities that would allow the parents to work and the children to socialize. The Dobrich municipality provided one of its properties for free and through donations the day center was open and has functioned until today.

With our empirical research we identified the following main challenges at this first stage of the reform (pre 2000-2003). First, it must be pointed out that the personnel of the

institutions were not included in the preparatory work of the reform⁴¹¹. All policy acts were centered on the creation of the alternative centers for the targeted groups. Unfortunately, by doing so the government ignored all efforts that should have been included in the preparation of the exit strategy of children (at the age of 18). Being totally dependent on the institution for their physical survival⁴¹² residents remained dependent on social aids even after they get out from the institutions, which eventually became a costly expense for the state.

The second risk was related to the increased number of actors who started to search for the most successful model of the Bulgarian deinstitutionalization. International NGOs (such as Save the Children, Care, European Child Trust and Every Child) together with new local NGOs (Baliz, FICE, Step by Step Foundation, Social Activities and Practice Institute etc.) were created to promote different visions for the positive realization of the reform. Despite the enormous work that they accomplished, what we identified from our empirical work is that almost none of these NGO's dealt with the reformation of institutional care per se and the amelioration of the quality of life of the increased numbers of children inside but focused only on promoting and preparing the alternatives community based centers. This is due to the understanding that in Bulgaria the deinstitutionalization reform is linked to the elimination of the physical existence of the institutions and not on the care model that has been practiced inside. As a result, despite the good intentions to change the conditions in institutional care, these efforts were not sustainable in the long term and lacked overall vision for the development of these children in one, five or ten years. In this period social services remained centered on the state level, and in practice there was no real decentralization of services or civil engagement on the topic.

Therefore, throughout this first stage of the reform, all actions were driven predominantly by international organizations on project-based methodologies that aimed to tackle only some groups of children in only few municipalities around the country.

The accuracy and efficiency of the change in the law was mainly contested ten years after its creation by the monitoring report from 2011-2012 of the Know How Center to the New Bulgarian University. Specialists from the non-governmental sector acknowledged that

⁴¹¹ We will expose the consequences of this mistake in chapter VII

⁴¹² All services were institutionalized- food was provided by the state, residents never cooked, never washed clothes, never did shopping or had their own budget etc.

the law had been overpassed by the developments that it provoked, and needed to be reconstructed to shift the focus from a law for the protection of children to a law for children:

This new law would have integrated not only how to protect the child once it becomes a victim but also how to prevent the child becoming a victim integrating other spheres of child development such as education, health, sport etc. It was also a law putting the child in the center of the system as one, which has to be considered as a separate entity from his parents (2015/16).

The new draft law aimed to put prevention at the heart of its execution, and therefore required a political consensus as to definitions of prevention, penalization, psychological help, and separation. This law would demand political mobilization and consensus of many different actors who would lose part of their functions (for instance, the social support agents would move under the supervision of the Municipalities) and that created further administrative difficulties. Despite the great preparatory work of the law, the draft law was not enacted in the parliament due to the change of the government and the strong opposition coming from non-governmental organizations linked to the Catholic Church, such as Caritas. As of 2016, this law has not yet passed. In the acceptance of this draft law one can perceive the greater clash between the positive parenting policy (adopted by the Committee of Ministers on 13 December 2006 at the 983rd meeting of the Ministers' Deputies) and the means that have been given for its implementation in Bulgaria.

2) Decentralization: second stage of the deinstitutionalization reform (2003-2009)-

In the second stage of the deinstitutionalization reform (2003-2009), one perceives more targeted structural efforts of the state to change the legal bases of social services. In 2003, the term *specialized institutions* was adopted by the new legislation of child protection referring to state institutions from pension type for care, education of children who are completely separated from their home environment⁴¹³. The change in the definition excluded children who lived and studied in the institutions and thus the number of children who are institutionalized fall to 14,180 in 189 institutions⁴¹⁴. Despite these changes common report of UNICEF and the Social Activity and Practice Institute shows that in 2005 and 2006 the

⁴¹³ UNICEF., SOCIAL ACTIVITIES AND PRACTICE INSTITUTE. Report: *Decentralization of institutions for children deprived of parental care in Bulgaria – challenges and opportunities. op.cit.*

⁴¹⁴ *Ibid.*

number of children who were admitted in institutions is higher than the number of children who were accommodated in family environment and in 70% of the remaining institutions the quality of care still does not correspond to the criteria for quality of life set by the government⁴¹⁵.

The decentralization of social services in Bulgaria occurred almost at the same time as the deinstitutionalization reform and to a great extent one still observes the parallel evolution of these two processes of reconstruction. Until year 2000, the state was the only provider of social services across the country. In 2003, some significant changes in the *Law of Social Support*⁴¹⁶, *Law of Child Protection* and two national decentralization strategies (2006-2009/2009-2015) led towards the decentralization of the social services and officially added municipalities and non-governmental organizations to the list of social providers. The National Strategic documents identify three different forms of decentralization: administrative, financial and political⁴¹⁷. The administrative decentralization is composed by two distant rights and responsibilities – 1) *decision making power in regard to the quality of public services* and 2) *right to manage the activities provided by the services*⁴¹⁸. There are three major forms of administrative decentralization- deconcentration (often considered to be the weakest form of decentralization), delegation and devolution (seen as the type of administrative decentralization that underlies most political decentralization)⁴¹⁹. The financial decentralization is characterized by the *provision of resources, redistribution of financial resources, amount of the resources and ways of spending of the resources on the public services*. The political decentralization is linked to the *decision making power and the control of their execution by larger group of institutions closer to the community*⁴²⁰. In relation to child protection in the Strategies for decentralization from 2006 and 2009, the Bulgarian state adopts the low level administrative decentralization process.

⁴¹⁵ *Ibid.*,

⁴¹⁶ Under the government of Simeon Saksoburgotski (and the coalition among NDSV, BSP and DPS), the Minister of Labour and Social Affairs Hristina Hristova established the beginning of the decentralization of services for child protection

⁴¹⁷ COUNSEL OF MINISTERS, Republic of Bulgaria, Updated Decentralization Strategy 2006 - 2015. Adopted by Council of Ministers' Decision No № 454 of 2 July 2010, 2009.

⁴¹⁸ *Ibid.*,

⁴¹⁹ LITVACK, J. What is decentralization? Decentralization Thematic Team Contributor: World Bank, http://www.ciesin.org/decentralization/English/General/Different_forms.html (Consulted on May, 2017)

⁴²⁰ *Ibid.*,

*Through delegation central governments transfer responsibility for decision-making and administration of public functions to semi-autonomous organizations not wholly controlled by the central government, but ultimately accountable to it (...) usually these organizations have a great deal of discretion in decision-making and charge users directly for services*⁴²¹.

The state delegates to the municipalities the management and financing of the remaining Homes and new community based services but remains responsible for the evaluation and control of the quality of service provision. Hence, the decentralization of child welfare remains controlled by the state and according to us this will have a positive effect on the overall.

In the national plan for deinstitutionalization 2006-2009 there were three specific measures targeting institutions for child protection:

- transfusion of the management of the Homes for Children deprived of Parental Care towards municipalities as delegated service;
- transfusion of the management of Institutions for Medico-Social Care towards municipalities as delegated service ;
- provision of community based services⁴²².

In order to enlarge the spectrum of professionals who work with the children and propose greater choice of services for institutionalized children, the government adopted an official procedure for the accreditation of providers of social services and creation of legal mechanisms for establishment of common criteria for provision of social services. In 2002, the Law of Social Support changed and gave to *legal persons* the right to be social service providers. This was an important change in the system, since under the category of *legal persons* fall non-governmental organizations, which through their project-based financial schemes have become one of the main partners of municipalities⁴²³. These legal changes accompanied by a loan provided by the World Bank gave for the first time in Bulgarian history a new status to the non-governmental organizations as official social providers. From

⁴²¹ LITVACK, J. What is decentralization? *Op.cit.*

⁴²² SALTIROVA-RADKOVA, S. Decentralization Of Social Services In Bulgaria– Expectations And Reality. *International Scientific Refereed Online Journal with Impact Factor*, 2017, No 32.

⁴²³ *Ibid.*

that moment on, Bulgarian and foreign NGOs could be included within the budget distribution. As we show throughout our fieldwork, NGOs become main providers of services, especially in terms of innovative therapies, music, personal training, etc.

On January 2007 (as published in the Official Journal of the Republic of Bulgaria on 22nd of December 2006, No 105) the Homes for Children Deprived of Parental Care were decentralized and their management was transmitted to the municipality administrations with only methodological guidance from the Ministry of Labour and Social Policy. What is more their status changes from *educational* to *social*. The decentralization of services was considered to be one of the logical preconditions for the successful implementation of community based centers as a result of the deinstitutionalization process.

The decentralization of the biggest groups of child institutions is considered to be the corner stone of the solutions towards full deinstitutionalization. However, experts remain very skeptical on the methodology through which the decentralization of power will be guaranteed and *many underline the danger of neglect of some of the basic needs of the children*⁴²⁴. The methodology of the Ministry of Labour and Social Policy hides great preconditions for the continuation of the institutional culture despite the official detachment with the Ministry of Education and the inclusion of the local authority. The political decision to reform the management of the Institutions for Children Deprived of Parental Care came after six years of constant pressure from the non-governmental sector to decentralize its management so that the deinstitutionalization could take place *The time we lost was crucial for the irreversible institutionalization of generation of children who will need much more resources to get out of institutional care now in comparison to their yearly ages*⁴²⁵. The state established legal process for licensing of social service providers other than the state and put in place new government criteria for social services which included the role of the municipalities in the management of the Homes situated in their territories. Both government and local experts confirmed the increasing importance of municipalities and the need for larger participation on their behalf. However, from the interviews we had with the administration staff of the local authority we understood that municipality agents had little or no preparation how exactly their responsibilities will change and what are the particularities of the management of such big

⁴²⁴ *Ibid.*

⁴²⁵ *Ibid.*

institutions full of children from 3 to 18 years old. The Ministry of Education did not provide any clear guidelines and instructions how will the transfer of responsibilities happen:

The government left us completely unprepared for the upcoming duties. We knew that we had to control the institutions for children deprived of parental care but at the same time we did not know how to do it (...)me and my colleges we needed special training and we never received it; we were learning while working (2015/20).

At the very beginning one of the main preoccupation of the Mayors was to repair the buildings of the institutions in which children spent 100 % of their time⁴²⁶. This was perceived as a precondition for the amelioration of the quality of life and further inclusion of specialized services for the children. This, as was underlined by the Mayors we interviewed was also the easiest and measurable aspect of the reform: *In order for new services to reach children we need to create the infrastructure for it according to the number of children that are in demand for it (2015/20)*. Despite the good intentions of Mayors and institutional directors and the undoubted need for the amelioration of the building, we identified these first steps in the implementation of the decentralization plan to hide some great risks. First, one should acknowledge the fact that for some Mayors, especially those of small municipalities, the Institutions for Children deprived of parental care represent a guaranteed source for financial support from the government. As such, the closure of these homes becomes the less wanted option for the Mayor and therefore by the time the Mayor builds new management strategy and implements the public-private partnership fully, he/she has a great interest to maintain the institution working. The alternative to the closing institutions is to create community based services in their municipality but that is still considered a much more risky and insecure path for most of the municipalities. According to a report from 2007, 2037 children or 47% of the children (who were in institutions that had to be closed) were transferred to community based centers which are within the same municipality region as the Home; 564 children moved to further municipalities or regional cities⁴²⁷. This is important indicator for the evaluation of the reform because it gives us indicators for the level of stress of the children due to the moving and the proximity with their families, which are all included as important factors of the deinstitutionalization process.

⁴²⁶ *Ibid.*

⁴²⁷ UNICEF. Social Activities And Practice Institute. Report: *Decentralization of institutions for children deprived of parental care in Bulgaria – challenges and opportunities*. 2007.

Second, the beginning of the decentralization also gave rise to massive financial injections from donors and thus creates preconditions for Mayors to use the sources at any price. As a result, there was an increased public understanding that once the institutions were refreshed and new services open within its walls, we can plead for successful de-institutionalization. We found this assumption quite dangerous for the overall reform because the change that should follow the reform lies predominantly on the individualization of care towards children, their development in close to the family environment and not on the reconstruction of the building they live (further development of this problem will be presented in Chapter VII). The common report of UNICEF and the Social Activities and Practice institute portrays data, which shows that more than half of the directors who participated in the survey as of May 2007⁴²⁸ do not support the decentralization process due to *unclear information on the change of its management, the sever decrease of staff budget and the unclear guidelines for their duties and responsibilities. The overall feeling that describes directors was insecurity*⁴²⁹.

Third, since the decentralization of power in 2007, the directors of the Institutions for Children Deprived of Parental Care stopped being the employers of their personnel. This duty was transfused to the Mayors. Observations from our field work showed that Mayors who are sometimes kilometers apart from the Institutions are too alienated from the specificity of the Homes and their staff dynamics. The amelioration of the quality of services in the Homes is closely linked to their effective management and by alienating the manager from the personnel; the reform put in danger their functioning. *One should take into consideration that there are no quality transport links and the administration procedures in the municipality are so heavy that vital for the children decisions could take much longer than before*⁴³⁰. This obstacle is related once again to the unclear guidelines of the state how should local agents meet the needs of the Institutions and what are the particularities of their new duties. On the other hand, the slow pace of decision making gave preconditions for a common feeling of uncertainty and fear within the residents of the homes and among the staff members. In addition we should underline the serious lack of communication between the State Agency of

⁴²⁸ The Survey was done in 80 specialized institutions and included 93 Mayors, 94 children and 84 directors and staff of institutions.

⁴²⁹ UNICEF. Social Activities and Practice Institute. Report: *Decentralization of institutions for children deprived of parental care in Bulgaria – challenges and opportunities*. 2007

⁴³⁰ *Ibid.*

Child Protection (SACP) that reviews the work of the municipalities with the institutions. According to a survey done by UNICEF and the Social Activities and Practice Institute:

43 % of the child experts in the municipality administration are not familiar with the evaluation done by the SACP; 49% declare the availability of social services within their community but in reality the services do not correspond to the criteria and propose limited services; 44% of the local agents were not informed or ignored the trainings proposed by the SASP⁴³¹.

Such data is an indicator for the lack of communication between state institutions and municipalities. According to us, this is a necessary precondition for the targeted amelioration of the quality of life of each child. If the states spends resources to evaluate the municipality and the Mayor does not at least read this evaluation the whole process of deinstitutionalization is severely questioned.

a) **State-NGO's-Municipalities**

Evidences show that *international agencies put on strong pressure on government ministries, bring in their experts, engage NGO's and provide injection of funds for solutions to be accepted⁴³²*. This type of decentralization led to great confusion among the municipal authorities, exacerbated by the lack of resources on their side to lead and actively monitor social activities without the financial and human resources of the state confirming that *policies and strategies are not embraced by all stakeholders⁴³³*. In Chapter VII we will give some concrete examples of the ways mayors resisted the reforms. Our interviews with families and relatives of at-risk children showed that to a great extent the reform was executed formally with little or no contact with the biological family and the personnel of the institution. This was due to the lack of prevention policies and early intervention social services. *The Ministry of Labour and Social Policy, The Ministry of Health and the Ministry of Education* did not work in coordination with each other in relation to the early childhood planning and therefore there was no teamwork in the implementation of community services in the field or financial decentralization of social services.

⁴³¹ *Ibid.*

⁴³² BECIREVIC, M., DOWLING, M. The role of non-government organisations (NGOs) in advancing the inclusion of children with disabilities in Bosnia and Herzegovina (BiH) and Bulgaria. *op.cit.*

⁴³³ *Ibid.*, p.10

2003-2009 was also the period when nongovernmental organizations started to raise in number and occupied an important place in advancing awareness campaigns in regard to institutional care generating social change. The advantages of the inclusion of non-state organizations are flexibility, additional financial contribution that could not be provided by the state, and greater proximity to the local problems. However, greater numbers of actors in the field demands greater coordination and communication. According to our interviews, most NGOs demand equality among social providers and do not want to recognize the power of the Mayor as a superior to their own competencies. For the moment the Mayor still has the right to decide which service merits to remain in his territory and which does not. As we will demonstrate in Chapter VII, that might lead to disappearance of some working services, even if they are useful and respond to pressing needs. The results of this cooperation, however, differ from region to region, and the overall conclusion is that there is a lack of strategic planning⁴³⁴. What is more throughout our empirical work with institutional staff we could clearly feel the preference of directors and personnel to work with Municipalities in contrast to NGO's , referring to old lasting feeling that *the state will always take care of us* (2013/12). Since most of the NGO's operated on the field through project financing, their long term investment in the problems of the institutions was not guaranteed and people felt this:

Even if we have the worse Mayor, there will be always a Mayor whereas the NGO could disappear any moment (2017/50).

The role of the NGO's operating in the field was also considered controversial due to their strong dependence on foreign investments. *The major growth of in the number of NGO's was predominantly due to the actions of international donors and according to Maglajlic-Holicek and Residagic instead of being truly civil organizations; they now resemble a private business sector focused on absorbing donors' funds*⁴³⁵. What is more, most organizations were created and governed by people who were part of the previous regime and thus specialists feared that *they did understand why the system needed to be changed but their lack of professional capability and knowledge was evident and has been also mentioned in the*

⁴³⁴ Since there was no legal regulation for the decentralization of services before 2007, we could not obtain any written systematic record that traces back which Bulgarian NGO's collaborated with which municipalities in the period 1999-2006. The only foundation from 1999 to 2006 that was publicly announced to work with Plovdiv Municipality was the Elena Kostova Foundation (Elena Kostova is the wife of right democrat prime minister at the time, Ivan Kostov

⁴³⁵ *Idem.*, p.12

*literature*⁴³⁶. Both of these issues are reflected in our field work and analyzed in greater detail in Chapter VII as part of the challenges related to the implementation of the reform.

Despite these challenges, in 2006, financed by the PHARE program, the closure of specialized institutions began, and the first community centers of family type were open for the most high-risk groups of children. In order to achieve the closure of the institutions, the state did an attempt for individual assessments of children in special institutions financed by the PHARE program⁴³⁷. We use the word ‘attempt’ because here again there is a discrepancy between the facts given by the representatives of the State Agency of Child Protection and directors of institutions. On the one hand, the state agents declare to have visited the institutions and interviewed each child separately and construct their individual files. On the other hand, however, almost half of the children who participated in the state action declared that they have never talked to the state representatives and has never consulted their own files⁴³⁸. This signals once again a dangerous formal execution of the so important assessment that can lead to the openings or closing of specific community based centers. Despite these difficulties, by 2008, the state had closed five of its biggest institutions and created community based services to transfer their residents (see Figure 22). The experience gained around the closure of these first institutions will serve as an example for the next steps that need to be taken in order for the national plan to be accomplished.

⁴³⁶ *Idem*, p.12

⁴³⁷ Program for provision of services for risk groups in the community

⁴³⁸ UNICEF. SOCIAL ACTIVITIES AND PRACTICE INSTITUTE. Report: *Decentralization of institutions for children deprived of parental care in Bulgaria – challenges and opportunities*. 2007

Closed Institutions	City / village	New Community Based Centers	Financing
“Kalinin” (institution for children deprived of parental care)	Krumovgrad Plovdiv Municipality	2 Family type centers	FICE Bulgaria
“Sveta Petka” (institutions for children with mental handicap)	Mogilino Russe Municipality	5 Family type centers in different municipalities	UNICEF, Bulgarian State, Unity of NGO’s
“Nadejda”	Stara Zagora	5 Family type centers	ARC Bulgaria
Start of the deinstitutionalization for “Gorna Koznica” (institutions for children with mental handicap)	Kustendil	Ends 2010	Seeder Foundation
Start of the deinstitutionalization for “Teteven”	Lovech	Ends 2010	Equilibrium Foundation

Figure 22 - The closure of the five biggest institutions 2006-2010

Our findings show that the municipalities that managed to close old institutions and open new community centers are simply those with the highest legal competences, able to apply for EU funding and/or those who were guided by strong NGO’s. The Homes for Children with Disabilities (which were under the supervision of the Ministry of Social Affairs) were evaluated as priority due to the extreme miserable living conditions of the children inside (we will describe one of them- ‘Mogilino’ later in the chapter). The closure (or rehabilitation of the old buildings) of Homes for Children Deprived of Parental Care (with no disabilities) started in 2008 covering first big cities, such as Plovdiv, Varna, Burgas and Stara Zagora. After it spread to smaller municipalities such as Stara Zagora in 2010, and continued gradually in rural areas. The closure of the Homes for Infants (children under three years old),

which are governed by the Ministry of Health) is the least advanced due to high entrance demand and greater isolation of the infants from the public actors.

b) **The First closed institution in Mogilino**

Undoubtedly, the BBC documentary and European conditionality led to the faster closure of one of the most degraded institutions for abandoned children in Mogilino (Ruse Municipality). All actors involved in the process refer to this case as a precedent and the beginning of a new era, because for the first time the institutional reality of the abandoned Bulgarian children was shown openly to the public. Mogilino was closed through the cooperation and guidance of the *Ministry of Labour and Social Affairs*, *UNICEF Bulgaria*, and the *Bulgarian National Television BTV* and its show *The Fantastic Six*, through which BTV donated *over 610,000 BGN for the construction of the first Little Home for Children from the Mogilino orphanage*⁴³⁹. The conditions in which children lived in the institution for physical and mental disabilities in Mogilino during the years of the transition until 1st of October 2009 were more than disturbing. As V. B. describes it⁴⁴⁰:

I will never forget my first journey to Mogilino. Mogilino is situated between villages Biala and Popovo, and in order to enter Mogilino without any infrastructure, one needs to pass through Danub's hilly plane, dispersed little tiny roads, and after crossing two hills among wild birds and animals one could eventually get to the village (...) I have never seen such picture in my life: half of the people in the village were married to their family members, and thus the other half was severely handicapped from the incest. Highly disabled children who have never seen anything else in their life but this village (...) Not accidentally, if you don't know that BBC's movie was filmed in Mogilino, you would think that is a concentration camp or an old experiment of Rene Smiths in American prison in the 1950s; heavy marginalization (...) I thought such type of images belonged to the past (...) such highly severe physical and psychological pathologies have no words to be described (2012/06).

The closure of the institution seemed to be inevitable under the enormous media and social pressure. However, the question that remained was to what extent the state had a

⁴³⁹ BECKMAN, R., *Bulgarian MP's call for European Policy for unprivileged children* The Sofia Echo 30/Jan/2008.

⁴⁴⁰ Vessela Banova – active participant in the closure of the Mogilino institution and probably one of the most competent Bulgarian agents for protection of children rights in the field

capacity to provide an alternative home to the residents of the institution. It is striking that *once the children from Mogilino were moved to family-type centers, the policies stopped developing and no one continued to care* (2012/06), as if Mogilino was the only institution in such condition and as if moving children to smaller houses was enough to guarantee the eradication of institutional practices. Despite the unquestionable necessity to close the institution, our interviewees from UNICEF already in 2012 pointed out that *institutional culture continue[d] to persist within the community-based centers, despite the improved infrastructure* (2012/06). A media scandal from 2012 revealed that in another one of the twenty-five institutions for disabled children in Pleven, the severe conditions of care were perpetuated and accompanied by strong violations of the rights of the child. Throughout our interview, V. B. underlined on multiple occasions that the simultaneous creation of 180 new family type centers through operational funding of the EU structural funds hid multiple challenges:

First, if those new centers continue to receive financing through the state according to quotas, it will be highly inefficient, and they will soon collapse and transform into mini-institutions. Second, there is an inappropriate methodology; the methodology written by the Agency of Social Support is intended for not more than two thirds severally handicapped children. This planning is incorrect, because 99 % of the children in those 25 homes are retarded. Third, so far there are no mechanisms in the country for social support of children with mental disorders. It is unclear how they are going to treat those children (2012/06).

These issues were identified already back in 2012, and unfortunately in 2015 we are still witnessing the complete inability of state agents and municipalities to respond to these problems.

3) National Vision for Deinstitutionalization in practice (2009-2012)

In 2010 the Ministerial Council adopts the National Vision for Deinstitutionalization of Children of Republic of Bulgaria and a Plan for execution of the vision and the creation of community based services across the country. The national plan for action included:

- Creation of social services that should provide family-type care for the children so that there is no need to keep the institutional care;
- Establishment of financial and social support for the parents of handicapped children;

- Institutional control that every child has a right to live in a family-type environment;
- Creation of a regulatory legal framework to support the transition from institutional to community-based care;
- Strengthening of the social security system and the capacity of social workers to intervene for families in need.

According to official state data at the beginning of 2010 in Bulgaria, there were 6,730 children who lived in institutions⁴⁴¹. In comparison to other European countries, Bulgaria had the highest number of children with one or more parents who are institutionalized (see Figure 23).

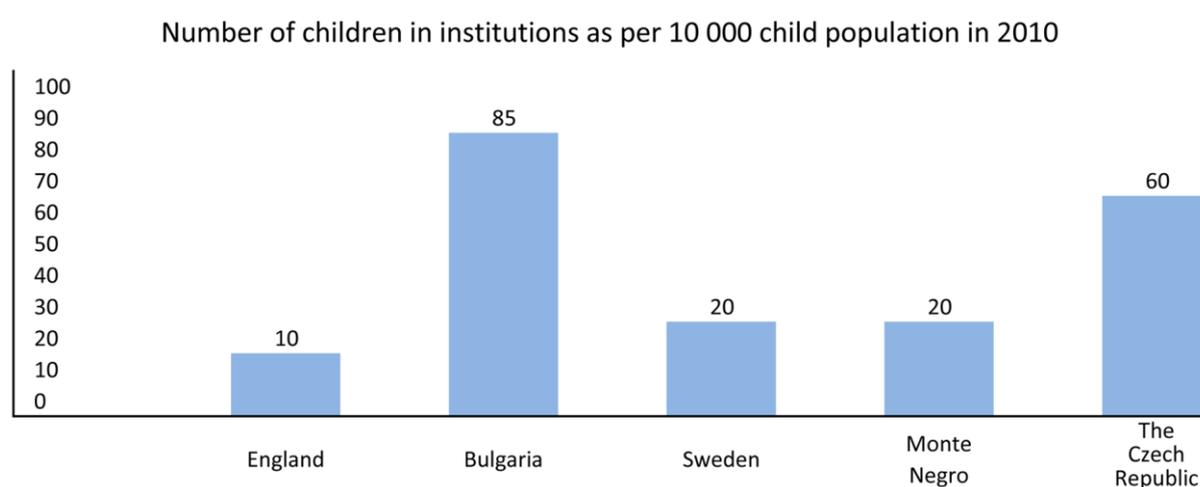


Figure 23 - Number of children in institutions (per 10000 child population in EU Member States 2010)

At the first year after the adoption of this Strategy (2011), the number of institutions dropped to 127: 31 for children between the ages of 0 and 3 years old under the supervision of the Ministry of Health, 24 homes for children with disabilities managed by the local municipalities, and 72 homes for children deprived of parental care, also managed by the municipal authorities⁴⁴².

⁴⁴¹ National Agency of Child Protection. Number of children in specialized institutions within the period 2001-2013. [The document is in Bulgarian]. <http://sacp.government.bg/programi-doklai/statistika/>

⁴⁴² National Strategy for Child Protection, *op.cit.*

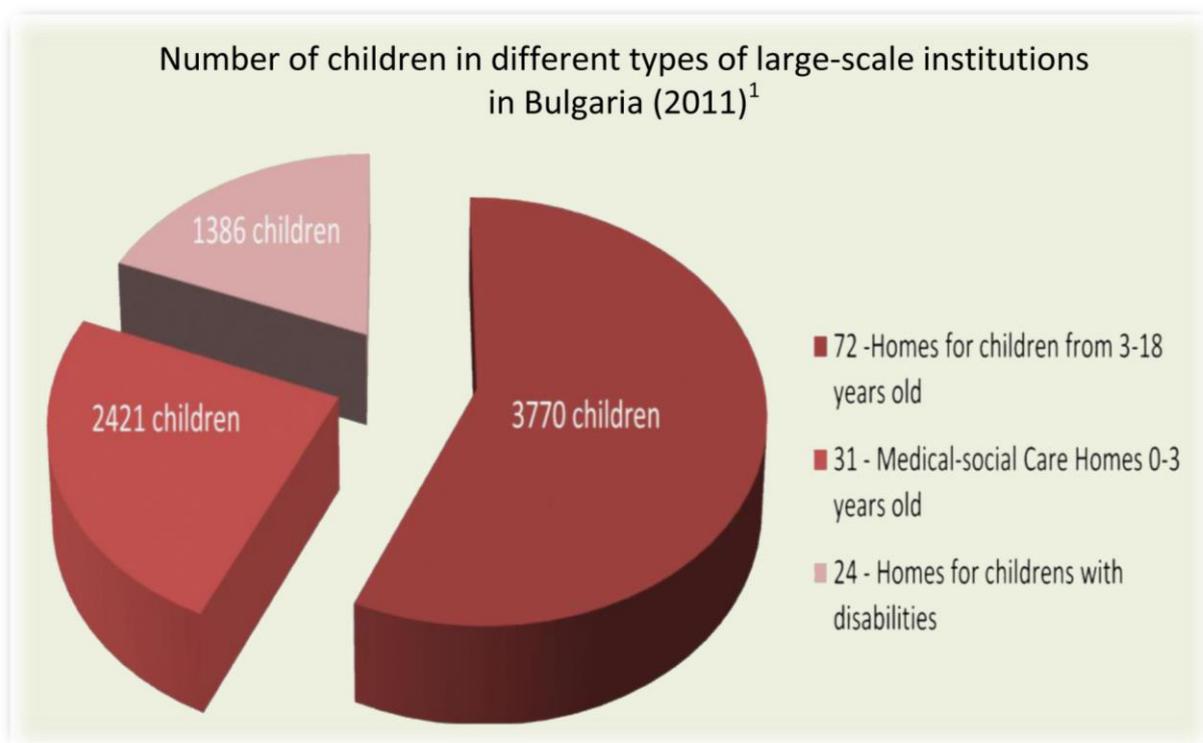


Figure 24 - Number of children in different types of large-scale institutions in Bulgaria 2011⁴⁴³

Throughout the first seven years of decentralization, municipalities developed predominantly services that were mostly guided by the objectives and priorities set by the NGO's leading and financing the projects. Hence, mayors had very little tools to assess the needs of their region independently, which created double provision of services at some regions and lack of services in others. Acknowledging this issue, in 2010 the government voted a change in the Law for Social Support and obliged all municipalities to prepare five-year development plans for enlargement of social services in their region. These territorial strategic plans should be based on the evaluation of the specific needs of the children who are residents of social institutions and their demand for individual services. On the basis of this new mechanism for empowerment of Mayors to create their own social development plans, the state decided which child institutions would be closed or replaced with alternative family type centres across the country for five-year period.

⁴⁴³This graphic is based on data from Ministry of Labour and Social Policy of Bulgaria, 2011

Once the municipalities create their own strategy they report to the Agency of Social Assistance (attached to the Ministry of Labour and Social Affairs) and together with the Agency of Child Protection provide permission for or reject the closure of services. The Agency of Child Protection is also responsible to confirm the budget for the new services depending on the national standards for child support voted by the Ministerial Council. Children are accommodated in the different institutions within the municipality through a special authorization given by the Sub-direction of Child protection part of the Direction Social Support accepted or not by the regional court. The budget of the municipality for the new services is also determined by the state and is totally dependent on the overall state budget (see Figure 25).

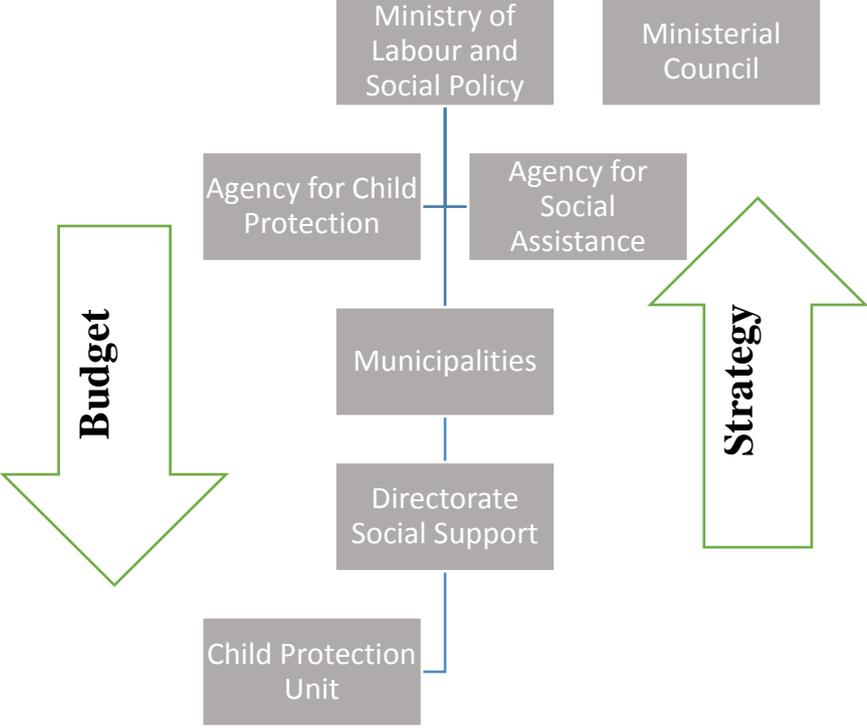


Figure 25 - Structure of the decision-making after decentralization

As mentioned earlier the third objective of the decentralization reform is the provision of alternative community based centers solutions to replace institutional care such as foster care families, and family type centers. Our interviews with representatives of the social departments in the municipalities in Burgas and Plovdiv demonstrated that this shift in responsibilities created tension among the social departments because of insecure budget

allowances to the different municipalities and thus differences in the services that they would be able to provide. In 2008, the number of foster care families was 25 according to UNICEF Bulgaria (2012/07). The development of municipality centers for foster care, where future candidates could be trained and recruited, was mostly project-driven (Project Foster Care) with the support of the Agency of Child Protection and the state Agency of Social Assistance. As a result of the active participation of the non-governmental sector, by 2012 there were 900 foster care families with 332 accommodated children (2012/07). Despite the fact that there were much more foster care families able to accommodate, large part of the children were still not enough social workers to work with the children and follow their stay in the foster parents. The increased interest and development of foster care services was also due to the creation of regional centers for information and training⁴⁴⁴ in nine regions: Sofia, Sofia district, Gabrovo, Pernik, Stara Zagora, Targovishte, Smolian, Shumen and Veliko Tarnovo. *Between the year 2009-2012 there were 738 informational meetings with more than 19,000 participants from the 9 regions. 384 became candidate[s] for foster parents and 277 were trained and hired (2012/07)*⁴⁴⁵.

In his doctoral dissertation⁴⁴⁶ J. Jechev, synthesizes examples of problems identified in projects driven by state agencies as part of the deinstitutionalisation reform. To start with, he presents the project *And I have a Family* carried out by the Agency of Social Protection.

*First, there is a deficit in the planning of the aims of the project and its estimated results; second, there is a lack of visibility what precisely is the role of the non-governmental organization provider of social services because the NGO is still not listed as a partner to the project by the Ministry of Social Affairs*⁴⁴⁷.

Since the state ignores the only provider of foster care families to that moment – the NGOs – one cannot talk about an active decentralization of responsibilities. According to the researcher, the most common difficulties that municipalities encounter are related to their lack of experience and lack of human resources prepared to work as providers of unpopular to that

⁴⁴⁴ Financed by the project “All children need a family”, together with the Ministry of Labour And Social Affairs, The State Agency Of Social Support, The State Agency Of Child Protection, and the NGO’s: Institute Of Social Practices, Union Samaritans, The International Social Service Bulgaria and municipalities

⁴⁴⁵ A detailed analysis of the quality of foster care will follow in Chapter VII

⁴⁴⁶ The role of the non-governmental sector in the deinstitutionalization process in Bulgaria,

⁴⁴⁷ JECHEV, J. *The role of the non-governmental sector in the deinstitutionalization process in Bulgaria*, University Publisher “Episkop Konstantin Preslavski”, Shumen, 2014

moment social services in the regions. What is more, the budget assigned for monitoring and evaluation of the services is *absolutely insufficient*⁴⁴⁸.

Similar problems are related to the creation of alternative centers for handicapped children. A detailed analysis of the project Childhood for All driven by the State Agency of Child Protection will follow in Chapter VII, but here it is important to mention after Jechev that *the budget for long-term delivery of the services for children with special needs is totally deficient and actually puts in risk children who are accommodated in the newly constructed Family Type Centers*⁴⁴⁹. According to the Monitoring Report provided by the state, the initial plan for deinstitutionalization of institutions for children with disabilities assigned one staff member for four children maximum, whereas the reality shows one staff member for ten children⁴⁵⁰. What is more, if we keep the target of 12 children spread in 147 family-type centers, the risk of reproducing institutional culture remains quite high.

In relation to the third group of homes Mother and Child for children under three, guided by the Ministry of Health, one needs to point out once again the extreme need to identify the NGOs in the field as official providers of social services together with municipalities and combine efforts to work on prevention of abandonment. In 2011, according to the data of the Agency of Social Support, *there [were] 2508 new arrivals of infants up to one year old, which is 299 more than in 2010*⁴⁵¹. In regard to the homes for the youngest children, there are some examples of good cooperation between the non-governmental sector and the municipality, such as pilot projects in Teteven, Shumen, and Sofia. *In Shumen thanks to the increased collaboration among state, municipalities and NGOs the number of children in the infant institutions decreased from 107 to 60*⁴⁵².

⁴⁴⁸ *Ibid.*,2014

⁴⁴⁹ *Ibid.*,p.14

⁴⁵⁰ Monitoring Report For The Deinstitutionalization Reform; Ministry of Labour and Social Policy 2010-2011

⁴⁵¹ JECHEV, *op.cit.*

⁴⁵² *Ibid.*

Although the overall number of children was decreasing during the period of 2009-2012, in some types of care homes, such as institutions and protected homes for children in risk the number of children who are actually under the system of social care and protection, increased in 2011 and 2012 ⁴⁵³. What is more, as mentioned in the introduction, according to a report done by the Bulgarian Helsinki Committee (BHC), the number of death cases that could have been avoided substantially increased around 2009 (see Figure 26) ⁴⁵⁴. Our interviews with the member of the BHC team with evaluation of quality standards of children with no parental care have also revealed that the Ministry of Health and the State Agency of Child Protection have no record on the death cases within the institutions from 0 to 3 years old (20/2015).

Year	Boys	Girls	Total
2009	442	307	729
2010	411	298	708
2011	349	252	601

Figure 26 - Number of children under 1 year old who died in state-run institutions 2009-2011

At the beginning of the year 2012, the Bulgarian Helsinki Committee (BHC) followed up on 252 cases of babies' deaths counted as successful deinstitutionalizations of children (20/2015). It is hard to believe the official version of the Ministry of Health declaring that all these cases refer to premature children born with malformations. On the contrary, according to data from the BHC the cases of child mortality were predominantly caused by negligence due to lack of availability of the personnel and starving⁴⁵⁵ (see Figure 26). Such a diagnosis reveals another issue related to the provision of facilities and external suppliers to the institutions. Managed and financed by municipalities, these services are very often underfinanced by the state budget and thus the quality is low and very often insufficient.

⁴⁵³ *Ibid.*

⁴⁵⁴ KUKOVA, S. Fundamental Rights situation of persons with mental health problems and persons with intellectual disabilities: desk report Bulgaria. Commissioned by the European Union Agency for Fundamental Rights. Bulgarian Helsinki Committee. 2011. http://www.bghelsinki.org/media/uploads/special/bg_fra_mh.pdf.

⁴⁵⁵ *Ibid.*

Hence, the lack of resources and low control of the services led to starvation even among the youngest infants.

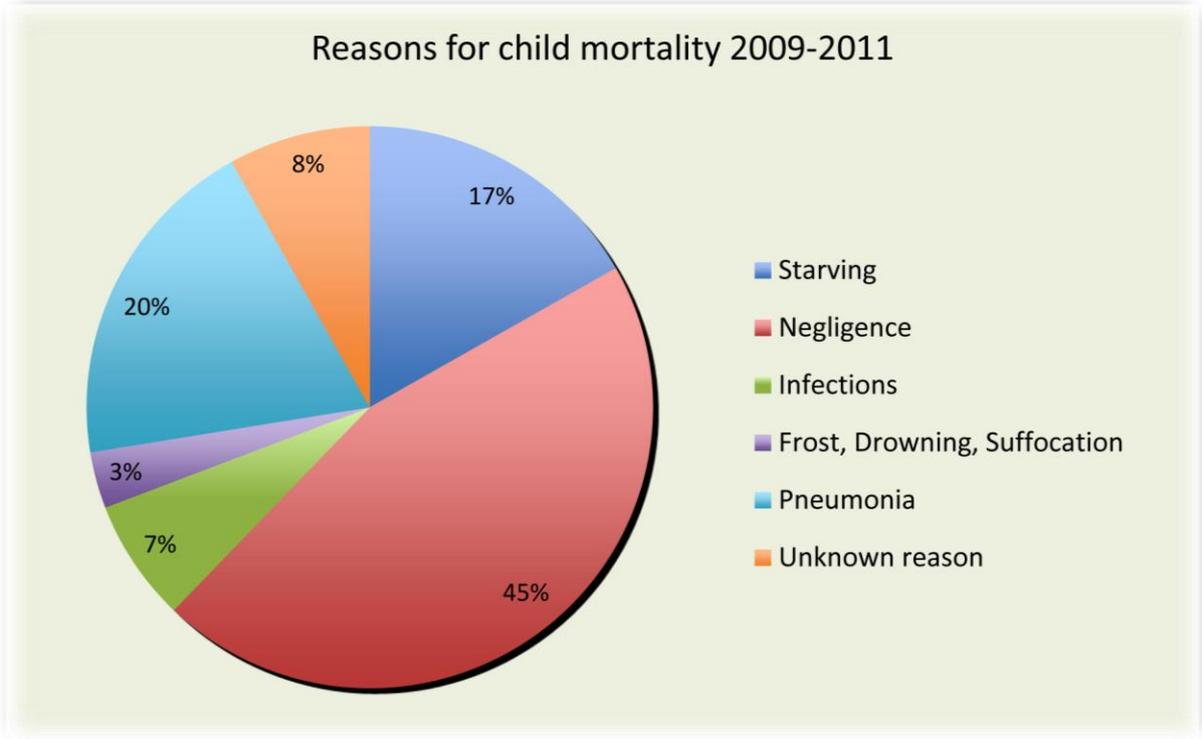


Figure 27 - Reasons for child mortality 2009-2011

What is striking is that the State Agency of Child Protection was alerted by the Bulgarian Helsinki Committee about these incidents and had no previous record of the total number of deaths in these homes since the beginning of the deinstitutionalization period. Such a lack of proper statistics and common databases for state institutions predisposes the system to further violations. It also makes an adequate comparison of the conditions of care at the beginning and at the end of the deinstitutionalization reform impossible. The main challenges facing the development of the reform in this three-year period (2009-2012) are mostly related to investment in prevention mechanisms and family-support services.

During our extensive search in the Bulgarian archives, we could not obtain any map or official statistical data about the regional distribution of the homes across the country. We presume that the reasons behind this lack of unified data is due largely to the fragmented

management of these institutions, which was divided between three different ministries: the Ministry of Health, which during Communism was and still today is responsible for the homes for children under three; the Ministry of Education responsible for homes for children aged 3 to 7 and 7 to 18 old without disability; and The Ministry of Social Affairs which was responsible for handicapped children from 3 to 18 years old. According to a qualitative analysis by the Bulgarian Helsinki Committee from 1999 (interviews with directors and public authorities), the location and distribution of the homes did not change between the 1980s and 1999. There was a centralized public approach to have homes for young children in all 28 main municipalities created to target the Party's goal of decreased child mortality, as well as management of unwanted pregnancies (since abortions were illegal throughout the regime) and centralization of the adoption procedures. The homes for children from 3 to 7 years old were situated in smaller cities and counted around 30. Homes for children from 7 to 18 were the most numerous ones and spread almost equally across the country (see Figure 28 with data from the Agency of Social Support). Homes for children with disabilities, however, were alienated from the big cities and active villages, confirming the stigma that the socialist regimes do not give birth to "handicapped" children (still true for homes for adults with disabilities in Bulgaria).

Figure 28 depicts how Homes for children deprived of parental care from 7 to 18 years old developed throughout the country from 1953 to 2016. The number of institutions that existed in 1953 was thirty six and they were localized in the majority of big regional cities for instance Sofia, Plovdiv, Ruse, Sliven etc. as well as smaller villages such as Varshec or Katunica. In 2003, the 2000 Law on Child Protection was modified and community based centers were introduced for the first time. Despite the new normative measures, the number of institutions rose to forty one with new openings in small towns situated in the north part of the country such as Vratsa, Totleben, Isperih, Strajica and to the south – Gotse Delchev, Shiroka Laka, Brestovica, Parvomai. In 2016, the National Vision of Deinstitutionalization spreads across the country, fortified by the opening of community based centers and inclusion of foster care families. As a result, twenty three institutions were closed, and the remaining ones are relatively equally distributed territory wise.

This is the shortest and at the same time the most dynamic period for the development of child institutions. At the beginning of year 2000, the Ministry of Education voted new procedural rules that would include the institutions to the obligatory educational system and provide free education until the age of 16 to all residents. The official types of institutions for children with no parents became: homes for children in pre-school age (2,5 to 7 years old); and homes for children from 1st to 12th grade. All educational programs and methodologies were driven by people with pedagogical education. According to article 5 of the new regulation for education of children deprived of parental care voted in February 2000, the definition of children between 2,5 and 18 years old eligible for accommodation was narrowed:

In contrast to the legislation from 1974 the institutions could not accommodate any more children born outside of legal marriage (article 29,b), children from families who are in problematic financial situation (article 29, z), children of parents who cannot deliver adequate parental control (article 29, i) children of parents who work too far from their home and children of teachers who work in areas with no accommodation provided for their own children (article 29,i)⁴⁵⁶.

Up to this date, there are no regulations to determine who takes responsibility for the above-mentioned groups of vulnerable children and where these cases should be accommodated since places in the homes were not available to them anymore. The Bulgarian Helsinki Committee put forward the alarming data on the inadequate housing of children from larger families into detention institutions where the state sends children with criminal behavior. Being a considerable number of the overall population of children that need social protection, such inadequate protection might lead to severe difficulties in a long term.

According to the data from the BHC, more than 50% of the institutions (for children from 2, 5 to 18 years old) working in this period had been settled in buildings constructed between 1952 and 1970 and needed considerable reconstruction work in order to reach minimum quality of child care. *The best material maintenance had the Homes for Infants probably because most of them were constructed in bigger cities closer to donors and benefiting from greater public grants from the Ministry of Health⁴⁵⁷.* The experts who did the survey suggested that the smaller the village, the less the control the worse the quality of care.

⁴⁵⁶ KUKOVA, S. (2001). *Children in Institutions* 3. Preface. Bulgarian Helsinki Committee

⁴⁵⁷ *Ibid.*, p.56

However, we could not find any statistical evidence that could lead to such a conclusion, and our research has shown that both the material conditions and the provision of high-quality care depend largely on the directors' capacities, and not so much on the location of the institution (bigger and smaller municipalities have advantages and disadvantages for the institutions). In Figure 25, we summarize the major characteristics of institutions for mentally retarded children under the supervision of the Ministry of Labour and Social Affairs found in a survey done by the BHC together with Amnesty International and Mental Disability Rights International on the conditions of Bulgarian institutions in 2002. As of December 2001, there were:

*19 300 mentally retarded children according to statistics of the National Statistical Institute, the Ministry of Health and the Ministry of Education. A total of 4341 children are accommodated in 57 institutions; 16 out of 57 are daily centers with capacity of 455 children who live with their parents; 1 full year home for children with physical disabilities with 130 children; 31 full year Homes for children with mental disabilities for children from 3 to 18 years old with 2129 children; 9 professional educational social complexes for children above 14 years old with 1627 children*⁴⁵⁸.

Out of 31 full-year homes for children with disabilities from 3 to 18 years old 25 were situated in small villages in economically unstable regions – 30-50 km away from the closest regional center⁴⁵⁹ (see Figure 29). Our interviews also demonstrated that the distribution of responsibilities among state institutions for protection of the rights of children (such as the Agency of Child Protection and the Agency of Social Support) and the social departments of the respective municipalities departments did not happen automatically among the providers and there was a visible tension and inequality between state agencies and other actors. For instance, the Agency of Social Support or the Agency of Child Protection works largely with the municipalities and indirectly minimizes the role of the non-governmental sector. *Therefore, there is more and more tension on local level and a danger for decline in the quality of services*⁴⁶⁰. What is more, since there is no mechanism put in practice by the state to control the quality and reassure critical analysis of the new services such conflict between the

⁴⁵⁸ Children in institutions 5. Homes for children with special needs

⁴⁵⁹ *Ibid*, p.8

⁴⁶⁰ *Ibid.*, 2014

providers puts the provision of services under serious interrogation. Another striking fact, despite the presumed equality of providers of social services, is that *out of 107 million euros given by EU Funds (as of 2014) none were directed towards public non-governmental organizations who were actually the once who were closing some of the old institutions*⁴⁶¹. A very important precondition for the successful redistribution of responsibilities stated already by the European Parliament in 2006 is the correct redistribution of the state budget towards the new providers of general interest, insisting on the eminent role of the *social services of general interest (SSGIs) in reinforcing social cohesion in the EU*⁴⁶². Since 2007, the Bulgarian state stopped being the sole provider of services in the institutions for children deprived of parental care but preserved its role as a main financial contributor to their maintenance. As a consequence, every year the parliament votes what part of the state budget will be given to the institutions in addition to the financial donations provided by municipalities, NGOs, private donations and others. On their side, the municipalities have the right to organise tenders and delegate part of the budget provided by the state to private providers of public services. As of private providers for child services, they need to be registered and approved by the Agency of Social Support and have licence from the Agency of Child Protection in addition to their registration in the EU Commercial Code. *As of the end of 2012 the number of NGOs registered as social providers for child services is 1000, which makes them the most active and important partner of the state in the deinstitutionalization process. In contrast, business organizations are still very inactive since the services remain very expensive and the investments without return.*⁴⁶³ We can conclude that with its legal framework, Bulgaria has passed one crucial stage towards the implementation of European social models. However, we still need to put more efforts into coordination of actors, greater acceptance of different competences and evaluation of the applied services. Once municipalities start to delegate more to different providers, their only duty remains the control of these services. Our empirical research shows that successful decentralization depends mostly on the human resources and their competences and we will demonstrate this through our cases later in the chapter.

⁴⁶¹ *Ibid.*, 2014 p.78

⁴⁶² Report On Social Services Of General Interest In The European Union (2006/2134(Ini)) - Rapporteur: Joel Hasse Ferreira

⁴⁶³ JECHEV, *op.cit.*

Our interview with representatives of the Bulgarian Helsinki Committee shows that the dependency of the municipalities vis a vis the state remains quite high despite the legally delegated freedom of management.

The process is still very centralized. Despite that in theory municipalities could stand independently social services following the state quality standards, they rarely have the means to do that and thus their main activities remain limited to the personnel. Decisions related to the budget, the closure or opening of an institution are guided by the state (49/2017).

4) Financial mechanisms of the reform so far

Bulgaria became the pioneer of EU funding for deinstitutionalization and had strong financial support from a variety of European institutions. The deinstitutionalization plan also underlined the exceptional trajectory of the reform, which demands the combination of more than one political and financial factor for its implementation: for instance, strong political will despite the change of governments, cross-sectoral financing from four different EU operational programs, World Bank investments, donor organizations, and the national budget. Thus, in order for these actors to be coordinated and functional, the government formed a working group attached to the Council of Ministries and led by the Minister of European Funds that included all actors directly engaged with the deinstitutionalization reform (including vice ministers).

According to the current law of the Republic of Bulgaria, social services related to children are mainly financed by the state budget, regional budgets, national and international programs, donations from local and international organizations and others. Every year within the national budget the parliament votes on uniform standards for social services, as well as their distribution in the country's municipalities. The uniform expense standard represents a fixed sum of money for the cost of living of a child in all types of social services. These standards include salary expenses, activities, food, and other costs. The money set by the parliament is then distributed to the municipalities, and it is up to the municipality to follow up, control and evaluate the development of the social service. Such decentralization of power theoretically gives freedom to the municipalities to open or close a specific service and answer directly to the needs in their region. Our research shows that there is no consensus as to whether they manage to use the funds successfully and our research shows both positive

and negative practices⁴⁶⁴. The money could be spent by the directors of the institutions, family-type centers, or risk centers, and thus the reform aims to give more independence and freedom to the individual actors and decentralize the decision-making process, so that it answers individual child needs in a better way.

In the following lines we will present selected data on the different financial expenses that correspond to the new system of non-institutional care of the deinstitutionalization reform. The graphs have been taken from the archives of Lumos’s annual report, which consolidated data from the National Agency for Child Protection (2013) concerning the period of 2009-2013 and the National Statistical Institute for data as recent as 2014⁴⁶⁵. Research done by Lumos in a range of countries has shown that *on average, institutional care is twice as expensive as the most costly alternative – community-based residential/small group homes; it is three to five times as expensive as foster care; and around eight times more expensive than providing social services-type support to vulnerable families*⁴⁶⁶.

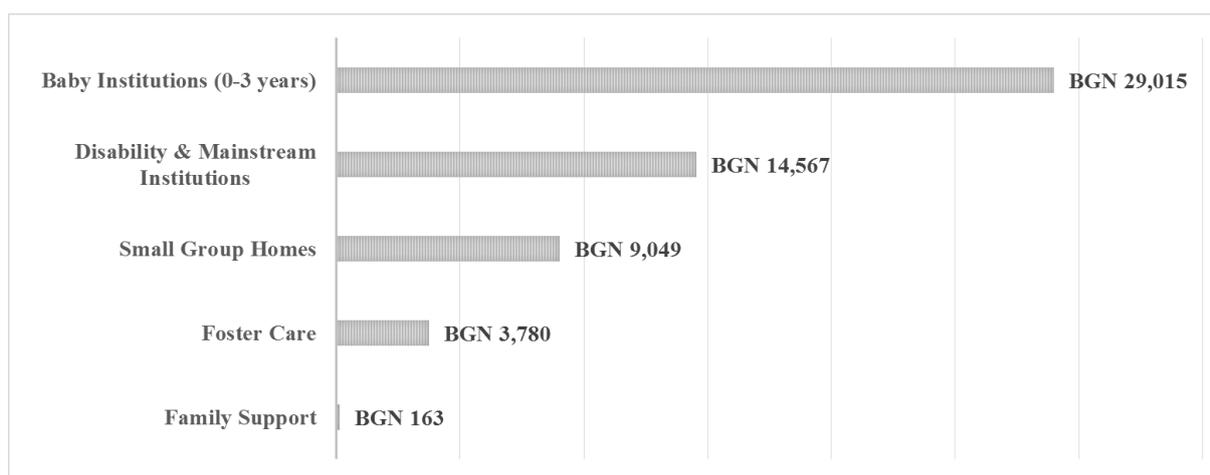


Figure 29 - Cost per child in alternative care 2014 in BGN

As demonstrated in Figure 29, financially the most efficient effort of the government should be to support the families before they abandon the child (family support: 83 euros per child, instead of 14,836 euros in an institution).

⁴⁶⁴ For concrete examples please see chapter VII

⁴⁶⁵ NATIONAL AGENCY OF CHILD PROTECTION. Comparative analysis of children taken care in special institutions from 2001-2013. <http://sacp.government.bg/programi-dokladi/statistika/>

⁴⁶⁶ *Ibid.*

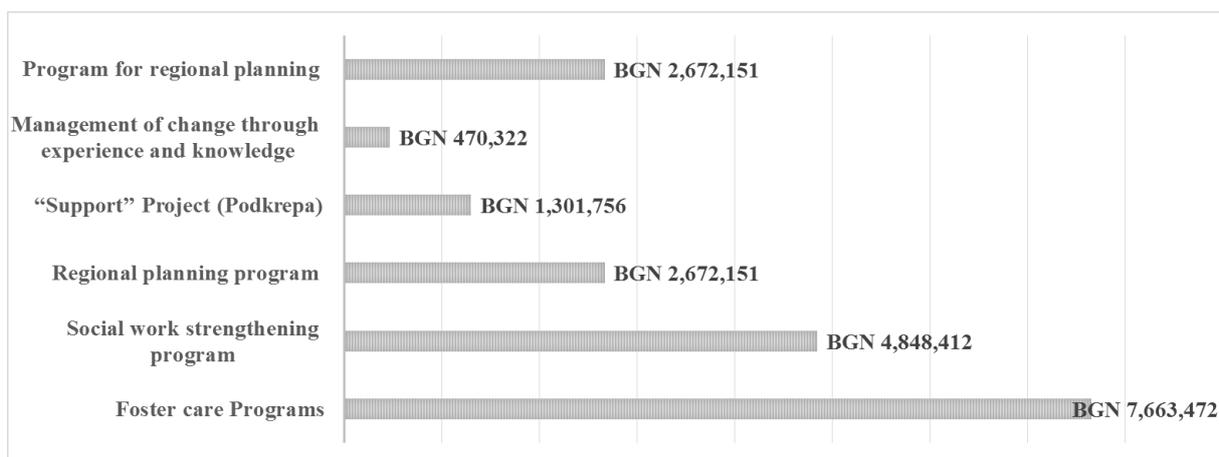


Figure 30 - Total cost of foster care programs 2003-2009 in BGN

B - Case studies

The following case studies illustrate the diverse impact of institutional care on children depending on the budget, but mostly on the managerial capacity of directors to spread the expenses and provide the necessary services for their residents. Since in all types of institutions for abandoned children the director is responsible for all key aspects of management, we based our comparison on interviews with two longtime directors with similar background in two different municipalities (Brezovo and Nessebar). The first institution presented is the Home for Children Deprived of Parental Care *Roza*, founded in 1985. As a result of the deinstitutionalization reform, it was transformed from an institution to Complex for Social Services in 2013, and it still accommodates children with no parental support. The second case study – the Home for children with disabilities Sveti Stilian Paflagoniiski, was on the list of institutions that had to be closed after the Mogilino case, and despite outstanding living conditions that it provided, it closed definitively in 2014.

1) Home for Children Deprived of Parental Care *Roza* in Zelenikovo, Brezovo Municipality

Zelenikovo is well situated little village seven kilometers from Brezovo and forty kilometers from the second biggest city in Bulgaria, Plovdiv. The municipality of Brezovo is known for the annual collect of grapes and roses and accommodates around 7500 citizens. On the 4th of March 1985 the Home for Children Deprived of Parental Care *Roza* opens its' doors. Reconstructing the building of an old school, the Home has a quite central location close to the municipality and the church of the village. In contrast to other Homes built in such small villages such as Zelenikovo, the access to the building is very easy, the roads well maintained, the windows have been replaced recently. The Home provides social services as well as permanent and weekly care for thirty five children from three to seven years of age. The permanent care groups include children who are deprived of any other form of family environment (extended family, foster care etc.) as well as children who are placed under emergency circumstances⁴⁶⁷ and need to be under police protection.

Our interviewee, the director of the institution, I.K. is a direct witness and actor of the transition of the Bulgarian social system in its different stages. Born in 1955 in Brezovo

⁴⁶⁷ According to article 33 of the Child Protection Legislation these cases include family environments which can put the life of the child in danger (any drug abuse, physical violence etc.)

municipality, I.K. graduates in 1990 with master's degree in Industrial Engineering from Plovdiv University. Her career in the public sector starts in 1987 as a Secretary to the Brezovo Municipality responsible for the Commission of Social Affairs of the Brezovo Region. This position allowed her to progress to the position of a Director Municipality Center for Social Affairs and in 1990 becomes Director for Municipality Service of Social Support under which direction fall the supervision of the Home for Children Deprived of Parental Care *Roza*. In 1999, I.K. became the manager of the director of the *Roza Institution* until 2013. Once the decentralization process takes place in 2013 and touches upon her institution, the Home merged administratively and functionally to Family Type Center for Children Deprived of Parental Care from three to eighteen years old, part of the Complex of Social Community Services which now represents three community services, and four foster care families.

a) **Infrastructure**

Already in 2011 (before the decentralization legislation) the director I.K. undertook changes in the spatial organization in the Home to free up space for new services and form more private family-live places. Girls and boys were accommodated in separate rooms with an average of four children per room. According to the director, the fact that the institution has been created and remains within the territory of the little village of Zelenikovo brings only advantages to the children: *Children who are raised in a small village receive a lot of attention from the locals who know them individually by name and got used to their participation within the everyday life of the community. Being constant observers to our work the community serves also as our most strict corrector (50/2017)*. Our observations on the field confirmed that smaller the municipalities provide greater control the local population has over the provision of care and also greater preconditions for natural inclusion of residents in the community life.

b) **Budget**

The budget of the Complex of Social Community Services is determined by the state every year. In 2015 the state provided, and the municipality accepted the sum of 225 515 BGN (112 757 euros) for salaries, maintenance, reconstruction of the building, learning materials and toys for total of 35 children accommodated in three family type centers. It is up the director of the Complex to distribute the budget accordingly to the needs. We have

remarked that this sum almost never changed throughout the years and that the highest expenses the Complex of Social Community service have is for salaries and insurances of the staff 63, 45% of the total budget or 143,097 BGN, followed by expenses for food and maintenance such as water, electricity, heating- 36, 54% of the total budget or 82,419 BGN and last 0,2 % or 12775 BGN for pocket money of the studying students (1BGN for each day per student). In 2015 there was no money left for learning materials and toys, but the director explained that her choice to privilege higher salaries for personnel on the behalf of toys and clothes is also explained by the higher level of donations of these types of objects. Despite the freedom of the director to choose the amount of the salary for his staff, the state sets the minimum salary and insurances that should be paid by the employer and cannot be decreased. For instance, in 2015 the minimum salary was 380 BGN (190 euros). In addition, the state requires that the Complex of Social Services maintains certain living conditions such as minimum temperature in the common rooms (22-24 degrees) and thus the director should reassure that the expenses for heating will be enough to maintain this temperature throughout the whole month. The same state standards exist for food regulation – minimum 3 BGN per day which is 1.5 euros for three full meals of children between 3 and 18 years old.

Expenses per year (BGN)	Home for Children Deprived of Parental Care <i>Roza</i> (2002)	Complex of Social Services <i>Roza</i> (2015)
Salaries (total staff)	171 014	143 097
Subtotal: Director	6240	8400
Food and Maintenance (water, heating, electricity)	95 116	82,419
Pocket Money Residents	15 695	12 775
Total Budget	281 825	238 291
Total Children	43 (3-7 years old)	35 (3-7 years old)
Total Budget Per Child	6 550	6 808

Figure 31 - Comparative table of the expenses before and after the deinstitutionalization

In 2011 the Institution undertook the following initiatives:

- Start of the Behavioral and Social Skills Project, which gives equal opportunities to the children to pursue personal and career development;
- Additional activities focusing on the development of life skills to promote independency in serving and protecting themselves, improving their communication skills and mobility and have adequate tools and techniques to tackle everyday problems;
- Start of the “Granny and Grandchild” project, which works with small groups of one or two children and teaches housekeeping skills, cooking, manners in hosting guests and visiting places outside the Home, provides a supporting environment to integrate the children in society so they can lead an independent life outside of the Home

c) **Staff**

The care for the 35 permanent residents should be reassured twenty-four hours, seven days per week. The night shift staff should be composed (according to regulations) of minimum two people. However, since the Complex is understaffed all members of the team pass night shifts at least twice per month. In each community-based center there are six staff members including: one manager (with university degree education), one social worker (with high school education and qualification), and five child careers (one with university degree education, and three with high school level). The general positions are director, psychologist, concierge, cook, fireman maintenance and driver. Staff members are allocated to every group permanently to ensure the behavioral and social skills programs are carried out most effectively.

Their daily responsibilities include meeting the children’s basic needs, feeding them, maintaining their hygiene, providing medical care, adhering to the curriculum, educating them using art and music.

We also benefit from the work of a musician and a counselor on the social project “Granny and Grandchild”. Every child has an allocated key worker to ensure better internal organization and better care for the child. Thus every adult is familiar with the progress and problems of their allocated children and form trusting relationships (50/2017).

Since it is very hard to find qualified personal, the director organizes seminars and trainings given voluntarily by university professors at the University of Plovdiv. By doing this the director hopes on the one hand to increase the qualification and prepare its staff members to meet the needs of the children in a better way and on the other hand to motivate its personnel to stay longer in the institution. What stroked our attention is the multitasking and reconciliation of the personnel who needs to compensate for the larger demand of care provision. For instance, the driver also helps with the maintenance, the cook cleans, and the nurse accepts to babysit the smallest children.

The focus of our work with the children is to develop their skills and strengths, support and understand one another; achieve practical skills in a safe environment, motivation seek improvement of their skill set and broaden their chances of success. This will compensate for the disadvantaged social environment and the lack of parental care and will satisfy their primary needs of overall development (50/2017).

All children are enrolled in the public schools and kindergartens in Brezovo which is seven kilometers from the institution and thus five days out of seven the social worker accompanies the children by bus to the school. So far, we have not found any signals for maltreatment and abuse in this center. In such cases it is the director who has all the power to appoint, hire and fire any of the staff members. The director's position on the contrary is defined by the municipality and is the Mayor that has the rights to determine her/his salary and appoint or fire a candidate. The director is the only legally authorized person who can take any decisions regarding the adoption of the child, his/ her meetings with biological parents and relatives, or his/hers transfer to another institution. Unfortunately, adoptions happen very rarely and according to the director this is due to the fact that the *procedure is very heavy and time consuming. I try to be informed and maintain good relationships with international agencies for adoption in addition to the Bulgarian once (50/2017).*

The director emphasis that the control on the behalf of the state weakened drastically since the creation of alternative community-based care due to lack of a coordinated system for evaluation and follow up of the individual cases.

2) *Home for Children Deprived of Parental Care Olga Skobeleva*⁴⁶⁸:

This case is a positive example of a combination and a smooth transition between the new and the old institutional means for protection of children deprived of parental care and families at risk. The center began in 1948 as a Bulgarian- Mohammedan gymnasium with full boardinghouse and has passed through multiple political transformations. In the beginning, the assigned building⁴⁶⁹ was called the *Boardinghouse for Students from the Rodopa Region* and was for both Muslim and Orthodox with no discrimination based on faith or ethnic origins. All students attended schools within Plovdiv municipality. By 1970/1971 there were 265 children, and among them 150 had mixed parents. This type of diversity and inclusion should be underlined within a regime that is very often considered to have been intolerable towards minority groups. In 1982 the Boardinghouse was associated with the orphanage *Dicho Petrov* and was renamed the *Home for Youth in Disadvantaged Social Conditions*. After the fall of the regime in 1999, the Home fell within the category of Homes for Children Deprived of Parental Care and its capacity was reduced to 110 children. Until 2007, the home was named *Special Institution for Social Help for Children and Youth* and was directed by the Ministry of Education. In 2007, the institution was renamed *Home for Children Deprived of Parental Care* under delegated governance from the Ministry of Social Affairs. In 2009, the government launched a national plan for reconstruction of the institutions and insisted on the gradual diminishing of places and opening of alternative services for care and protection within the community. Between 2009 and 2015 the number of children dropped from 110 to 20, and the empty parts of the building were rearranged to meet the needs of the community based alternative care centers for children. Since the decision of Plovdiv municipality council on December 20th, 2012, the separate parts of the ancient boardinghouse function as one structure with a common budget and management.

The seven different services of the home include: a closed institution with a capacity of 20 children, a day center for children with disabilities with capacity of 6 places, a rescue center for children victim of violence with capacity of 10 places that opened in 2010, a family-type center for children with disabilities opened in 2013 with capacity of 10 places, a temporary apartment with capacity of 6 places that opened in 2014 as separate from the home

⁴⁶⁸ In order to fully capture the implementation of the reform, we spent a day in the newly transformed center for social services Olga Skobeleva

⁴⁶⁹ The address of the building has never changed from Blvd. Marica 142 Plovdiv

residential care, a center for social rehabilitation and integration of children opened in 2014, another family-type center opened in 2015 with capacity of 14 places (19/2015).

As of 2016, there were around seventy people who work within all social services of the center. Plovdiv municipality is the first one that decided to permit the launching of a *crisis center for children victims of violence* without having state delegated services. The center on its own initiative launched a project and started to help children on the street first having too main aims: 1) short stays in the center of max. 6 months to avoid institutionalization and 2) full access to appropriate psychological, medical, and social assistance so that each individual case is resolved as soon as possible. Despite its initially targeting children on the street, after six months the director of the project realized that there was an even greater need to help children that are aggressed and violated, and as a result they changed the target group (additionally, there was already a home for children on the street that existed in Plovdiv). Since 2010, the project has been financed through the government budget and the overall number of children has dropped from 70 to 50. Physically, the crisis center is situated in the same building as the old home institution, but the services are separated in terms of specialist interventions. The staff for each service of the Complex is designated by the state through the Ministry of Social Affairs. For ten children in a crisis center, there is a need for seven professionals. Within the residential institution the quota is 0.5, which means that for 50 children there are 25 people caregivers. For the children with physical and mental disabilities the director of the center has lobbied for a state house to be donated to the Complex and where he could separate the children from the other orphans with their particular caregivers to a new community-based center renovated for the purpose. Since March 1st, 2013, the new center functions under the same supervision and with a common budget and services as the big home and the crisis center sharing the same expenses. The creation of this new configuration is not on a national level but based solely on municipal decision and initiative. The annual cost of living of one child in the residential home is around 7000 BGNs, in the family type center for children with disabilities is 9000 BGNs and without disabilities 8600, and in the day crisis center the annual cost is 6300 BGN.

3) Home for children with disabilities Sveti Stilian Paflagoniiski, in Kosharica village, Burgas Municipality

The Home for mentally retarded children *Sveti Stilian Paflagoniiski* is situated in the little village of Kosharica, seven kilometers from Sunny Beach. It is a specialized institution which accepts children from three to eighteen years old. The building where the home is installed is built in 1952. At the time of our interview the institution has been already closed for three years by the Agency of Child Protection, The Agency of Social Support, the municipality and the non-governmental sector. The Home falls within the project “Childhood for everyone” according to which all specialized institutions for children with disabilities should be closed by 2011 after individual assessment of each child physical and mental condition. Despite the fact that the institution resisted the 1st wave of deinstitutionalization, it was officially closed on the 1st of October 2014.

a) Infrastructure

The institution accommodated seventy children and sixty-four people staff dispersed in a two-floor building on 2.5 hectares, fourteen kilometers from the center of Nessebar. The rooms that composed the institution are: kitchen, living room, physiotherapeutic room, sensor, music and art therapy rooms; in addition, the director initiated the creation of a special kitchen adapted to the size of the children where they can start learning to prepare food on their own. The music therapy had a special place in the Home and the director himself founded and guided the Homes orchestra *White dauphines* where children played piano, drums, guitar etc. Sports equipment was spread among 350 square meters and included basketball, football and volleyball fields adapted to the handicap of the children. In the summer, the fields turn into a beach with three swimming pools zones for relaxation. The yard of the garden was also used as a hot house of 100 kilometers with fresh fruits and vegetables used to supply the needs of the community. The Home also had a little private church where children were thought to lit candles and pray if they want to.

We must underline the outstanding quality of the Homes facilities and the incredible investment on individual facilities for development and stimulation of children’s handicap.

b) Staff

Our interviewee was the director of the institution for nine years with annual salary of 780 BGN (390 euros) and managed a budget of 500,000 BGN (250,000 euros). All social workers were hired in the institution through public advertisement and were between 30-35 years old with university education and remunerated 680 BGN (340 euros) per month.

The decision related to the personnel depended entirely on me. Thankfully throughout the nine years of my term, I fired only four people: three cooks for stealing food provisions and one mentor for being too disrespectful towards the children (2017/51).

The personnel were composed of: three social workers, one psychologist, one speech therapist, two chiropractors, eight nurses, fourteen mentors, sixteen aid man, two maintenance workers, and one gardener, which *allowed access of all children to the different activities in order (2017/51)*. As in any other child institution, the role of the director was complex and included not only good managerial skills but also full guardianship for the minors.

My day started at seven o'clock in the morning. I would arrive in the institution and go directly to the children with the most sever handicap who are blocked in beds; second, I used to pass greet all other children and then talk to each specialist so that I can have a complete overview of the schedule for the day and if something important happened overnight. If necessary, I would than bring one of the children to the regional center in Bourgas and provide him/her with additional medical assistance. Each Monday morning, we had an obligatory reunion and medico-pedagogical council (2017/51).

According to data provided by the director there were only six children who had regular visits from their biological parents. Fifteen of the residents were accepted in the public school situated in the village and two of them managed to complete technical secondary school for tourism and found job as waitress in Sunny beach. The mission of the personnel was to provide all necessary tools for the development of the children so that they reach greater independence in life and have less stressful transition once they turn eighteen.

Throughout these nine years as a director, the greatest challenges I had, occurred in the first six months of my term. My institution was second on the list for closure after Mogilino and I had very little time to prove to the State Agency of Child Protection that my Home was one of the best in country and it deserves to be saved (...) When the public officer came and

witnessed with her own eyes the conditions in which my children were taken care she dropped her pen and could not believe her eyes (...) I got recognition not only from Bulgarian officials but also from the chairman of the Belgium parliament who came to Bulgaria to visit Mogilino and five other institutions for mentally ill orphans. On his way out of the home he said- "Happy are the children who have the chance to live in your Home" (2017/51).

The main partners of the institution were Nessebar municipality and the Mayer as a chairman of the municipality council. The director of the Home insisted on the importance to have close relationship with the Mayer in order to be able to negotiate greater salaries for the staff and at the same time increase the expectations of the municipality for the provision of the social service. The director proved that with good negotiation and management of the total cost he could obtain 150 BGN greater salaries in comparison to the average wages in other Homes for mentally retired children and thus achieve stable and well qualified personnel. In addition to his great implication and partnership with the municipality, the director of the institution acquired donations from Swiss, Norwegian, German, English and local businessmen.

In order to include its residents within the community life of the village, the residents of the Home participated in all social activities organized by the Mayer of Nessebar. *Our children were invited and participated in international festival for music performances in Switzerland. As you can imagine this is a great achievement for a child with a severe mental handicap and abandoned the parents. Unfortunately, it is all over once the deinstitutionalization process started (2017/51).*

Multiple times throughout our interviews the director demonstrated his mixed feelings towards the reform. *It is a positive thing that the number of children decreased. However, what really lack is a well-educated and prepared personnel. Everything happened so fast, a la Bulgarian...without real consideration for the best interest of the children (...) still when I call one of my children they beg me to take them back to Kosharica (...) most of them will never be able to take the plane, go sing in an international festival or have constant and free access to the beach (2017/51).* Despite the incredible efforts of the Director to create and maintain personalized living conditions for his residents, the Home in Kosharica was closed on 1st of October 2014 (following a Ministerial Act). The institution fell within the strategy of the government for the closure of institutional type of care for children with disabilities. However, we could not but underline the great dysfunctioning of a system which suffers from

lack of resource and at the same time allows the distraction of facilities which (we have all proofs to think) were functioning in the best interest of the children inside. Such lack of flexibility shows that to a great extent the gap between the state and the people (in 2014) was so big that most probably the state agent who closed the services never actually visited the Home in person. Second it shows that if the Municipality is not interested to support the director, there is no other organization that can prevent the distraction of the institution.

NAME	WHERE AND WHEN?	CAPACITY	CHARACTERISTICS	FINANCE	PROBLEMS/ADVANTAGES	CITATIONS
Center for professional education and rehabilitation "St George"	Pomorie, Burgas Municipality (3200 m area including swimming pool, sauna, and all facilities adapted for handicap children) Since 2001	18-20 children (from 18 to 35 years); 420 children/annually	Day center for education of children with disabilities with living parents/relatives; Children receive trainings for free (computers, languages, professional development) and services (kinesitherapy and psychological aid)	Social EU Funds National Center for Social Rehabilitation administrative fees (0,25 cents per day for food and accommodation)	Perfect sanitary conditions; individual rooms with WC; additional options for family members The main purpose of the center is to form the residents on English and computer skills (one-month courses in groups from 10 to 15 people)	Dimo Andreev Director: "Our main ambition is to facilitate all difficulties of the handicap children so that they can show the maximum of their abilities"
Day Center for children with disabilities "Saint Mina"	Sofia, Sofia Municipality Since 1997 with the participation of the Flemish Federation of Belgium	20 children (4 to 15 years old) 15 staff members (all with university education; average age 26)	Support to the psychological and physical development of children with disabilities. Provides training for social integration	National Center for Social Rehabilitation Sofia; Monthly fees equal 60% of the min. salary The Flemish government Donations from BG and foreign private donors and municipality department of social support	Good opportunities for trainings and rehabilitation Good sanitary conditions The center is equipped with Montessori equipment - donated by parents The staff salary remain very low (60-80 euros per month as of year 2001)	Rumiana Dafova – Director
Family Center "Chaika" for reintegration of children with M.D.	Varna Since 1998	50 children 8 staff members (4 permanent and 4 project dependent) and 1 volunteer	A private initiative (mother of a disabled child) created by the NGO "Unity for protection of disabled children Varna" (1994) Social awareness, integration Health and social services Evaluation of the social services for disabled children in the region (2000)	Charity Know-How (British NGO) PHARE (1998) State fund for rehabilitation and social integration (1999) Club Open Society Varna (2000) Varna Municipality	Renewal of the existing infrastructure is necessary Better coordination with the municipality (more programs for the creation of separate smaller homes within the community; lack of regulations for volunteers)	Dr Todorka Siderova – director

Daily Center St Nikolaj	Burgas (building donated by the Municipality of Burgas and equipped with the financial support of the Flemish government) 2000	25 (5 to 15 years old) full day residents + 25 occasional residents for separate activities 13 staff members	Preparation for independent life through rehabilitation and education Integrated education for social adaptation Health and social services	National Center for Social Rehabilitation Sofia Ministry of Labour and Social Affairs Monthly fees (30euros) The Flemish Foundation for handicap people Private donations	Some of the residents are accompanied to public schools or individual classes Multi-disciplinary team (13 specialist of the home together with the Center for psychological diagnoses Each child has a private access to doctor and dentist	Stefka Todorova - Director “In the future we will need to invest more in the integration of the children in the public schools. Our schools should be able to accept the different children. We have already contacted two public schools and in theory we have the support of the Ministry of Education”
Home for children with mental disabilities “Borislav”	Borislav village, Pleven Municipality (2 dormitories with 23 beds) Since 1985	45 children (3-10 years old) 28 staff members (director, social worker, 5 nurses, 1 rehabilitator, 5 helpers, 8 cleaning ladies, 3 cooks, 1 driver, 1 washing lady, 1 worker)	Provides social services for children with mental handicap outside of their home environment Accepts also mentally handicap children with additional physical problems The proportion of ethnic minorities is 50% 43 of the children are orphans and 2 with parents who live below the poverty line	The building has been built in 1950 and since then there were no reconstruction works Poor living conditions; miserable infrastructure; no sanitary conditions; almost empty rooms No diapers, no toilet paper The temperature is estimated to be 5 degrees Celsius The state finances from 0,4 cents to 0,1 cents for food severe malnutrition The BHC found cases of children with no mental disabilities at the age of 5 who were residents of the institution	There is no record for violence against the residents No books, and special toys but 1 TV and 3 radios No parental visits Regular visits to the center of the city	

Figure 32 - Comparison of community based centres after the decentralization

The role of management

The data that we retrieved from the archives shows that differences in institutions among the regions exist in terms of infrastructure, management and quality of care but in the majority of cases, these differences are not provoked by the location of the institution. Small villages as well as big regional cities might become good or bad examples of care depending mostly on the management of the institution by the director and the selection of personnel (social workers, doctors, psychologists etc.). Directors of all type of institutions have the right to initiate activities, call for donations, and effectuate any types of structural changes related to the education of the children that they accommodate. As the case studies show some directors were more successful than others and the outcome of the reform is hard to be formally evaluated because each case has its own specificities. Our explanation of this conclusion is that the decentralization of services is a process, which demands great coordination of the actors and the establishment of responsibilities is not an individual act but a process, which demands time and resources. Local authorities learn predominantly by sharing experience with each other throughout informal public events and individual contacts and rarely formally at trainings or project let reunions⁴⁷⁰. The establishment of community based services across the country develops separately from the amelioration of services within the existing institutions and thus many of the children in need actually do not have access to the new facilities. Since such services are completely new for most of the Mayors, there needs to be constant monitoring. The evaluation, however, should not be based on formal requirements of the higher in the hierarchy actors but on constant observation on the field and cooperation of actors who eventually will become corrective agents to each other. As we show with the English example in Chapter VII, precisely this type of bureaucratic formal procedures could lead to the destruction of working models and the support of services, which fail to protect children's safety.

Until the vote of the 1st Law for Child Protection in the 2000, the existing institutions for children deprived of parental care suffered dramatically from the decreased overall quality of state administration and welfare of the population. Our study demonstrates that the path towards European membership was marked by strong economic accession criteria and weak

⁴⁷⁰ KNOW-HOW CENTER. Research on the Deinstitutionalization process: The case of Bulgaria. New Bulgarian University. 2013. Sofia

child protection guidelines. As a result, during that period, even if there were European social funds available to the country they were lost and not spent due to lack of knowledgeable experts and administrative capacity to lead the projects. What is more, such lack of alternative strategy for child protection nourished the dependency on the previous regime and created preconditions for the increased need of institutional care and its importance as an alternative protection of abandoned children. Three years after Bulgaria joined the EU, in 2010, the country still had some of the highest rates of child mortality within institutional care in Europe confirming the inadequate budget distribution of services for child and family support. Therefore the adoption of the 1st National Vision for Deinstitutionalization was a crucial step towards the creation of a national strategy for eradication of institutional care and the simultaneous development of community services across the country.

The decentralization that occurred at the beginning of the 2000 was a necessary step that would lead towards greater quality of child services under the condition that is well managed. Twelve years after the 2003 legislation, the greater control and individualization of care provision is still largely put into question. The inclusion of NGO's and municipalities as social providers did not happen in the same pace and that created further preconditions for chaos in the provision of services. Taking into consideration all the challenges in the governance of the reform we also stipulate that for the first years, the government invested mostly to erase the visible institutional patterns (infrastructure, building facilities etc.) and less on the substitute of the newly created centers. For the moment one witnesses inadequate financial standards for services that are unable to satisfy the individual needs of children and their families. In addition, there is visible atrophy of the personnel in most of these institutions while the Ministry of Labour and Social Policy together with the Ministry of Finance do not prioritize the urgent need for rise of wages of social workers and their valorization through trainings. The survival of foster care families depends almost entirely on projects financed by NGO's and there is great demand for more adequate trainings depending on the different groups of children. Finally, the decentralization among social providers should not become a synonym of disorder among them. For the system to follow the path of each child individually all government and non-government organizations should ameliorate their coordination and monitoring control. What is urgently needed is an objective evaluation of the provided services, quality test of their effect on children's wellbeing so that bad practices of the institutional impersonal care are not reproduced behind different names.

The description of the transition from Communist to European child welfare is an important step for the understanding the setting of the deinstitutionalization reform and the logic behind its progress. Our analysis started from the assumption that the development of child policies is linked to the ideology of the welfare state and is a good indicator for the functioning of state institutions. For the system of child protection, the above presented in Chapters IV and V patterns, institutional solutions, ideological frameworks and the mindset they shaped were crucial. Furthermore, strong path dependency made the reform more challenging, as society (the parents who abandon) and state agents (the personnel who work with the abandoned children) are still formatted within the communist logic.

As the above presented cases demonstrate, not only the Bulgarian state but also the Bulgarian actors had some severe difficulties to meet the European guidelines on time and with relevant success. This was due to multiple reasons including the lack of past experience in the implementation of such decentralized policies of service provision and the dramatic divergence of human resources among institutional staff and social workers. Our empirical analysis in Chapter VI and VII will go further into the analysis of the advantages and disadvantages of the state transformation through decentralization bringing up the unintended effects of the deinstitutionalization reform.

	LAW	INSTITUTION	CATEGORY OF CHILDREN	ACTORS
1878		1st Home for Abandoned Children (Plovdiv)	Orphans	Charity initiative Nathalia Stolipina
1892	The Law of Illegitimate Children and Orphans	Orphanages	Extramarital kids / orphans (both parents missing)	The King
1928		The Union of Child Protection	All children	Prime Minister Andrei Lyapchev
1935 - 1944		Permanent Kindergartens	social orphans (living parents but too poor to take care of the children)	Donations
		Health Centers	Children who need constant medical assistance	Ministry of Health
1936		1st foster care service " little homes"		The Union of Child Protection and social organizations
1946	Law for Health Protection			The Communist Party
1947		Homes for Mother and Child	A. social orphans (living parents but too poor to take care of the children) B. Biological orphans	Ministry of Social Affairs
1952		Homes for Children and Youth	Social and Biological orphans merged	Ministry of Education
1974		Homes for Children Deprived of Parental Care	7-18 years old children	Ministry of Education
		Homes for Mother and Child	0-3 years old infants	Ministry of National Health and Social Care
		Homes for Children with Disability	3-18 years old	Ministry of Social Affairs
2000	Law on Child Protection	Homes for Medical-Social Care	0-3 years old infants	Ministry of Health
	National Vision of the Deinstitutionalization of Bulgaria	Homes for Children Deprived of Parental Care	3-18 years old	Ministry of Education
		Homes for Children with Disability	3-18 years old	Ministry of Social Affairs
				National Agency of Child Protection
				National Agency for Social Assistance
2003	Law of Child Protection (modification)	Establishment of Community based services		Accreditation of providers of social services
2006	Decentralization of services of child institutions	The Institutions for Children Deprived of parental Care are transferred to municipalities under the methodology of Ministry of Social Policy	Children deprived of parental care First community centers of family type	PHARE PROGRAM Ministry of Labour and Social Policy; municipalities; EU
2010	National Vision of the Deinstitutionalization of Bulgaria	Homes for children deprived of parental care/ Community Based centers/ Foster care	All Children deprived of parental care	Public and private providers of social services

Figure 33 - Timeline of Bulgarian child protection laws and Home development 1878-2010

VI - The European Union as a Driver of the Deinstitutionalization Reform

This chapter points out the great challenges of the revolutionary reform of deinstitutionalization driven by EU mechanisms and legislation on child protection since the 2000's. In the first part of the chapter we will present the European guidelines for child protection systems and the position of the deinstitutionalization reform among other European priorities. As one of the major external influencers of the conception and implication of the reform, we will question the impact of the European Union and its policies over member states. A special focus will be put on how its normative guidelines and financial support affect the establishment of a new social policy order. By doing that we will reveal the European Union's legacy regarding the deinstitutionalization reform and the challenges that these policies meet in the establishment of Bulgarian deinstitutionalization policies.

In the second part of the chapter we will compare the Bulgarian deinstitutionalization reform to the British model for deinstitutionalization of child protection services. The comparison puts forward the hypothesis that child protection systems need certain cycling of regimes and there is no one regime that provides all necessary solutions. Both countries have passed through the two extreme ends: Bulgaria- from a very centralized state-based child protection system to a decentralized community-driven child protection system; the UK- from a hyper-liberal system to a very strongly driven public provision for services of children and vulnerable families. Our analysis shows that the two models – *state driven* and *community driven* are in constant seek for each other and the two cases prove that if one country does not change its strategy for a long time the models gets self-destructive in spite of the political regime in place. In our quest to analyze the greater framework of the deinstitutionalization reform and its development in other member states, we chose the UK as the country with one of the oldest EU membership and greatest influence in the establishment of the reform in Bulgaria. The analysis of the development of the British deinstitutionalization reform will be regarded in order to grasp the negative and positive consequences of the deinstitutionalization reform so far and by no means pretend to be explicit of the british child protection system. Throughout the whole chapter we will not regard any other deinstitutionalization but the one of institutions for children. However, it is important to note that in the UK in contrast to

Bulgaria the deinstitutionalization happened on multiple levels including mental health institutions.

An initial overview of child care policies in Europe oriented our focus on Bulgaria and the UK as some of the most prominent cases characterized by a history of abuse and pedophilia scandals in childcare homes. In addition, both cases call into question the consistency and coherence of social policies within the European Union and their ability to protect the rights of abandoned children. Regarding the evolution of institutional care in the UK and Bulgaria we endeavor to determine how recent political reforms foreshadow the transformation of childcare, which are deemed to be part of a supranational debate over child protection policies. Paradoxically, today there are tendencies in the New Labour social policy that have led to one of the most liberal welfare regimes in Europe - the UK- towards new child welfare provisions close to universal state based care. At the same time, after the British public put enormous pressure on EU and UN institutions to close state run institutions in Bulgaria and adopt decentralized social policy provision, the Bulgarian government adopted the national vision for deinstitutionalization of child care homes in the country.

Since the fall of Communism, European know-how was practically transferred through the increased participation of European agencies and international organizations in the field. The controversial dynamics behind this ideological transfer reoccurred throughout the interviews and were associated with a constant competition between international and local actors. Although positive for the creation of alternative methods of community based care, the results of the clash of national and supranational powers should be perceived as a sign of the extent to which outside ideologies fit with the local context without discouraging nation states' initiatives for change. These risks cannot be predicted beforehand but signal different ways through which the reform could be implemented and therefore results that it could produce. Child protection reforms and in particular the deinstitutionalization reform should be regarded as a case study that reflects the complexity of most social policy areas and with this thesis we aim to underline the importance of periodic changes of the systems and deep analysis and evaluation of the relationship between state, society and the European Union on that matter.

Within the EU so far there is no unified child policy but rather several different policies concerning the family, women, bread-winner etc., from which a position of the child can be

deduced. This thesis will try to elaborate on how these policies have been translated into child policies in Bulgaria and partly in the UK. It should be underlined that all EU member states historically have different traditions of child raising and in all member states there have been clashes between the national and supranational understanding of child protection. However, the general understanding among EU policy makers is that child protection remains a national priority and as such not much hard law in the form of EU policies have been implemented. Despite the political regimes we can describe one major separation in the child policy formation across Europe – either as a policy for which the state should be a major protector (Finland, Norway, Sweden) or a policy where the state limits its intervention on the behalf of the family responsibility (UK &US)⁴⁷¹. Very often these models would be linked to labor policies such as child benefits and parental leaves. English speaking countries have been historically much more hesitant to create policies promoting state intervention in the family and have tried to *limit direct intervention not only at the household level but also in respect of the collective support for children via cash benefits and services, particularly childcare services*. For long years, especially in the UK and US, raising a child has been considered a family (more often women) responsibility while stimulating free entry on the labor market for both parents. Such policies were contrasted to other western European countries and more particularly Scandinavian countries where *it has been considered first the duty of the state to support children financially and in respect of their care and second, where this duty is seen as one to be undertaken in partnership with parents*⁴⁷².

It should be mentioned that especially during the first years of the accession. International non-governmental organizations had greater opportunities than Bulgarian NGO's in the competition for European donors programs. With the advantages of eminent experience, global know-how, and solid financial packages, UN and EU Agencies could be regarded as one of the few possible alternatives for CCE countries in the early 1990's. At that moment, the presence of foreign experts is justified by their role in transmitting Western know-how to Bulgarian experts who should eventually gain independence and continue the successful implementation of social reforms once the outside actors leave the country. From today's perspective, however, the continued dominance of foreign aid could be seen as an

⁴⁷¹ CHURCHILL, H., LEWIS. (ed.) Children, Changing Families and Welfare States. Journal of Social Policy, 2006, 37(3), p. 2,

⁴⁷² *Ibid.*

obstacle for the empowerment of Bulgarian professionals. What strikes the attention is how abruptly Western donors rejected any success of the Soviet programs of child protection, health and education. The delay in the amelioration of child care services for abandoned children in Bulgaria implies that there is a non-working part in the European methods of realizing of new policies among member states. Our study shows that the recipe for the implementation of the reform is well thought out and there were enough resources put in place on the behalf of the European Union. However our empirical research proves that despite the *perfect* ingredients drafted by the EU the result of the process remains always uncertain- no matter which member state. We stipulate that this is true because the EU does not put enough efforts understanding crucial aspects for the success of the reform such as on the one hand the evaluation and accountability of the cumulative effect of the deinstitutionalization reform over child wellbeing compared to strategic goals drafted by commission. On the other hand, the Union lacks a common platform for exchange of the downfalls of the models that has been already adapted in other EU member states and ignores the level of understanding of the reform among society and the state's way of interpreting, according to its capacity.

A - The place of the child in the EU agenda setting

To our great surprise, as of 2015 children do not have a special place in the EU agenda setting. *In the immediate post-Lisbon agenda- children were mentioned only twice; both times in reference to the ILO's convention on child labour*⁴⁷³⁴⁷⁴. In the social agenda- children were not mentioned either; the commission applies an intergenerational approach focused on young people. *One place where EU institutions have begun to target the child is in the analysis of social exclusion*⁴⁷⁵. Reports of social inclusions have pointed out child poverty as one of the objectives of their plan to deal with social inclusion. The discourse on childcare is framed predominantly within a work-family framework and the EU maintains its focus on *reconciling work and family and thus it targets only rates of coverage – the issue of quality is left behind.*

⁴⁷³ “Unemployment is perceived as the major risk factor for poverty leading to the objective to prevent and eradicate poverty and social exclusion and promote the integration and participation of all into economic and social life”

⁴⁷⁴ European Commission Joint Report on Social Inclusion 2005, Luxembourg: Office for Official Publications of the European Communities

⁴⁷⁵ *Ibid.*p.44

The Commission Coordinator for the Rights of the Child acknowledged throughout our interview that *Today there is not even standardized data on children in Europe-if we do not measure them we cannot manage them or in other words if we do not count the kids, they do not count to us* (35/2014). Our difficulties to provide accurate statistics and unified number of all European children in institutional care confirmed this fact.

On the one hand, one could justify the lack of EU strategy for child protection through the hypothesis that such policies are purely in the national realm and should be decided on the bases of the individual administrative, cultural and institutional capacity of each country. The EU should not try to unify those policies and adapt universal solutions to individual issues. Since the creation of the European Union the assumption was that by being centered around the economic and financial prosperity, member states would lead nationally all other issues. On the other hand, especially after the 2008 economic crisis, the EU commission has been in a process of combining the social issues into the economic once. An in-depth look at the crisis revealed that in order to fight the crisis the EU institutions should not only work on budget and financial regulation but also on prevention. There was a new transition away from individualism through convergence both in the education and child protection realms that aim to instigate a dialogue between the mainstream policies and the social 'national priorities' policies. There is a growing consensus that standards should be set, but most importantly that the EU should find better ways to implement them.

Looking at strategic documents of the commission (such as EU treaties related to human trafficking, violence, rape etc.) children appear as agents of EU policies only once they begin to engage in criminal activity or become a victim of a crime (2014/46). Once they become *victims* it is not the EU system for child protection that will adapt to the individual case but the case to the system and its special boxes predetermining the case. While, within the context of globalization more countries share similar problems, the EU policies impact member states and therefore the necessity to create platforms for exchange arises. The pressure for increased input on social policies on the behalf of the EU has been reinforced by shrinking national budgets in the social sphere as a result of the 2008 economic crisis. According to the Commission Coordinator, *there is an economic interest in making these policies sustainable and there are mechanisms that could be put in place so that this tendency can change* (35/2014). It is only since 2014 that national specialists participate in working groups on the DG Justice reunions and thus there is still great necessity for more targeted

working groups for dialogue between nation states' specialists (35/2014). Through financing of new types of dialogue, since the treaty of Lisbon, (for instance the experts group) the commission aims to reinforce dialogue and community decision making. Hence, so far such efforts on the behalf of the union remain peripheral and very little implemented, and thus we may conclude that the Union is still not fully engaged in preventive strategy of child protection, which would avoid the victimization of children and decrease the burden put on the social system of nation states.

B - The formation of the Deinstitutionalization reform

Realizing the impact of the institutionalization problem across new member states and the lack of common European strategy, EU agents initiated the creation of a multi-disciplinary group of experts.

1) European Coalition for Community living

European Expert Group on the Transition from Institutional to Community-based Care (EEG) formerly known as the Ad Hoc Expert Group on the Transition from Institutional to Community-based care was created initially to provide expertise to the commission on issues related to institutional care in the European Union. Officially the group existed since February 2009 and was founded by the then Commissioner for Employment and Social Affairs- Vladimir Spidla. The group was created to help hundreds of thousands of children, young people, people with disabilities, people with mental health problems, older people, and homeless people who are still segregated in institutions across the EU and its aim is to serve as *an informal body in relation to institutional care reform, encompassing all these different groups of people in need*⁴⁷⁶. The expert group has drafted Guidelines on the Transition from Institutional to Community-Based Care, which set out the key elements of moving away from institutional care to family-based and community-based alternatives. These guidelines⁴⁷⁷ and the Toolkit on the use of European Funds⁴⁷⁸ are the primary documents, used by member states and the European Commission to implement and monitor the deinstitutionalization reform. The EEG started with very few individuals (seven) and gradually grew to a broad

⁴⁷⁶ European Expert Group On The Transition From Institutional To Community-Based Care (Brussels, Belgium) *Common European Guidelines on the Transition from Institutional to Community Based Care op.cit.*

⁴⁷⁷ *Ibid.*

⁴⁷⁸ *Ibid.*

coalition, gathering stakeholders representing service providers, public authorities, and intergovernmental organizations. Today the EEG consists of the following organizations: COFACE (Confederation of Family Organizations in the EU), EASPD (European Association of Service Providers for People with Disabilities), EDF (European Disability Forum), ENIL/ECCL (European Network on Independent Living/European Coalition for Community Living), ESN (European Social Network), Eurochild, FEANTSA (European Federation of National Organizations Working with the Homeless), Inclusion Europe, Lumos, Mental Health Europe, as well as the United Nations' Office of the High Commissioner for Human Rights - Regional Office for Europe and the UNICEF.

The main logic behind the development of these goals is the fact that, while the responsibility for the implementation of the deinstitutionalization reform lies mainly at the national, regional and local levels, the EU still has to provide *a number of tools to support and promote implementation of meaningful quality, sustainable and successful processes across its Member states*⁴⁷⁹. Once we met with the main editors of the tools we were positively reassured that they were created on the basis of solid country expertise and acknowledgment of what could possibly go wrong, and incorporating knowledge of what the problems are (36/2014). The format and language used for the communication of the group were not meant to be academic but as accessible as possible to all types of professionals.

At the election of the new European Commission and European Parliament the EEG urges European institutions to invest in further steps towards a more successful deinstitutionalization during their mandate (2014-2019). Among these further measures we have identified some which were supported by our interviewees such as: 1) greater coordination of transnational exchange of expertise and best practices; 2) coordination of the deinstitutionalization reform with other EU objectives including Horizon 2020 research framework; 3) development of greater indicators to monitor with greater precision the condition of people once outside of the institution⁴⁸⁰. The mechanisms through which the commission could actually respond to these issues is linked to more binding legal tools such as the adoption of *Recommendation on the Transition from Institutional to Community-based Care*, as well as the adoption of the declaration, which highlighted the commitment of the

⁴⁷⁹ EEG Statement. Dismantling the Remaining Barriers. The EU must correctly promote and support the transition from institutional to community based care. (10 December 2014)

⁴⁸⁰ *Ibid.*

commission in favor of the transition from institutional to community-based care⁴⁸¹. As of 2016 these measures were not yet applied on the behalf of the Union.

In order to understand how the group functions in practice we interviewed one of the advisors to the European Commission and a Policy officer and Regional Team Manager-coordinator of the European Coalition for Community living Mrs. Ines Bulic who was also the main writer of the Guidelines on the Transition from Institutional to Community-Based Care and advisor of Bulgaria, Czech Republic, Hungary, and Slovakia on the use of structural funds. Mrs. Bulic presents herself as an NGO activist and as such she can advise the Commission on particular measures but officially she does not hold the position of an official adviser. As she admits throughout the interview, most decisions are taken on a very political level and it is very hard from her position to actually influence the decision making process (36/2014). Her expertise in structural funds starts in 2007 as a coordinator of the EC for community living, where she was responsible for gathering information from the people on the ground related to the effect of structural funds as well as World Bank funds and European Development Bank funds. In 2009 when Commissioner Shipdler formed the EEG GROUP she and her colleagues were invited to join the initiative. What is interesting to notice is that in parallel to her responsibilities in the group she continued to do her regular work and create reports, which are mostly critical of the commission. For instance, the report *Wasted Lives, 2010* on the misuse of structural funds in Hungary and Romania was written by Mrs. Bulic while she was in the expert group that aims to provide expertise to the commission. *The limitation of the expert group comes from the fact that we have to keep our watchdog capacity and expose things that are not done well; this demands great diplomatic skills since on the one hand you have to criticize them in a way that it still allows us to be considered as a partner* (36/2014). During our fieldwork we discovered that there was no procedure established to link national complaints related to the issue and the commission or the expert group for instance. In the case of Bulgaria, for example, the whole vision of the deinstitutionalization reform was initiated and driven through the will and interest of one individual who worked in Bulgarian desk and who got interested on the issue and became proactive. Since these agents were not national government officials but employees of the commission, *there was no institutional decision but the whole process moved forward thanks*

⁴⁸¹*Ibid.*

to one individual (36/2014). Once the Ministry of Social Affairs got familiar with the different options, non-governmental organizations such as Lumos⁴⁸² provided full assistance and together with the child protection agency found experts to start the reform. As we can see the procedures of initiation in Bulgaria was quite spontaneous and chaotic but we cannot compare the procedures of initiation since in other countries this was not at all the way the reform evolved.

2) The dual effect of EU Structural Funds

What our interviewees underlined and we found of importance is the discrepancy that exists among member states (even among Eastern European countries) in the extent to which they will follow the recommendations of the Commission. Most often this depends on the strength of the state and its national capacity to negotiate with the commission but also on the competences of the commission to recognize probable issues in member states. In Bulgaria the commission could actually block the funding at the moment when the state planned to invest in renovation of the institutions but the EU did not intervene against. At the same time the commission initiated and imposed on the state to incorporate numerous conditions such as time framework and quality of alternative care over the Bulgarian vision for deinstitutionalization. According to Mrs. Bulic such intervention would not be possible in other states and it was due to the lack of national vision of the reform neither on institutional nor on social level. *At the beginning it was mostly the EU membership and the EU funding that was driving the government to start the deinstitutionalization (36/2014).* This non-institutional approach and lack of uniform EU guidance led to the first sad conclusion of the first stage of the reform and that is the fact that *fixed windows do not fix children's lives; spending money does not guarantee long lasting well-being (36/2014).* To some extent the commission could have predicted such a result since by nature Structural Funds should not serve as long term solution but means through which a greater goal can be achieved because financial mechanisms are always related to restrictions, accountability and standardization. *Structural funds on their own cannot guarantee how circumstances might change in children's lives two years from now (36/2014).* Such lack of flexibility and severe bureaucratic accountability of the cost and expenses related to structural funds from the very beginning led to unwanted results and paradoxes such as new buildings with the same personnel and others.

⁴⁸²A British NGO founded by J.K. Rowling in 2004

Once again, what has been identified as a major problem by the experts in the group and not as much by national state authorities is the lack of communication and coordination between the government and the commission. *The commission is in reality more flexible than governments think, and if the state is strong enough it can change commission rules and adapt them to its policies* (35/2014). Unfortunately Bulgarian national authorities used its lack of knowledge as an excuse and rarely questioned the commission and its measures. Structural funds represent a complicated mechanism that has been severely criticized by governments of older member states, but one should not ignore is that by rules they remain thought through together with nation states. The criticisms led to reduction of regulations and thus some deep changes in the regulatory instruments. For instance, in order to help the decentralization process, new regulations have allowed special concessions for NGO's, which automatically meant that not all the projects would be implemented by local authorities. Paradoxically, the majority of them was just not used by member states either because member states were not well informed about these changes or because there were not enough NGO's in the country that would be able to manage such large sums of money or provide sufficient co-funding (36/2014). Experience show that the danger behind opening up the funds to NGO's is that bigger NGOs can monopolize the offers. In Romania, for instance, one NGO got most of the projects and smaller NGO's got annexed to the bigger one. However, the inability of the Romanian state to deal with on-time payments, and weak administrative capacity led to delays in payments to beneficiaries and service providers. Similar delay actually stopped the delivery of the services and children were forced to go back to the institutions. *It took a lot time for national governments to understand that using structural funds to build a motorway is not the same as using them to determine a child's destiny* (36/2014). Such failures could have been avoided by the state if they had the capacity to acknowledge the gaps in their competencies and had sought help on time from the Commission.

Similarly, the Bulgarian EU servant at DG Employment Social Affairs and Inclusion posits :

With EU funds we can build five kilometres of motorway but we cannot guarantee the long term maintenance of the motorway with these funds. We follow the same logic with social services – the EU structural funds can be invested in the creation of community based services but this does not guarantee the creation of all necessary preconditions for their

development. That is an example where the link between European, national and regional financing is cut (37/2015).

The commission's financial tools that can be used for technical assistance by the states in similar situations were rarely used by member states. These issues arouse once again the question of monitoring and effectiveness of EU tools in the sphere of social policy so far. Literature on health care financing in Europe⁴⁸³ or financing of long-term care for vulnerable people⁴⁸⁴ identify four main types of financing that have been applied separately or together across European members: *out of pockets payments by service users or families ('user charges')*; *voluntary/private insurance*; *tax-based support (national or regional) and with services provided on the basis of need*; *social insurance – contributions linked to employment*⁴⁸⁵. The balance between private and public financing and the extent to which the government can protect the individual from the flaws in the system remains too ambiguous. For example, in England if an abandoned child has been first hospitalized the services provided were free (health care is free at the point of use). However, once the child is moved to a community care home it will be subjected to means-tested financial contribution (social care is means-tested). In Bulgaria, there were instances with double service provision on the behalf of state and NGO's for the community based centers which created inequality of foster care provision across the country (described in detail in Chapter VII).

3) Evaluation and monitoring of the reform

The expert group advocates for greater monitoring of funding. At that stage, monitoring is done at the national level where information is taken from local authorities and there is no one managing institutions for control and direct evaluation of the reform. Access to public information is not very easy, and as a result the commission might never find out exactly how particular structural funds were spent. For instance, technically the commission has no instruments of recourse if the money went for the construction of a tortured chamber or community based center if it has a different name. In other occasions the change of name is

⁴⁸³ MOSSIALOS E, Dixon A, Figueras J, Kutzin J, Eds. *Funding Health Care: Options for Europe*. Buckingham: Open University Press, 2002.

⁴⁸⁴ WITTENBERG R, SANDHU B, Knapp M. Funding long-term care: the public and private options. In: MOSSIALOS E, FIGUERAS, DIXON, A. Eds. *Funding Health Care: Options for Europe*. Berkshire: Open University Press, 2002, p. 226- 249.

⁴⁸⁵ BEADLE-BROWN, J. KOZMA, A. *Deinstitutionalization and community living – outcomes and costs: report of a European Study*. Vol. 3. Country Reports. Canterbury: Tizard Centre, University of Kent, 2007.

clear, but the physical building of institutional and community based care is the same. Our empirical analysis show that there is neither national nor EU guarantee that because the building is renamed there has been any prequalification of staff and real change in the provision of care. In terms of sanctions, the procedure is also a bit limiting for the commission, since it can only intervene substantially during the partnership negotiation stage of the operational programs. *Despite the fact that the partnership agreement is strategic and must follow certain objectives, the conclusion most often remains quite general- for instance: “there was an improvement of the child protection system”* (36/2014). Our empirical observations show that by default there are monitoring bodies sent to the member states, which in theory should give the information to the commission. However, for the moment they were predominantly focused on the technical work and the financial side of monitoring, or in other words, *how much money* was spent and not *how it was spent*. This means that once the service is built the commission cannot do anything against it post factum. In Romania there was a case, which illustrates this paradox. At the beginning of 2013, the Romanian government invested its structural funds in the renovation of institutions instead of alternative centers. When the commission asked how long these institutions would function before they were transformed into community-based care or closed, they learned that the legal maximum is ten years but in practice, in a situation where there are still children on the waiting list for the institutions that would be an unrealistic prediction (36/2014). In similar situations the commission can raise the issue with the managing authorities but nothing more than that. Such cases illustrate how important it is to have specific independent monitoring authorities for each country. In parallel with the exterior control, governments need to invest in building capacities of local NGO’s. What we remarked is that there is a general misunderstanding of the reform, not only among the population but also among the professionals. This transformation will not happen overnight and is probably at the core of the successful implementation of EU policies among member states.

One of the biggest challenges that arose from our interviews with the European Commission is the inclusion of people who can persistently follow and maintain the reform within the commission and the parliament. Since staff changes quite regularly, either because people move to different positions or get called to work for other DGs, the EEG group organized trainings (starting in 2012) which meant to include different DG’s and train them on the particularities of the Deinstitutionalization reform and the role of structural funds.

These trainings showed that there are still a lot of unknowns and ambiguities even among professionals that work in the European institutions related to the hidden risks of the reform.

C - EU agents working on child protection

At the beginning of the interview process we started with the assumption that there is a lack of EU strategy of child protection and that this is due to the lack of interest of the EU authorities on that matter. In order to test this hypothesis on a larger scale and incorporate other perspectives in addition to Bulgarian and British actors we decided to enlarge our spectrum of interviews with the inclusion of some of the major French actors in the sphere of child protection as well as EU agents themselves.

Our meetings with the representatives of French IO's dealing directly with EU authorities forming the French position on EU directives (such as SGAE, CNCDH, RP de la France etc.) not only confirmed my assumption by telling me that they had very rarely dealt with children's issues – except in cases of *mineur étrangers isolées*, but also expressed their conviction that this is a purely national matter that should not be expected to be guided or influenced by the EU. Analyzing their behavior and language, we started to doubt if that was not an excuse on their part to mask their own lack of interest in the issue and inability to link questions related to education and health with child care. In France the spectrum of my interviews was limited but quite revealing, taking the point of view of actors who are on national, local and EU level. One of our interesting meetings was with Mrs. Martine Brousse, president of the association *La voix de l'enfant [The Voice of the Child]*, which functions as a federation made up of 80 different organizations, taking action in nearly a hundred countries: *Its' aim is to listen to and defend any child in distress whoever and wherever he is*⁴⁸⁶. M.B. long years of experience in the international field of child protection brought some interesting conclusions related to the place of child protection policies on European and French national arena. Since one of the most prominent documents on which the EU policies are built is the UN Convention on the Rights of the Child we started our conversation by assessing the role of this convention over nation states.

Most people forget that very few articles of the convention are directed towards the child itself- it is a convention that is written to bring awareness to states and adults about what

⁴⁸⁶ http://www.lavoixdelenfant.org/wp-content/uploads/2014/06/Pres_VA_La-VDE-sept2016.pdf

their responsibilities vis a vis children are. Children are considered vulnerable beings and thus the state is responsible for their protection (46/2014).

This clarification about the understanding of the convention brings important aspects of our analysis because it shows that the position of states and the EU on the formation and implementation of child protection policies depends on the very interpretation of the convention. The opposite interpretation that we hear more often in the media and among NGO's are that the child has its rights and needs to be an actor of its future. On its own this assumption is not wrong but twists the focus of responsibility. One of the great challenges and missions at the same time facing the Association and its 80 members has been described:

We need to bring back the child in the centre of national and European priorities. It is time to harmonize children rights on European level and we have all the legislation necessary for that; nationality should not make any difference if a child is trafficked, bitten, raped or abandoned on the street (46/2014).

She also insisted that children's interests are often taken as an excuse for protection of some adult's interests. The investment-focused policies of childcare of the European Union were mostly focused on economic gains and not that much on children's well-being in the long term. Despite that, the two variables are interrelated some policies, such as for instance the EU policy to encourage female employment, had mixed implications for child provision services and quality of childcare. The erosion of the traditional family model provokes risks for the welfare state and the feminization of poverty affected directly the wellbeing of children. Therefore, the state welfare has become dependent on the participation of women in the labor market. Our hypothesis is that a unique EU child protection model will affect employment of parents, public spending on childcare, and the cost, affordability and quality of childcare as a whole. Decentralization of policies in social areas such as child protection have proved to be unsuccessful and this could be observed in the lack of responsibility among the major players; lack of proper data and measurement of child well-being; lack of mechanisms for evaluation and control of the EU and state investments. Reassuringly, Mrs. Brousse's point of view was remarkably close to the opinion we got from Margaret Tuite – Commission Coordinator for the Rights of the Child. M. Tuite also expressed her will to create a more coordinated effort for the different parts of the commission and among different DG's to harmonize and combine efforts for child support. Looking at child poverty rates in

the end of the 20th century⁴⁸⁷ and the millions of displaced children as a result of armed conflicts all over the world it seems that *While early 21st century children may have more symbolic power they have lost actual power* (35/2014). Both professionals independently concluded that international focus needs to change towards more strategic subsidized investments in children in early childcare and education. Literature on the subject also confirms this thesis and proves the positive correlation between early childcare investments and positive economic outcomes⁴⁸⁸ Heckman and colleagues found that high-quality early childhood programs reduces crime, raises earnings, promotes education, and improves health⁴⁸⁹. The development of the deinstitutionalization process all over Europe shows that there is a specific need to reduce the risk of intergenerational transmission of poverty and therefore as Tuite points out *the commission needs to create preconditions for less privileged families to receive childcare and family support as early as possible* (34/2014).

D - Discrepancy between EU communication campaigns

Throughout our interviews with representatives of the EU's we tried to apprehend the means through which EU state representations portray the deinstitutionalization reform. It was necessary to grasp these different perspectives and analyze the discrepancies that have been identified between EU norms and EU policies put in practice. In addition to the countries of main comparison -Bulgaria and the UK- we included the perspective of one more leading EU policy maker and old member state France (interviews taken in Paris) as well as the perspectives of EU agents themselves (interviews taken in the EU commission).

The common denominators among European representations in France, Bulgaria and UK was the lack of information and thus motivation to deal with social policies overall.

⁴⁸⁷ Child poverty rates in countries such as USA, UK Canada and Italy were well above their overall poverty rates (Bradshaw 2000; Ritakallio and Bradshaw, 2006)

⁴⁸⁸ BURGER, K. How does early childhood care and education affect cognitive development? An international review of the effects of early intervention for children from different social backgrounds. *Early Childhood Research Quarterly*, 2010 25 (2), p.140-65

HAVNES, T., MOGSTAD, M. No child left behind: subsidized child care and children's long run outcomes. *American Economic Journal : Economic Policy*, 2011, 3 (2), p.97-129

⁴⁸⁹ HECKMAN, J. MOSSO, S. The Economics of Human Development and Social Mobility. *Annual Review of Economics*, 2014, 6(1), p. 689-733.

CAMPBELL, F A., PUNGELLO, E. KAINZ, K. et al. Adult Outcomes as a Function of an Early Childhood Educational Program: An Abecedarian Project Follow-Up *Developmental Psychology*, 2012, 48(4), p. 1033-1043.

Formatted by the EU officials that child protection issues fall under the realm of national priorities national Representations do not initiate any actions on that matter with the only exception being refugee children on European territory. Despite the increased amount of structural funds spent on that matter in Bulgaria and the existence of Common European Guidelines since 2012, none of the representatives that we interviewed has ever heard about the *deinstitutionalization reform* and its challenges or the fact that the Commission is putting more and more efforts towards increasing the coordination of the process. As it was insisted throughout our interview with Mrs. Gaëtane Ricard-Nihoul (as of 2014 she is a political analyst for the French representation of the European Commission⁴⁹⁰), the Representation does not participate in the decision-making process and has no technical competences. Its purpose is to inform French citizens about major decisions taken by the commission and from time to time to create analytic reports on certain state events such as European elections or the economic crisis. *We work more on the after sale service than on the formation of politics. We have to explain why state undertake this or that european policy* (45/2014). Mr. Zlatev⁴⁹¹ also insisted on communication as main task of the representation *We need to give information to Bulgarian citizens about the decisions taken in the commission but also listen to young people and their ideas about which type of Europe they would like to live in* (49/2015). National representations do not have the budget to initiate any policies but simply transmit what has been decided at the level of the Commission that might be relevant to the national state. However, despite the existence of fifteen information centers of the commission in Bulgaria, there was not even one public event (information seminar or social network massage) related to the massive European investment into the closure of large scale institutions. In his defense the director of the commission pointed out the wrong conception of society vis a vis the Union as a *bag full of money*. In contrast to France, in Bulgaria the Representation is predominantly used as a point for demands and complaints:

Most Bulgarian citizens have very low confidence in Bulgarian institutions and thus turn towards Brussels for further justice. There is a common perception that the European Union is obligated to help them since the state has failed. Few of Bulgarian citizens

⁴⁹⁰ The profile of Mrs. Ricard Nihoul was a bit more a typical since she is Belgian, received a PhD on European politics from Oxford, became a policy officer at the Commission DG Education and Culture in Brussels and afterwards became secretary general of Notre Europe – a think-tank; as of 2016 she is Chef Adjoint of the RF of the European Commission

⁴⁹¹ Mr. Zlatev is director of the Representation of the Commission in Bulgaria as of 2014

understand that they have not only rights but also obligations. Our biggest difficulty is to explain to people how the EU can help in practice - because the common understanding is limited to the link between the EU and bags full of money. This is a two-sided process and Bulgarians need to understand that there are issues which are purely national priorities and the EU cannot do anything for their solutions (29/2015).

Hence, in practice that is not totally correct in regard to the deinstitutionalization measures which are guided and implemented with great financial, political and social influences of the Commission. Paradoxically, despite the fact that most European states still portray the understanding that the EU does not intervene in social inclusion programs, throughout the new operational program period (2014- 2020) 20% of all investments of the European Social Fund should be spent for social inclusion policies (of all marginalized groups including children) (37/2015)⁴⁹². *Since in Bulgaria every second person fears social inclusion the percentage of all structural funds spent on the fight against social inclusion increases to 30% until 2020 (37/2015).* These percentages include investment in different reforms including education, health and deinstitutionalization. What is more as *70% of all public investments in of Bulgaria are financed by European funds; Thus the national budget of the country covers only 1/3 of the needs of all spheres of socio-economic development (37/2015).* Such an incredible dependence on EU structural Funds would assume greater implication of its representations to portray publically the effect of the union over national policies. Throughout our observations we did not find an official explanation why there is such a discrepancy between what the Commission communication campaigns cover within national states and what the EU agents forcefully present as important EU priority.

E - Early stages of deinstitutionalization across Europe

Despite the fact that this thesis regards only the deinstitutionalization of services for children, we cannot ignore the fact that among many other European countries this reform includes also mentally or physically handicapped people. This is relevant for the UK-Bulgarian comparison since in the Bulgarian reform the government includes institutions for children who are mentally ill. The construction of mental health institutions in Western Europe prevailed in the 19th century among industrialized countries pushed by four main

⁴⁹² Mr. Kiriakov is policy officer at the DG Employment And Social Affairs And Inclusion

factors including urbanization (massive movement of people from rural to urban environments because of industrialization), location (most asylums were constructed outside of the urban environments to protect the ill from pollution and other negative aspects of the big city), and morality (block the social stigma)⁴⁹³. By the 1950's the number of people and children in these institutions had increased so much that *there were more patients in asylums worldwide than in any other time*⁴⁹⁴. Already at that time governments across Europe recognized that standards of care were not acceptable and substantial reforms had to be implemented as soon as possible. This early stage of the deinstitutionalization reform included *promotion of care with as little institutional input as possible, preferring self-help to any professional support, and outpatient care to sheltered places or partial hospitalization*⁴⁹⁵. However, as professionals concluded already at that stage that due to political and economic drivers the focus of the prevailing public argument, as well as pace of these reforms varied across countries (...) depending on national traditions, socioeconomic situations, cultural factors and specific funding systems⁴⁹⁶. Still deinstitutionalization led to some impressive changes in development of psychiatric services for children and to the development of community based-models of care in countries such as Canada, Italy, UK and the USA⁴⁹⁷.

F - New tendency for Re-Institutionalization

As with most political reforms, one cannot consider the deinstitutionalization reform as a panacea for all children and people put in institutional care. Governments like the Bulgarian one and other Eastern European countries (which are now drafting the reform and are in the process of implementing it) need to consider some already outlined challenges and criticisms if the existing models are not implemented correctly. First, as it has been depicted by Fakhoury and Priebe,⁴⁹⁸ there is evidence of inadequate preparation before discharge from the institutions and *as a result, a significant number of mentally ill people ended up either without*

⁴⁹³ FAKHOURY, W., PRIEBE, S. Deinstitutionalisation and deinstitutionalisation: major changes in the provision of mental healthcare. *Psychiatry*, 2007, 6, p. 313-316.

⁴⁹⁴ *Ibid.*

⁴⁹⁵ *Ibid.*

⁴⁹⁶ *Ibid.*

⁴⁹⁷ FAKHOURY, W., PRIEBE S. The process of deinstitutionalization: an international overview. *Curr Opin Psychiatry*, 2000, 15, p. 187-92.

⁴⁹⁸ *Ibid.*

*treatment, homeless or even in prison*⁴⁹⁹. Second, suggested increased rates of homicide - although not supported by existing statistical data. Third, insufficient levels of care for some patients –when patients are severely damaged the community-based services are hard to coordinate or non-existent. Fourth, lack of social integration - evidences show that the majorities of mentally ill deinstitutionalized patients still have very restricted social contacts and have no access to the labor market⁵⁰⁰. *It has been argued that in some countries community-based services form their own “ghettos where residents meet between themselves but have little contact with the rest of the community*⁵⁰¹.

Paradoxically, the literature suggests that as of today we might be witnessing a new phenomenon of *re-institutionalization*, measured by an increased number of conventional psychiatric hospital beds, beds in forensic psychiatry, and places in prison⁵⁰². The reasons behind this new tendency again depend on states' contexts but seem similar to what has pushed the creation of institutions back in the 19th century. For instance increase of severity of mental illness, decreased capacity of the family to take care of their child due to unemployment, increased risk aversion, and general prison population size⁵⁰³ and increased funding expenses. Such backwards tendencies reflect one of our major conclusions related to the cyclic nature of social protection reforms and the impossibility of one system to remain for too long in place without getting abused.

Integration by the EU institutions of policies related to children's well-being into the *roadmap of successful Europeanization* sounds like a positive step towards general democratization. However, this study would argue that children's rights are often disregarded or instrumentalized by political actors on the international level when competing with economic and political interests. Our empirical analysis so far have shown that the

⁴⁹⁹ EIKELMANN B. Limits of deinstitutionalization? Perspective of specialty clinic. *Psychiatr Prax* , 2000, 27(sup.2),p.53-58.

⁵⁰⁰ EIKELMANN B, RICHTER D, REKER T. For and against: a crisis of community psychiatry? *Psychiatry Prax*, 2005, 32, p. 269-70.

⁵⁰¹ *Ibid.*

⁵⁰² TOBIS, D. Moving from Residential Institutions to Community Based Social Services in Central and Eastern Europe and the Former Soviet Union, *op.cit.*

⁵⁰³ SCHANDA H. Problems in treatment of mentally ill offenders: a problem of general psychiatry. *Psychiatr Prax*, 2000, 27 (suppl 2): 72-75.

Europeanization strategy of political elites seems to be guided by the logic of the passive norm-takers and instrumental top-down approach which turns out to be often less productive due to the soft leverage of the European Union beyond its member states. At the same time the defenders of children's rights are largely representatives of the non-governmental sector and lack powerful lobbying ability to use soft law norms coming from the EU effectively enough.

Nadege Ragaru metaphorically describes the European Union as the *l'hureuse rivière progressant vers une ample destinée; voguent sur et vers elle des Etats, tous également désireux de rejoindre l'immensité vertueuse du vaste horizon bleu qu'elle propose*⁵⁰⁴. This metaphor describes the ambiguity surrounding the subjects and mechanisms of the Europeanization concept. Policy outcomes of Europeanization have proved to vary across member states and do not reflect either the well-defined will of a unified supranational actor, or an automatic *pervasive problem-solving rationality meant to increase the overall efficiency of European policy decisions in the context of a transnational independence of policy problems*⁵⁰⁵. Since the spectrum of this paper is too limited to define fully the role of the European Union in new member states, it focuses on illustrating an intriguing scenario of ongoing exchange between Western and Eastern national policies - the case of Bulgaria's Europeanization. The issue at hand here is not whether the European Union affects domestic policies, but rather how it does so and specifically how it influences the country's child care services. Intertwined within the greater debate about the place of the child in society, the complexity of the deinstitutionalization reform points at a much larger non-linear process that establishes the new relationship between children and state. Child rearing has largely moved beyond the boundaries of the private family realm to stand in the heart of public policy debates, while the position of the child in society is carefully framed by political regimes. Invariably, both socialists and democrats take advantage of the child's political assets in order to achieve their various goals.

The comparative analysis of child care practices represents a difficult challenge due to the precarious nature of such social policy and its dependence on historical circumstances, social paths, and welfare regimes, among others. Claiming that any one political system has

⁵⁰⁴ RAGARU, N. La rivière et les petits cailloux. Elargissement européen et européanisation en Europe central et oriental. In BAFOIL, F., BEICHEL, T. Européanisation d'ouest en est. p.241, op.cit.

⁵⁰⁵ HERITIER, A. *Differential Europe. The European Union Impact on national Policymaking*. p.2, 2001

succeeded in setting up an impeccable child care policy or in managing a flawless child care model would be blatantly dishonest. While finding one unified child protection formula for all countries of the European Union is an unlikely scenario, it is nevertheless beneficial to analyze the Europeanization processes as a fundamental precondition for the amelioration of child care and to explore ways for improving the interaction between European and domestic political players. The three models of Europeanization - misfit model (top-down approach), transformation, and macro model - prove relevant in different moments of social development. This is especially true for post-socialist societies who were confronted with the dual challenge of transition and accession.

As neither institutionalization nor deinstitutionalization is new concepts for EU members, capturing the extent to which models of child care circulate among countries and political prisms in their quest for perfection promises to be a fruitful and worthy endeavor. Studying the ways in which these practices get informed by and adapted to various political, social, economic, and historical contexts is a central part of the effort. Finally, the fact that liberal states such as England appear to be returning to universal childcare mechanisms, albeit in a widely modified and updated format, presents a real possibility for new government direction and a viable solution to child welfare needs⁵⁰⁶, both of which will be also addressed in detail in Chapter VIII.

⁵⁰⁶ WINCOTT, D. Paradoxes of New Labour Social Policy: Toward Universal Child Care in Europe's "Most Liberal" Welfare regime?. *Special Issue: Perspectives on Child Care and Education in Eastern and Western Europe*, Vol.13, n 2, Oxford University Press, 2006

VII - The Governance of the Reform in Bulgaria: Chaotic Battle of Influence

This section will describe the successful adoption of the EU acquis through a crucial shift in the country's national policies regarding of child protection. The *differential empowerment* that Borzel and Risse (2000) describe happened through the mix of efforts and strong determination of the newly established or internationally borrowed non-governmental organizations, legal reforms and political will to deinstitutionalize the country's orphanages. Such political transformation was mainly possible due to the strong political desire for EU integration on behalf of the Bulgarian government. Child protection policies fall among many other social policy issues that had to be restarted following new sets of regulations. From paper changes in the 2000's the EU managed to adjust new national order and since 2010 new forms of care have been established but not yet evaluated. In order to analyze the distribution of power in the implementation of child care policies in Bulgaria, this section will continue to explore and analyze the different stages of the transition from institutional to community based child care through the prism of four main types of actors – the national/ governmental, the regional/local, the non-governmental and the institutional (all 56 actors interviewed personally through semi-structured interviews between 2013-2015⁵⁰⁷). Our analysis is based on the implementation of the 3I approach through which we compare the actors through the prism of their representation, interests, and conflicts while applying the reform in practice. Bruno Palier and Yves Surel's "3I" approach will be relevant when examining the conflicts and compromises between key stakeholders and their institutionally formatted key interests inherited from the past and formulated through cognitive, normative, and rhetorical frameworks.

Our hypothesis is that, if the choice of model could be considered to be a top down political imperative, the implementation of the model depends on the cultural, historical and institutional bases of a member state. Thus the mechanisms of policy transition in the field of child protection should be considered not only thorough a prism of the supranational governance of the EU but also on the existing instruments for policy implementation of the nation state. In figure 34 we summarized some of the most important aspects of the basis for

⁵⁰⁷ See Appendix 3 for the complete list of interviews and interview codes for the citation

our qualitative analysis achieved through the prism of the 3I approach. Dividing the analysis in external and internal actors throughout the whole chapter we observe and investigate how the rules of the game set by institutions coexist with the agenda setting and interact with the actor's preferences in relation to the deinstitutionalization reform.

		EXTERNAL ACTORS			INTERNAL ACTORS	
3I's	EU	IO	STATE	REGIONAL	NGO'S	
INSTITUTIONS: the rules of the game	<ul style="list-style-type: none"> EU Commission EU Structural Funds DG Justice DG Employment and Social Affairs DG Regional and Urban Policy European Expert Group on the Transition from Institutional to Community-based Care (Commission Coordinator of the Rights of the Child; Representatives of the Commission in Bulgaria, France, UK) 	<ul style="list-style-type: none"> UNICEF World Bank LUMOS Bulgarian Abandoned Children Trust Bulgarian Helsinki Committee Euro Child European Group on The Transition from Institutional To Community-Based Care Members 	<ul style="list-style-type: none"> Ministry of Labour and Social Policy Ministry of Healthcare, Ministry of Justice Ministry of Education Inter-Ministries Working Groups State agency of Child Support State agency of Social Support Inter-Ministries Working Groups National Assembly 	<ul style="list-style-type: none"> Municipal Council Mayor (Brezovo; Plovdiv, Krusharci, Ruse, Sofia, Dobrich) Directory of Social Support 	<p>National Network for Children Bulgaria (141 NGO members) (Among the interviewed were: The Association for Pedagogical and Social Assistance (FICE); Foundation for Our Children; Know-How Center of NBU, etc.)</p>	
IDEAS: shape agenda setting	<ul style="list-style-type: none"> Lisbon Treaty- (social inclusion, fight against child poverty) Treaty on the Functioning of the European Union Horizon 2020 	UN Convention on the Rights of the Child	<ul style="list-style-type: none"> Develops national child policy (National Vision for the Deinstitutionalization reform) 2003-2009-2012 Decentralization Strategy National Actions Plans (EU) Subordinates Homes for Medical and Social Care for Children up to age 3 	<ul style="list-style-type: none"> Implement strategies for child protection directed by the state; Resolves questions connected to local policies; Approves Municipal council Establishes and closes child institutions 	<ul style="list-style-type: none"> Construct awareness and fund-raising campaigns; Consolidate all non-profits; Work with children and families Improve the exchange of experience and good practices 	
INTERESTS: actor's preferences	<ul style="list-style-type: none"> Achieve full deinstitutionalization of child institutions up until 2018 Investment focused policies of child care – (for instance structural funds guarantee financial support to NGO's/ IO's to construct the centers) Serve as a vector for Western Models over the new post-soviet models 	<ul style="list-style-type: none"> Project based methodologies Strong financial power Social pressure through international reports Transfer of neo-liberal Ideas and Ideologies 	<ul style="list-style-type: none"> Legal reforms Decentralization of power and creation of multiple family and child services 	<ul style="list-style-type: none"> Get more funding Create more local services <u>Political</u>: Develop the services across its territory- achieve political popularity and more electives <u>Economic</u>: attract different services providers in the region and decrease unemployment rates * (for greater quality of services, municipalities receive greater funding, which is especially important for the deserted regions) 	<ul style="list-style-type: none"> Create a Bulgarian model of the reform Apply the projects finances by the IO and EU Get project funding for : Community Based Social Services: - Foster Care; Community Support Centre; Foster Care, etc. 	

Figure 34 - Ideas, Instruments and Institutions Part 1 (the case of Bulgaria)

Challenges of the reform

After the massive media national and international campaigns against homes for children with mental and physical disabilities (the case of Mogilino) the state decided to divide the process of transitioning to community based care into stages starting with the Homes that accommodate children with disabilities. The terminology used is important because theoretically by the end of 2015 through the project *Childhood for everyone* (part of the National Vision for Deinstitutionalization) all homes for children with mental and physical disabilities should have been closed and the care should be provided by the newly constructed family centers, foster care alternatives, or biological parents as an alternative to the institutional care method. Bulgaria had to build these alternatives from scratch and thus throughout these first five years of the implementation of the Vision there were multiple difficulties for the establishment of alternative care. Throughout the following lines we will explore the different angles of the same reform and its challenges gathered throughout our interviews. We do not generalize that there are only negative practices throughout but we signal some of the major issues, which could put the whole reform into question in the long term. We will also question the extent to which the rhetoric and the challenges identified by European agents correspond to the once we categorized in Bulgaria. This chapter exemplifies the reasons behind the great difficulty with which the Bulgarian actors of the deinstitutionalization reform met the EU expectations and adopted the new child welfare.

A - Family type centres and the danger of Re-institutionalization

The development of community based services such as family type centers is effected through project financing in collaboration of the National Agency of Child Protection, municipalities and the NGO sector. The first family type centers appeared with the aim to serve as a residential type of center for family services, which accommodates not more than fifteen children. In practice however, our interviews with residents of these new centers, depicted that within the new form of the infrastructure reigns the old form of care and thus the change is almost only at the surface level. These are some of the testimonies given by the residents we met:

The building is just fine but the relationship with the personnel are complicated; the old place was much better (meaning the institution) there at least we had bathroom in every room unlike here where there is only one toilet for us 15 and one for the personnel; We did

not move to a family type but to the same type of institution just smaller in size (12/2015). Residents also explain that in order to move to these new centers they have been separated from their biological brothers and sisters, which conflicts with the initial idea of the deinstitutionalization plan to support the Bulgarian family and thus keep close the biological relatives. As we pointed out throughout Chapter V, 1/3 of the children after deinstitutionalization are dispersed in municipalities, which are sometimes hundreds of kilometers away.

Second, there is great circulation of professionals among the centers.

Very often social workers are hired by the center but they stay only for one month. They do not want to or they are not enough educated and prepared how to cope with the children and what will be his or her responsibilities. The new staff comes and leaves in less than a month and like that children are left with no constant care (13/2014).

S. Petrova⁵⁰⁸ does not neglect some of the good practices in the process but raises alarms that currently the plan is structured without taking into consideration some important long term particularities. Our observations in the new type of community centers also confirm that there are still a lot of inconsistencies in the transition to community based care, and often children are not engaged to a family type environment even though they quit the institutions. For example, since there is catering children did not cook for themselves as it would have been in a family environment. *De facto these family type centres remain closed for society and some atrocities continue to happen. For instance we have a case of a dead child in Yambol and Peshtera, of a raped child in Burgas, and couple of cases of children who are taken away from school. (...) And all of these results for more than 150 million BGN (75 million euros) (2014/13).* Even though the speech of the deputy is based on her experience in the field, we should not ignore the fact that she is a political figure from the opposition and her discourse throughout the whole interview was against the current and previous governments. The member of parliament, S.P., also stated that in order to locate the missing connections between the actors in the process and why we fear to provide unsatisfactory care for children there needs to be a full outside audit of the deinstitutionalization reform. As a member of parliament she brought for voting this proposal in two parliamentarian commissions: The Commission for Children, Youth and Sport and The Commission for Budget and Finance and now await the decision of the parliament.

⁵⁰⁸ Member of Parliament

The third challenge facing family centers is related to the question of capacity and financing- once the centers are constructed in order for the program funding to be delivered the state needs to fill their capacity. As a result our empirical study showed that 223 children from Homes for Children Deprived of Parental Care across the country had to be moved to the newly constructed family type centers. The movements in some cases happened very mechanically and with no time for individual assessments. For example:

A ten years old boy had to travel from an institution in Sofia to Balchik (551 km) in a waybill accompanied by a policeman for more than six days. The boy had records in the agency of social support to be very close to his biological mother but there were no financial means to live with her. Because of the forceful movement to the new family type center he was separated not only from his mother but also from his little brother who was moved to a different center hundreds of kilometres further. As a result the child got depressed and committed suicide (13/2014).

Acknowledging the fact that this is an extreme situation, it is still important to recognize the conclusions of it and analyze where the *individual state approach* failed. We asked the Agency of Child Protection to comment on this issue and we got quite a different perspective of the situation. According to the project manager E.I. of the project *Childhood for All*, which aimed to do the individual assessments of the children and their families before the closure of the institutions and their replacement with community based services, the fast transition is due to the fact that the capacity that was planned five years ago (2010) for the newly build centers is actually much bigger than the actual (2015) demand.

The fact that there are a lot of children who went to foster care or were send back to their biological parents shows the positive development of the state reform. Our decision to fill the newly constructed places was only driven by our desire to provide better living conditions to the children who are coming from Homes for Children deprived of Parental Care (...) only when that was possible and would not create shock for the children (14/2014).

However, throughout our conversation the expert admitted that the transition for the orphans without disabilities happened much faster than expected, provoked by lack of state strategy on what to do with the newly constructed centers once they were ready, and in cases where handicapped children were already placed elsewhere. *The period between the planning and the construction was too long- around four years- and thus we failed in our calculations (14/2014).* Our observation showed that in order to fill the numbers in some occasions,

however there was even a mixture of services for disabled children and orphans and that provoked some serious political and social debates. Since the position of E.I. is not financed by the Agency of Child Protection but by the project, she was very direct about the real problems ahead and unlike her state agents colleagues criticized the inactivity of the state: *In my opinion we could have avoided these mistakes by having a greater overall management. Instead we just waited and waited for the problem to arise* (14/2014). One cannot deny the fact that there are fewer places in the newly constructed community based centers – sometimes the number is reduced from 90 to 20 which is a considerable development towards a more individual approach towards the children. Despite this fact, the question should not be how many places are left but how many places are still needed, or in other words, to what extent can we estimate that since there are less available places in the homes there will be less demand for them. What should a social worker do if he or she perceives the necessity of protection of a child in a certain family and there are no more available alternatives for that child in institution? *The practice shows that in the majority of cases the child will remain in his family and the risk of being further abused will continue* (2015/20).

B - Foster care services – A difficult beginning

The concept of foster care has existed in Bulgaria for a significant time but it was not actively present until 2010. UNICEF data shows that prior to the state vision of deinstitutionalization (from 2000-2010) the social attitude towards the alternative family service was predominantly negative and that is mirrored by the low number of foster parents- only 200 in 2010. The factors that contribute to greater acceptance of the concept are related to the decentralization of power from the section of child protection to other suppliers of social services (municipalities, non-governmental organizations etc.). In 2010, thanks to media campaigns and active financial project-based participation of nongovernmental organizations, there is an upward trend in the number of family volunteers. Up to 2012, as part of the project *And I have a family* directed by the Agency of Social Support, there are 1,000 foster care families, which accommodate around 800 children (1,400 envisioned by the end of the project). In 2011 the number of newly educated and approved families was 395 (61 voluntary and 334 paid once). Taking into consideration that there are overall around 1,500 foster care families and 2,508 newly abandoned babies only in 2010, the improvement of

foster care service should be regarded with great importance⁵⁰⁹. However, even with increasing participation of foster care parents, the state is challenged to provide long-term results in the provision of alternative care for all children in need. The goal of the vision for the deinstitutionalization to close all institutions for 0-3 years old by 2013 was not feasible based on the reality in the field. One of the paradoxes at that stage is that although one child in an orphanage costs the state from 3 to 4,000 euros annually⁵¹⁰ there is still no mechanism through which child support can be invested in prevention- directly in the family of the child even before its abandonment. Our research showed that foster care relies predominantly on the supervision and training of non-governmental associations and charity foundations. For instance, the preparation of the families to become foster parents including their training, supervision, and support is partly guided by Foundations (for instance For our Children Foundation) and partly by the municipalities if they have the financial and human resources to do so. The only decision that has not been legally delegated to the municipalities is the appointment of the children to specific families. The process of acquiring rights to become a foster care parent is facilitated and it is enough to apply next to the agency of social support, which in turn directs you towards the foundation (provider of social services) to pass three months training (17/2015). The last stage of the procedure is again in the hands of the Agency of Social Provision, which based on the report given by the foundation provides or rejects the title of a foster care parent. One of the reasons for the increase of people who would like to become foster care parents is also due to the fact that like in other European states foster care has been professionalized and thus people who become foster care parents not only receive subsidy for child expenses (from 165 BGNs to 220 BGNs per month) but also get a work contract from the Agency of Social Support and thus the foster parenthood is counted as work time (17/2015). However, the state still keeps the option of volunteering when the family keeps their own job and in addition receives only child subsidy per month depending on the age of the child.

The year 2014 could be considered as a key turning point for the development of foster care in the country so far. It is the year when *as of 30.06.2014 – 2178 children were accommodated in foster care (the highest number since the beginning of the reform*⁵¹¹. Within

⁵⁰⁹ Data from the National Network for Children

⁵¹⁰ Data from State Agency of Child Protection May 2012

⁵¹¹ National Agency of Social Support:

three years foster care families grow from 391 in 2011 to 1847 in 2013. Bulgaria overcomes the initial delay and doubles the size of foster care faster than other ex-Soviet countries and in 2009 6730 children have places in foster care families. What is more, in 2014 there has been a considerable success in the reduction of entries to the institutions: *out of 599 children put in foster care from January to September 2014, 173 are from specialized institutions and 315 are coming from the community directly. The biggest number of them reflects babies above three years old*⁵¹². These positive figures can be perceived as results from the combined efforts of project funded initiatives such as the project *And I have a Family* and multiple NGO's dispersed around the country. This project started the process of decentralization of foster care families and its end date was planned for 2013. One of the main targets of the project is to achieve a Uniform Financial Standard for foster care in Bulgaria which would guarantee from 2015 foster care services to be entirely delivered by municipalities with a defined subsidy from the republican budget. However, the target of the project was not achieved within the deadline and the project was prolonged twice. In 2014, the extension led to double foster care provision from both state and municipalities, which led to *inequality of foster care across the country and uncertainty on the behalf of municipalities regarding how the process of decentralization would take place*⁵¹³. The project did not achieve its targets even in 2014 and in 2015 the government took decision to merge the operation *Priemi me* into the project *Priemi me 2015* and thus the state voted for EU funded foster care until 2018 and after this deadline the provision should become driven by municipalities. In order to better fit in the criteria for spending of EU funds *couples of hundreds of families were moved from the Direction Social Support to the foster care teams of municipalities*⁵¹⁴. As articulated by the National Network for Children this could turn into an important precondition for diminution of the quality of care provision since all of the families so far have been guided and supported by concrete agents of NGO's, which will not be able to follow them in the new structure.

[http://www.asp.government.bg/ASP_Client/ClientServlet?cmd=add_content&Ing=1§id=595%\\$1=703&selid=703](http://www.asp.government.bg/ASP_Client/ClientServlet?cmd=add_content&Ing=1§id=595%$1=703&selid=703)

⁵¹² REPORT CARD 2015: What is the average government score for childcare? Publishing National Network for Children May 2017. Consulted on June 1, 2017/ http://nmd.bg/wp-content/uploads/2013/12/REPORT-CARD-2017_en-3.pdf

⁵¹³ *Ibid.*

⁵¹⁴ *Ibid.*

Most of these NGO's⁵¹⁵ have defended their specific standards of foster care provision that exceed the minimum demanded by the state.

The way the project *Priemi me* developed, foreshadows couple of problems that need to be considered. First of all, it demonstrates the state's difficulty managing the projects on time and stopping the heavy dependency on EU funding. Partly this could be explained through lack of accurate estimations at the moment when the plan for deinstitutionalization was drafted and thus signals once again the necessity for a renewal of the vision through a detailed audit of the actual needs in every service. Second, the alienation of the active foster care parents from the NGO' agents with whom they have established deep relationships and who have followed the development of the child shows that the state still has to identify the position of the NGO's within the chain of service delivery either as partner of the municipalities, supplier of the service or evaluator and educator. Third, from our interviews with foster care parents we can conclude that the hardest part of the work for them is to *get attached to the child and then get separated from it. These transitions are still not well programmed in advance and remain extremely painful for both sides* (29/ 2015) This point is related to the correct management of foster care services and the misconception among society that foster care is the preliminary stage of adoption. What is more *not all people who are candidates to become foster care parents will be approved and that should not be seen as a precedent* (31/2015). At the beginning of the process, the low amount of foster care parents allowed impetuous selection and that had some dramatic effects on the children's' development. This problem also comes from the fact that since there was no centralized list of the children and their individual situation the system could not match what type of family would fit the best the interests of the children. According to the National Network for Children, some users were pushed by agents of Direction Social Support to change their profiles so that they could fit the demand⁵¹⁶. Such practices do not correspond to the standards of care targeted in the strategy for deinstitutionalization.

⁵¹⁵ Foundation for Our Children, SAPI institute, SOS Child villages, Samariani –Stara Zagora, Sauchastie – Varna, Ecuilibrium Ruse etc.

⁵¹⁶ REPORT CARD 2015: 'What is the average government score for childcare?' Publishing National Network for Children May *op.cit.*

C - The personnel of child care institutions – decisive and neglected

Experts signal that without the contribution and active participation of the people who have worked in the institutions for decades there will be no real change in institutional care in Bulgaria. Institutional staff knows the children best and without them a gradual closure of the social care homes would be doomed to fail. Throughout the interviews, both NGO's working with the personnel and the personnel themselves expressed fear and uncertainty with the new policies (09/2013). Up to the present moment, there were limited state initiatives meant to reassure the staff that they would be taken care of and redirected towards specializations which would allow them to continue work in the field and stay closer to the children they got attached to. Since there were no other state policies for protection of the institutionalized care givers for more than 50 years, people remained skeptical and feared continuous neglect and lack of social support (27/2015). Education programs for the staff have been proposed by various non-governmental organizations and there is a positive tendency towards a gradual change in attitude. However, the lack of common state programs for the continuation of qualifications and the fact that those education courses are only possible through the cooperation of NGO projects or international donors raises questions about their efficiency. The practice from the past ten years shows some negative examples where the government has invested an enormous amount of money in the education of experts and variety of professionals according to the new ameliorated norms of child protection. Today, very few of those who received the training work for state institutions and orphanages remain in the field because the majority of trained people either left the country or dispersed and changed their sphere of work (30/2015). If the state does not put more resources into creating positive conditions for the trained experts to re-invest what they learned back in the system, there is a danger that the purpose of those education programs fails to reach its beneficiaries. Although such trainings are very necessary, their simple existence does not provide long-term benefits for the children and efficiency of the reform. For those reasons most of the NGO's specialists signal a danger of transfer of institutionalism. *It is not enough to put children in smaller groups and better decorated homes if there is a lack of individual approach* (2012/07). After the construction of the first alternative homes for the children from Mogilino, it became clear that even outside the institution, the institutionalized approach remains alive and in the majority of the new alternative homes the quality of care remained de-personified.

Following the same line of thought, most of the people managing NGO's remain pessimistic about the alternative methods of treatment and warn that the government should not try to reconstruct *new smaller institutions* with no change in the approach of treatment. Such transfer could be affected through the simple transfer of people who, via their knowledge and mentality, will continue to implement the Communistic ideology of institutional care (15/2014). All of the civil actors interviewed agreed that the minimization of the deinstitutionalization to the simple amelioration of physical conditions (although necessary) will be equal to its failure.

The lack of strategy and state policy towards caregivers working in child institutions created logically one of the biggest groups opposed to the reform. The majority of them *remain hesitant and aggressive towards the new reforms because they perceive them as a threat: 'If they close the institution where am I going to work?' (12/2013)*. Just like this social worker from Varna, the majorities of caregivers are not informed about the consequences of the reform and see only the present results of it – the closure of those homes. One of our interviewees- an expert in foster care describes how for more than two years he visited an institution for babies (0-3 years old) in Sofia through a metal grid without even being saluted from the staff in place, *We were seen as the enemies- as those who want to take their job away- those who come for 2 hours to destroy the discipline with redundant affection (08/2013)*. Such attitude can be predicted, since state authorities informed caregivers indirectly about the radical legal transformations and the new active role of the non-governmental actor as a state partner in the accomplishment of the deinstitutionalization reform. For more than 50 years the state has forgotten about the institutional caregivers while they remain the only people in direct contact with the children. Our visits to the institutions made it clear that despite their irreplaceable aid, people working in social care homes were left to survive in complete isolation and alienation, dealing with incredible misery and severe pathologies without adequate training for that. One of them described her colleague's day as: *Usually one woman takes care of at least 20 children; carries them on her back; cooks, cleans and feeds them by herself for 100 euros per month (09/2013)*. What is more, all types of actors involved in our empirical research were aware of this issue. From the Ministry of Labour and Social Affairs they provided us with records from the national employment agency showing that the only people who agree to get hired in such conditions are either very poor and old or very young with no education and some kind of a handicap. Members of

Parliament from the opposition confirmed these data saying: *Social workers are some of the most important figures- the future of these children depends on them. However the government neglects and humiliates them with low wages and lack of qualifications* (13/2014). Unfortunately, young people with a degree in social work are mainly forced to work in other domains or switch into the private sector because of the low remuneration of those professionals – the salaries in the social sphere remain extremely low in comparison to teachers or nurses. Our interviewee from the Know-How Center underlined on multiple occasions the *total burnout of social workers and the “enormous turnaround” of staff, which drops the system easily because of a lack of supervision, adequate training and support* (16/2015). Within the dynamic process of the reform there are new forms of social groups that demand assistance and new forms of risks that should be covered by the employees. However, instead of stimulating the staff with higher income and greater human resources, *the state neglected the issue and left the problems of the social workers in the periphery of major political actions. Such attitude reflects the overall understanding of Social Policy only as a budget drain* (16/2015). The manager of the project Childhood for Everyone (who works within the Agency of Child Protection) also acknowledged the criticism but explained that the *logic of the project is to plan and facilitate the transition to community based care but we are not in practice the agent who implies the project on the field (...) I know we have a report saying that we have educated a certain number of people but we (the Agency of Child Protection and the project leaders) have no mechanisms to follow the people or force them to stay in the new community service* (14/2014). At the same time it has been recognized by state authorities and researchers on early childhood development that the importance of development of the sense of belonging is crucial in early childhood development and if the personnel changes too often the residents will never be able to build up such sense of trust.

All of these narratives underline how all different type of actors detect the issue but they lack means of communications through which to coordinate their efforts and act against the problem on a more global level. Despite the fact that as a consequence of the obligations included in the European adjustment procedures since 1996 the Ministry of Education adopts a new regulation, which aims at the unification of graduate qualifications of people with a degree of Social worker⁵¹⁷ (Decree N 273 of Council of Ministries, 1996), almost twelve years later there are some great oblivions among the different titles of social workers and their

⁵¹⁷ KRIVIRADEVA, B. *Child protection in republic of Bulgaria, op.cit.*

wages. For instance, some of the directives of the regulation are not at all applied in practice (social assistance at work, school, and family), others are only formally presented (assistance for handicapped children) or are partially developed⁵¹⁸. Education and further qualification should be regarded as a necessary tool for the achievement of two of the main factors for the successful implementation of the deinstitutionalization reform. First it empowers beneficiaries of social services to gain independence, and second, higher qualification of the institutionalized staff guarantees better quality of services and higher chances for long lasting re-socialization of children into the community.

What should be strongly underlined as a finding of our interviews concerning this process is that prior to the written vision of deinstitutionalization and even the introduction of this word into the social policy vocabulary there were local initiatives driven by the social workers to ameliorate care provision in the state based institutions. Our interviews with social workers showed that despite the overall neglect of these professionals, through bottom up initiatives (which started long before the state plan and the Mogilino scandal), some of the care givers initiated new rules and practices that would change the lives of the children on an everyday basis. The former educator and a director of the institution Asen Zlatarov, our interviewees D. and Z. and their colleagues became some of the pioneers of today's "family type centers".

Concentrated on children's' everyday needs, we tried to better understand the family of the children, their behavioural problems and psychological help and constructed in 2001 small working groups where children could live more independently and imitate family type activities (cooking, cleaning, planning etc.) within the bigger institution (22/2015).

What was interesting in the interviewee analysis of the EU-Bulgarian relationship was that, even without mentioning concepts such as Europeanization, she automatically identified the tension between definitions and stated: *The difference between the centres "family type" as articulated by the EU and the organization done by the staff of the institution is the policy making process- one is top down driven by EU regulations and one bottom up driven by the care givers themselves (22/2015).* Despite the fact that this initiative was not a common phenomenon and could be considered an isolated event, it shows that people on local level felt that change was needed and without any extra means managed to do that within the territory

⁵¹⁸ *Ibid.*

of the institution. It turns out later in the interview that the initiators of this change became the founders of FICE⁵¹⁹ (International Federation of Educative Communities) in Bulgaria and today the president of this IO is a former care giver of the institutional home Asen Zlatarov. She and her colleagues, after more than eight years of field work next to the children, decided to help care givers through educational seminars to acquire tools that will help them to ameliorate their own professional success and more importantly the wellbeing of children. FICE aims to educate, bring awareness, coordinate, and support social workers. The algorithm of policy making according to our interviewee functions only if initiatives that prove to be successful are then translated into politics. *Legal regulations should follow the practice when it comes to the implementation of models that determine the wellbeing of children (22/2015)*. Before having K. as a president of FICE, Bulgaria was considered by other members of the international organization to be a recipient member that needs help and requires experience and financing support. By 2007-2008 thanks to the work and constant efforts of the Bulgarian team there was a shift in the ways Bulgaria was seen and members were turning towards Bulgarian colleagues for provision of good practices. In surprising contrast with what we have seen before, all employees of FICE Bulgaria voluntarily work (for instance the site of the organization is entirely supported by an assistant in Bulgaria etc.) for the international organization in return for exchange, visibility and trainings. Prior to her occupation in FICE D. was initially an educator (of at least 25 kids per shift) and FICE's project manager- Z, (former Director) for many years aimed to close the places where they worked. It may sound ironic but they both were persuaded *that in the condition state homes existed back in 2000 they cannot continue to function (22/2015)*. However, despite the fact that they felt necessity for change, neither of them defined the deinstitutionalization reform as a *closure of the institutions or maintenance of the building*, rather what they felt to be missing was the financial and education support of social workers: *The word "institution" should not be connected to the building but to what is happening inside the building (22/2015)*. Referring to countries with longer experience in the field- Luxembourg or Germany, the interviewee underlined that the word institution does not have a negative connotation:

⁵¹⁹ FICE-Bulgaria is a Bulgarian non-profit organization established in 2001, member of FICE-International – an International Federation of Educational Communities

It is just a way of pointing out care that is provided outside of the family and the symbol of the deinstitutionalization should not be seen as a luxury house or family type that provides services which do NOT serve the interests of the child.

In fact, throughout the interview none of the FICE interviewees used the word “institution” but were rephrasing that as “life in little groups”. It should be pointed out that, unlike actors from the state administration (later presented in the chapter), these social workers insisted that they are the first ones that need to embrace the transformation of child care services. According to them, there are five major signs, which depend predominantly on the staff, and signal that the process is happening:

First main condition for the change of care is the reduction of the number of children in one living space (up to 12 according to the new laws). Second, the new family type homes have to be adapted with all domestic conditions for that (washing, sleeping, cooking etc.) as any other regular home. Third, all needs including medical and educational should be provided by services in the community and not delivered in the home of the children. Fourth, there should be an individualized relationship between an adult and the child that is represented through concrete responsibility vis a vis the child and based on confidence and trust. This person should be trained how to physically but most importantly mentally support the individual in positive and negative moments of his/hers development just as if the child was within a family. Fifth, the social workers should make all possible efforts to help the child and the biological family to stay in close relationship (22/2015).

Very often we heard throughout our research that the biological family and their role in the child’s life is the sole responsibility of the state department of child protection. However, that will be totally inefficient if the people who are with the child every day and who ideally become the child’s confidential peers are not the ones who work to be the bridge between the parents and their children. State agents who have never seen the child in his or her everyday routines cannot judge objectively if he or she needs further help, is good in music, or has a positive feeling about his or her biological mother. The reform is about all these individual gestures that allow children to learn how to live on their own and having the necessary support for that. At the same time we cannot expect social workers to be psychologists, just as all of us who are parents do not need to be psychologists. Legal guardians should, however, be trained to be attentive and caring about the present and the

future of these children. This preparation is in the heart of FICE training process and should be also in the heart of the government efforts for change.

Throughout the interviews the professionals never openly turned against any of the statesman, however they insisted that *if at the beginning policies were the result of EU projects and the transformations of the status quo were impossible today the government has all possible mechanisms to change the methodologies to the practice show that would work better, to persuade the financial minister that the reform should be taken as a priority, to invest in the remuneration of social workers, to improve their training, evaluation so that we do NOT turn the institutionalized children into criminals and send them to the juvenile centers (22/2015)*. Decentralization of power is considered to be a positive phenomenon from the point of view of the specialists but they insist on the fact that actors such as municipalities, non-governmental organizations or civil society would be efficient in their efforts only if they are unified around the state standard of quality care that needs to be created individually for the Bulgarian reality. The delegation of power and the creation and control of standards are part of the policy making process that should not be confused. In other words, if the state is not consciously providing the guidelines necessary for the control and maintenance of a certain quality of standards for child protection there is a great danger that in ten years we will go back to institutional care even though the institutions will be smaller and prettier.

The conviction and awareness of these women were striking and we have not felt that in any other actor part of the decision making process. Our meeting with them made us think on how close we were to doing this reform already in the early 2000's and that success is not only a question of actors capacity but the coordinated efforts of institutions actors and political will.

With a considerable financial contribution from the European Union the reform moved forward within the period 2010-2014. According to the statistics given by the national institutions the expenses for creation of community based centers and new working facilities for institutional residents were as follows⁵²⁰:

⁵²⁰ IGNATOVA, P. *International cooperation, programs for European integration*, Agency of Social Protection, Archive Lumos, Consulted on June 2, 2015.

SERVICE/PROJECT	EXPENSES IN EUROS
147 Family Type Children Homes	36 797 699
17 Protected Homes	1 702 232
Project <i>Childhood for All</i>	2 536 042
Infant Institution Program	547 646

Figure 35 - Expenses on foster care services/projects 2010-2014

D - Administration – increased beaurocracy

Our interviews demonstrated that State institutions have their own vocabulary and narrative that makes a differentiation between “them” the recipients and prosecutors versus “us” the decision makers and the control body of the activities in the field. All state representatives have a very positive rhetoric concerning the reform and stipulate that the reform could be described as a “great success”, “unprecedented success” etc., supporting the vertical structure of the decision making process and great determination of the state to deal with this issue. Bellow we will list some of the challenges in front of the Bulgarian administration that would directly impact the successful implementation of the reform.

1) Rigidity of state agents

Another necessary precondition for change lies on the responsibility of state institutions and their administrative capacity to implement new social models. The deinstitutionalization reform demands decentralization of power and reconfiguration of policies by the inclusion of third party actors from the civil sector. The transformation of administrative capacity started with the adoption of European legislation but still lacks some significant mechanisms for the amelioration of bureaucratic rigidity of the state and its agencies that could eventually slow the process and even harm some of the state’s national interests. Our interviews showed that late results in the deinstitutionalization reform come not only from lack of coordination among the actors but also from the variety of ways through which one sees and identifies the problem. Although all of the key state institutions (agency of child protection, ministry of social affairs etc.) agreed that institutional care need to be removed completely, the reform moves hard and slowly. As one of the project director foster care stated: *the Ministry of Labour and Social Affairs works directly with and for society and thus it is the Ministry where changes develop and persist in unpredictable way.*

Can we assume that there is a misfit between the rigidity of the bureaucratic system of state administrations and the individual approach at the core of the deinstitutionalization reform? As we saw previously in the chapter, the government adopted numerous legal requirements in accordance with the European framework of child welfare, and proved a desire and necessity to change direction. However, interviews showed that the extent to which state agents change the prism of evaluation of child welfare services remains questionable. The higher we ventured in the hierarchy of state employed agents the more we were able to perceive the increased disconnection with the field and alienation from the actual obstacles. Very few of the people directly implemented into the Vision of the deinstitutionalization spent time in child care institutions and met directly with the misery of those children. Nevertheless public servants remain the individuals who make the decisions for the future of the abandoned children and all reforms related to institutional care. Representatives on a national level emphasized the unquestionable efficiency of state policies and remained quite hesitant to identify any specific problematic areas for state practices related to the deinstitutionalization reform (despite our personal emphasis on identifying them clearly). Throughout qualitative interviews we witnessed distant behavior and diminutive answers despite a reoccurring positive tone with highly positioned members of the Ministries. In contrast, our observations in the field show that the majority of state agents who work in the sphere of child care (especially those in the agency of social support) are overwhelmed and lack administrative resources and adequate qualifications to answer individual demands. The Agency of Social Support, as a part of the Department of Child Protection, is responsible for each child put in institutional care and has the entire responsibility for the control of the activities in all childcare institutions across the country. That means that on average one state agent is responsible for 112 child cases each⁵²¹. Paradoxically, salaries of social agents are still some of the lowest in the country and they are rarely be given opportunities for further qualifications. Although the Ministry launched a project for the improvement of human capacity, there are still no official standards of social work (number of cases per agent etc.) and for 2010, there were 124 official complaints from social agents and 108 in 2008⁵²².

⁵²¹ BULGARIAN HELSINKI COMMITTEE; *Roma children in risk and system of child protection*, 2011 Sofia, p.21.

⁵²² NATIONAL NETWORK FOR CHILDREN. *Problematic areas in the politics and practice of the deinstitutionalization reform and the development of social services for children and families in Bulgaria*. Published on April 17, 2012.

Another challenging fact is the great circulation among state agents within the Ministry and the lack of coordination among them. The position of the director of the National Agency of Child Protection became the most debated political figure due to its extremely complicated and challenging structure. For the past fifteen years there have been more than ten individuals in that position. An interesting fact is that most of the ex-directors become directors of NGO's and still continue to work in the field. This transition has its positive and negative aspects but what one could say is that it is not a result of a smooth transition between the actors.

2) A shift in the political discourse

It is important to notice that in contrast to the previous government, the latest has a tendency to use the deinstitutionalization reform as a PR campaign for strong governance and promotion of Bulgarian know-how. Interestingly enough the state shifts the attention from the negative statistics of children in institutions to the fact that Bulgaria became the first country in Europe where three different European funding programs invest in the same project - Childhood for everyone. The project is the first project from the strategy of the deinstitutionalization and estimates that by 2014, 1800 children (0-3 years old) and handicapped youth will be taken out of orphanages⁵²³ The projects started in June 2010 and are provisioned by the State agency of child protection with the partnership of the Agency of Social Support and the Ministry of Health. The Minister of EU Funds⁵²⁴ insists on the unique opportunity for Bulgaria to pioneer a new model of European funding and keeps denying that there are any problems with its implementation. It should be pointed out that this type of cross-cultural funding was not only new for Bulgaria but also for the EU and therefore there was no monitoring mechanism put in place previously for the control of more than 100,000 000 euros (gathered from the European Social Fund, European Fund of Regional development, European Fund for Agriculture). The idea behind this cross-sectorial funding was cross-sectorial collaboration. No matter how distant agriculture and deinstitutionalization seemed at the beginning there was a crucial part of the plan aiming to include small municipalities in the process and decentralize the responsibilities among the different actors. New small centers of family size had to be built in all regions which had previously housed a large-scale institution and therefore land and funds had to be decentralized. The government

⁵²³ *Ibid.*

⁵²⁴ Mr Tomislav Donchev

had to demonstrate this harmonization of policies through the inter-ministerial parliamentary group including all government services which are involved in the process and on whom the decision making process depends. As the interviews point out experts are crucial but, if there are no state representatives that can turn the recommended action into firm policy, all efforts could be evaporated in long term. The functioning of this group is very questionable but what is sure is that all state agents that we interviewed from the respective ministries knew the terminology of the reform and have had at numerous official reunions in which to discuss the challenges they face in the different stages of the plan's implementation.

Our empirical analysis shows that there is a discrepancy between the plan and the actions in practice especially in relation to the definition of the targeted risk groups and their plan for development. A good example of that is the confusion among authorities as to which groups should be considered more risky than others and how the newly constructed centers from family type should be filled. The number one priority group of children to move out from residential care, according to the vision, is the children with physical and mental disabilities because of the urgent demand for specialized care and adequate infrastructure. However, instead of focusing on an individual approach for their challenging needs, in June 2016 the Ministry of Social Affairs decided to enlarge the targeted at-risk group and add to it all children who are part of the state orphanages. As a result, when one mixes children with severe behavioral problems with children with severe physical and mental handicaps the integration and supposedly individual approach of care needs to be questioned. The public explanation given by the officials is only based on the fact that there is available space in the newly build centers of family type “ if there is space, why would we not integrate different groups that need to also go out of institutional care? ”. By the way this question is formulated by state agents one can understand the extent to which the “moving” is still perceived as a very formal act where a child is moved from point A to point B simply because there is “free spot” without taking into consideration the effects that such movement could have on the child. *By filling the “free” places we are not doing deinstitutionalization we are doing re-institutionalization because at the end both groups become even more exposed to risk than before* (2015/23). This fact also points out that the plan listed in the Vision has not been understood correctly by the actors who are supposed to put it in practice – in the vision it is

clearly stated that free spots should be left for emergency cases⁵²⁵ that were not part of the system previously. In the current situation there are almost no free spots in regions where state home institutions have been already closed and therefore if a child needs to be taken out of his home environment (because of abuse for instance) left and the orphanage has been closed.

What is more, recently it was publicly announced that the government plans to pay international financial magazines such as Financial Times and The Economist to advertise the project “Childhood for everyone”. However, it remains unclear what kind of policies the state will advertise across Europe when on the last ministerial meeting (25th of April 2012), the achievement of the plan for the replacement of children in community-based centers was put into question. According to the report the government needs to increase the delegated state budget for the municipalities that are supposed to provide the alternative care. This is particularly urgent for the provision of care for the children with disabilities whose budget remains too limited, and risks being inefficient for the amelioration of care for the disabled ones⁵²⁶. One of the most active NGO’s in the closure of six institutions for children with mental disabilities, the Cedar Foundation, signals that state budget allocations are insufficient for the increase in personnel and they need to self-finance 15 more employees⁵²⁷. On the one hand, this discrepancy in financial estimations arise from the fact that means for social services have not been updated in the past two years at all and thus their value does not correlate with accurate numbers. On the other hand, we should be cautious not to go into a vicious cycle centralizing the provision of state funds- the state budget delegated for social services should not dominate the overall financing of community social services. Thus far the deinstitutionalization reform has led to some considerable financial savings estimated to be around 6.8 million euros annually⁵²⁸. In theory that should mean that potentially with these savings the government could answer the increasing need for 1) qualified staff for the family based centers 2) around 300 additional social workers who could potentially support around

⁵²⁵ For instance if a child is physically assaulted within his home environment the social worker has to isolate the child for an unknown period of time from the family.

⁵²⁶ Monitoring Report For The Deinstitutionalization Reform; Ministry 2010-2011.

⁵²⁷ NATIONAL NETWORK FOR CHILDREN. *Problematic areas in the practice and policies of the deinstitutionalization and development of social services for children and families in Bulgaria, op.cit.*

⁵²⁸ LUMOS. Report: The closure of institutions: financial analysis of the deinstitutionalization process in Bulgaria. 2015.

20,000 children 3) increased medical support and human resources for children with disabilities.

E - Municipalities and NGO's – the unknown value of the equation

The development of alternative childcare services started with the inclusion of non-governmental organizations and municipalities as suppliers of social services⁵²⁹. According to the Law of Social Support, all social services, regardless of the donor, can be delegated to private deliverers through an open competition. As a continuation of this law the Ministry of Labour and Social Policy must initiate and support municipalities to organize such open competitions and create new types of social services. Despite the good legal preconditions for the decentralized financing of social services, we perceived tension between municipalities and NGO's. First, there is still a lot of resistance on the side of municipalities to share state budget funds with representatives of the private sector. Although NGO's have played a main role in the closure of institutions, they are still not perceived as equal partners in the provision of social care. Guided by the old status quo, municipalities see their role as paramount in the financing of services and thus prefer to skip the role of the non-governmental sector and do a direct delivery of the service⁵³⁰. The public-private partnership launched by the state and depicted in the new legislation is still not implemented in practice. Such neglect of the NGO's can weaken the power of regional actors and thus obscure the development of European standards of social models, which are based on the expertise of regional actors as the one closer to the needs of the population.

Second, we perceived a tendency of state agents to impose their policies directly on municipalities, ignoring the role of the non-governmental sector as a provider of social care. Such state behavior nourishes debates about the superiority of care providers and creates further conditions for lack of coordination among providers. Data from the National Network for Children shows that *out of the ten newly constructed social centres only five are managed by the representatives of the non-governmental sector*⁵³¹. Since there is neither a mechanism for the evaluation of the provision of social care nor regulation of the market of social

⁵²⁹ A process which was started at the beginning of the 1990's as a loan condition of the World Bank

⁵³⁰ TERZIEV, K. *Mechanisms for financing of social services*. Published by the Bulgarian Centre for non-profit Law

⁵³¹ National Network For Children. *Problematic areas in the practice and policies of the deinstitutionalization and development of social services for children and families in Bulgaria, op.cit.*

services, such deviation and competition for power does not resemble a partnership between public and private providers and is even less likely to lead to better provision of social services. For instance, an analysis of the operational Programme Development of Human Resources (2007-2013) of the Ministry of Labour and Social Policy shows that Bulgarian NGO's are not financed for their actions related to the closure of institutions and families in risk. *From 107 million Euros given by the European funds for the accomplishment of the deinstitutionalization reform, up to that moment none of them have been invested in the non-governmental sector although all of the institutions that have been closed so far used the know-how of experts from NGO sector*⁵³². Contradictory to the Law's devotion to decentralizing the system, its main governance is still driven top down. From the point of view of the non-governmental sector this has a negative impact on the municipalities by keeping them dissociated from the needs of the local population. The usual excuse on the behalf of the municipalities is that they were not given the necessary human and financial resources and therefore, although they have been decentralized their social programs remain controlled by the Ministry of Social Affairs. Our interviews in four major municipalities⁵³³ show that mayors become more and more sensitive to the problematic nature of social affairs and if given greater resources they would control much more accurately the overall wellbeing of the local families. Paradoxically, today if an incident happens with a child in the local institution the manager would not seek aid from the Mayor of the respective municipality but rather the Minister of Social Affairs or the director of the Agency of Child Protection who is the employer of all social workers.

On the other side, so far the reform has been predominantly driven by the rhythm and requirements of the projects and therefore the non-governmental actors in the field were acting on their own without any supervision or guidelines about the efficiency of their efforts. Therefore, the state needs to construct and legally impose standards for quality of childcare that all actors need to follow. Once the standards are set, municipalities and NGO's will have the freedom to work according to their individual needs and appointed budget. Finally if the state does not find mechanisms to assure continuation and support for the long term success of the projects driven by EU funding their success will be largely put in danger.

⁵³² *Ibid.*

⁵³³ Sofia, Plovdiv, Varna, Vratza

The process of deinstitutionalization shakes the exclusive responsibility of the Mayor over institutions situated on its territory and opens the provision of social services towards the civil sector. The resistance of those municipalities to losing total control over the management of orphanages and the lack of resources to answer individual needs of beneficiaries of social services represents a risk for the actual delivery of community based services.

Being independent from the other state and non-governmental actors, it is assumed that city councils have the capacity and are legally authorized to prioritize certain issues over others. However, according to some of the interviewed NGO specialists, *in the majority of cases people who are supposed to prioritize one service over the other do not have either the capacity or the resources to understand and judge the utility of community based care projects objectively* (2012/06). This critique is supported by some striking examples where important projects financed for years by state and European programs have been obstructed regardless of their success and utility for society. A representative of the civil sector who already lost one of her most successful centers for psychiatric support in Ruse, affirms that *unless there is a mechanism for financial sanctions in cases of delay and impediment recognized at national level successful projects, one could not expect any drastic changes in the Mayor's behaviour* (2012/06). For the moment, however, there are no existing legal mechanisms, which could influence the decision of the municipality councils and thus provide no guarantee for the continuity of local and national priorities. Such discrepancy of interests is especially visible in regions that are politically divided and competing for influence. For instance, the state invested 300,000 Euros in an unprecedented project of its kind to create a Center for Early Intervention in Ruse. The project and the state budget were planned for 14 months during which staff was educated, and more than 300 children annually were treated for free. After 14 months, the funding of the program terminated and the Center was left under the control of the municipality of Ruse. Surprisingly, the city council voted against the continuation and maintenance of the already functioning center, and thus all money and know-how were doomed to disappear. Such non-continuity of priorities and complete independence of the municipalities leads to the loss of considerable amount of funds and decisions, which are in some cases against the good of society. This could be taken as a concrete situation wherein, despite the great outside funding, if there is no will on local level, the provision of social services could be stopped.

The National Network for Children signals another concern in relation to the municipalities that deserves attention from the state authorities. The “one size fits all” models of Family Type placement centers that need to be created by the municipalities for the accommodation of children from the institutions as envisaged in the requirements for applying for submission of project proposals⁵³⁴ fear to contradict with the policy set out in the Vision for the Deinstitutionalization. Despite the fact that the criteria for the physical appearance of the building and its location remains important, if the municipality does not adapt the buildings to the needs of the children, their construction will contradict their purpose.

One example that illustrates the need for a long-term vision and cooperation between the non-governmental organizations and the municipality is the creation of the first Child Center for Psychological and Medical Help of Children with Psychic Disabilities in Ruse. The center opened straight after the closure of Mogilino and its purpose was to give support and adequate therapies to children with mental problems. A study done by UNICEF together with psychiatrists showed that until that moment all children in the state home had been given inadequate psychotropic medications. After one year of adequate treatment, some of the most severe symptoms of aggression, bulimia, and other illnesses began to disappear, and some of the children even started to walk, talk and eat for the first time in their lives at the age of nine. As we already noted in Chapter I, children’s handicaps are vastly influenced by poor living conditions, inadequate medications and anonymous communication, and thus the center invested predominantly in education and maintenance of specialists (two psychiatrists, three psychologists, two nurses and one speech therapist). Through the financial support of UNICEF, the center became the only specialized center for child psychiatry providing free treatment in Northern Bulgaria (and the only one outside of Sofia). Apart from children who were part of the Home for Disabled Children, more than 600 children from across the country came for consultation only in 2015. However, despite its enormous utility, the maintenance of the service was questioned after the end of the projects through which it was initially funded. The first year the center managed to function financed by UNICEF, and the second year through the operational program Human Resources. However, once the service moves to the municipality, it cannot be guaranteed that the qualified staff will be kept or the positive

⁵³⁴ As envisaged in the requirements for applying for submission of project proposal scheme BG161PO001/1.1-12/2011 *Support for deinstitutionalization of social institutions offering services for children at risk*

experience prolonged. Thus, experts pled for *a mechanism to sanction the municipalities in case they do not continue the good practices established through the project financing (2012/06)*.

F - NGO's – between the state and the EU

The most active actor in the field of child protection is undoubtedly the non-governmental sector, which plays a major role in incorporation and introduction of alternative models of care. The NGO sector becomes a pretty well consolidated actor who considers itself to be well informed, operational on the field, and open minded. One of the most important coalitions in the sector, according to our research, is the creation of the National Network for Children in 2003 as a formal alliance of NGO's and later in 2006 as a formal non-profit organization. In 2016, the alliance combines 141 organizations working with and for children and families across the whole country. All of the individual members of the network that we interviewed underlined the importance of the network in solving some of the biggest challenges facing the system of child protection, such as *the coordination among the actors and the lack of common platform for exchange of bad and good practices(2015/21)*. The other innovation in this coalition for Bulgaria is that for the first time on a larger scale children have been included in the reports and surveys of the coalition. This falls within the overall strategy of the Bulgarian government to put the child in the center of the system and thus create policies that follow the needs of the child and not the opposite.

NGO's have the advantage of being much more flexible than state institutions and that allows them, depending on their resources, to seek solutions to some issues outside of the country's framework. That is true especially when the NGO is part of an international bigger structure. When we asked representative of the Bulgarian Helsinki Committee- *Where do you see the role of Europe within this process?* She replied:

Europe is there to push forward towards the biggest changes and thanks to these regulatory mechanisms a lot of positive awareness campaigns took place in Bulgaria. For the people in the Bulgarian Helsinki Committee the only place where it is still worth sending our signals for abuse and neglect of children in institutions remains the European court of justice and not the Bulgarian authorities for child protection; not because in Europe everything is perfect but because the rules have value and sanctions appear where necessary (20/2015).

This quote summarizes well the general feeling of the nongovernmental sector towards the role of the EU vis a vis their work in the field. Unfortunately, even among national organizations there is a general disbelief towards national institutions and thus the regulatory mechanism so much needed for the evaluation of the reform often comes from foreign institutions. This feeling is also supported by the fact that other EU or American organizations, which created local representation, pilot most of the Bulgarian NGO's. It is also fortified by the financial dependency of these NGO's on the headquarters. However we believe that with time the state will construct enough mechanisms for support and protection of its own population and that the role of the EU will be to fortify the state and not undertake its functions.

The relationship between the NGO's and the government evolved positively over time could be described as one that provides both good and bad results . On the one hand, the government counts tremendously on NGO's to suggest what the criteria should be and how the standards will affect the field. On the other hand the government (depending on the person in charge of the state agency of child protection- the organ responsible for the creation of standards) ignores or does not let the NGO's to influence the procedure too much because of their enormous number, and financial dependence.

G - Families in need

In Bulgaria there are around 2000 babies that are abandoned every year and for 1000 of them the abandonment happens already in the maternity. Our country keeps the first position in Europe for abandoned babies and one of the top for poverty rate of children (43,7% of overall children from 0-17 years old⁵³⁵). In addition, the level of child mortality in Bulgaria is double the one for the rest of the EU ⁵³⁶. In order to see how the deinstitutionalization reform addresses the issue of prevention we examined one of the leading foundations dedicated to prevent institutionalization of newborns and creator of centers for public and family social and medical support - For Our Children Foundation.

For Our Children Foundation has worked in Bulgaria since 1992 and it is the Bulgarian heritage of the UK Funds and Trusts. As such it represents one of the first providers

⁵³⁵ NATIONAL STATISTICAL INSTITUTE. Indicators for poverty and social inclusion within the country, (<http://bit.ly/2nzs3v>, Consulted on May 5, 2015)

⁵³⁶ FOR OUR CHILDREN FOUNDATION History of the organization. Who are we? Consulted on January, 2015 <https://www.detebg.org/en/about-us/history/>

of British know-how in the country and thus we will present briefly her historical development before we demonstrate how it works on the field. Motivated by the severe poverty and economic instability throughout the transition period, in 1992 the Christian Children's Fund of Great Britain started to provide humanitarian aid to poor families and children in institutional care. In 1995, the Fund initiated the accomplishment of a *quality analysis of institutional care*⁵³⁷ in the poorest municipalities and started to cooperate with three of the biggest Homes for Children Deprived of Parental Care in Plovdiv, Sofia and Velingrad. As written in the site of the foundation *The report of the analysis aimed to change drastically the pre-existing child welfare and influence new policies for child protection.* Being in deep need for resources the aid of the Foundation was largely accepted and the methodology never questioned. In 1997 The European Children's Trust joins the Christian Fund with the perception that *the humanitarian help is not enough (...) That is why, the team takes as their aim to support Bulgaria in the construction of a new national model, which will change the attitude towards children in poverty and their families and through which the state will effectively support the families at risk and the vulnerable Bulgarian children*⁵³⁸. Only in a year, the foundation managed to train two social workers and in 2001 and built the first Children's House in Plovdiv with a capacity of 24 children from 3 to 7 years of age. In 2002, The Christian Children's Fund of Great Britain and the European Children's Trust combine in an international scale and create "Every Child". Since then *the Board of Directors of "EveryChild" supported the continuation of the Foundation as self-dependent and sustainable Bulgarian organization*⁵³⁹. The Foundation has a spectacular record of successful initiatives and is one of the leading non-governmental actors in the prevention of children above 3 years old, activities. To this end it does early child intervention and family support in cooperation with different municipalities. Despite that, we would like to point out that when a foreign country comes and sets new models for «children best interests» at a moment of political instability (1992), it merits further investigation what is the definition of these interests and to what extent the Bulgarian State has the capacity to contradict the foreign plan for the development of its own foreign policy. We realised that it was not correct to critically address the influence of the British state over the Bulgarian one, and thus our interviews with

⁵³⁷ FOR OUR CHILDREN FOUNDATION, *op.cit.*

⁵³⁸ *Ibid.*

⁵³⁹ *Ibid.*

representatives of the Foundation were only concentrated on the practical challenges of their duties.

One of the first challenges that our interviewee - the project manager of the Sofia region A.M.⁵⁴⁰ mentioned is the misconception of the degree of risk for one child. *Very often even if the child has been categorized at risk by the foundation and his or her application has been sent towards the Departments of Child Protection- social workers from the department would not consider him/her at-risk and leave the child on its own (2015/21).* The risk assessment of a child turns out to be one of the most subjective parts of the process and there are many cases which are debatable and depend only on the individual assessment of the social worker. As we mentioned earlier, this is a problem correlated to the importance of permanent staff since the assessment of the risk is even further challenged by the great turnover of staff and the and the fact that there is no continuity of the expertise in the long-term. It should be underlined that all Centers of Family Type represent state delegated services which mean that the municipality is not as important in the negotiation process as the state employees. The core activity of the Foundation is the work they do with the family of the mother that wants to abandon her child. For instance, the Foundation has negotiated with four hospitals to be informed through the Agency of Child Protection if there are cases where a mother risks abandoning her child. The primary organ for intervention remains the Agency of Child Protection but the foundation can and does a lot of extra work related to the individual assessment of the family and the challenges that might have brought the mother to this drastic decision. These efforts of prevention are combined with a special package of first aid materials necessary for the wellbeing of the child. The Foundation is not providing cash money, but has already prepared equipment for the good start of the baby's life in their home environment. *The hardest parts of this process are considered to be on the one hand, the psychological work with the mother immediately after the birth of the baby and on the other hand, the good assessment of the close family and the decision where would the mother find greatest support among all her relatives (21/2015).* According to the legal procedure, if despite all of these efforts of the Foundation and medical staff, the biological parents still want to pursue the abandonment of the child the state needs to reassure them that the institution remains the last possible solution- *passing through first the closest relatives,*

⁵⁴⁰ Malinski has graduated in the 1990's psychology at Sophia University and his major focus is on homeless children

*second foster care, third family type centre for children from 0 to 7 years of age*⁵⁴¹
Throughout the first six months after birth the biological mother should remain therapeutically and financially supported so that all possible means to help her keep or take her child back remain active.

We tried to think of all possible help that can facilitate the decision making process of the mother, for instance the rescue kit provided by the Foundation also includes formula milk so that even when the breastfeeding process has been cut through medications after the declaration of her will to abandon, the mother still has a possibility to keep the contact with the baby (21/2015).

It is important to underline that all measures for support of the biological mother are available only throughout the first six months of the baby. If throughout this period she abandons her child and afterwards decides to take it back, the legal and social procedures become much more hostile towards her and a positive outcome is uncertain. Therefore, except the above described “crisis intervention”, there are very few interventions in the field that take place before the baby is born due to lack of information and resources from the side of social services. As a result, being in a very sensitive and physically unbalanced moment straight after birth the task to keep the bond between child and mother becomes much harder.

In order to understand the difficulties that specialists face while working in this support center we combined the interview with a visit of the center. Our interview with the coordinator took place in one of the three centers of the association. From the outside, the building of The Center of Public Support looks old and daunting with bars on the windows and old traces of paint. It has a little garden and a fence that would prevent people from the outside to see inside the courtyard. Once we were inside, our first impression was that there was a visible contrast between the first and the second floors already from the stairs. At the beginning of our conversation, our interviewee explained that we can do a tour only accompanied by him because this building was actually still partly a functioning institution for infants from 0 to 3 years old St Paraskeva. Despite the enormous efforts of the personnel of the foundation to repaint and refresh the walls, to decorate with cheerful furniture, and to provide brand new toys inside the hallway, the spirit of the institution was very much alive- triggered also by baby cries coming from the second floor. We were walking and trying to imagine what it

⁵⁴¹ NATIONAL AGENCY OF CHILD PROTECTION. Annual Monitoring Report, *Vision for deinstitutionalization of republic of Bulgaria*, 2014

http://sacp.government.bg/media/cms_page_media/439/4-T1%20MONITORINGOV%DOCLAD_last.doc

would be to grow up here among four walls and blocked windows. However, by the end of the interview, my interviewee A. M. helped me to perceive this place as a center for public support rather than a hopeless “home” for abandoned infants. Probably it was not by accident that the center for public support was incorporated in the heart of the institution and beyond the symbolic meaning of this change shows how fast one can move from one system to the other.

1) Mothers who abandon

There are two mechanisms through which a child can be taken away from his/her parents. The first one is based on the assessment of social security agents and if they consider the parents dangerous for the child, or in other words consider the “child at risk “in the existing family environment. In the other possibility, the mother personally declares herself unwilling to recognize the child as hers and wants to give it for adoption. It should be emphasized that the mother is the only one of the two parents that can decide if the child will be recognized or not.

In 80% of the cases where the foundation worked with the mother from the 1st day of birth the abandonment was prevented (2015/21). There is also a third group of cases where the mother herself is still a child and falls under protection. In this scenario, the baby can be placed in the custody of the closest relatives within her own biological family. However, the practice show that in 2/3 of the cases “the close family is not willing to support her and push her to abort the baby because they feel ashamed of how society would react (...) OR because they are worried she will fail at school (...) OR have no means to feed one more member of the family (21/2015).

Confirming M’s experience, professionals working everyday with families at risk underline in their annual report that the most common reasons for a family to abandon are *lack of money, severe disability of the child, the judgment of parents that they would not be able to provide care*⁵⁴². These reasons foreshadow once again that the overall strategy for the reduction of children who need institutionalization needs to be concentrated on in time interaction of social services within the family in order to provide necessary support in due

⁵⁴² REPORT CARD 2017: What is the average government score for childcare?’ Publishing National Network for Children May 2017. Consulted on June 1, 2017 / http://nmd.bg/wp-content/uploads/2013/12/REPORT-CARD-2017_en-3.pdf

time. Unfortunately, as we exposed previously in the chapter the state does not have enough human resources to reassure such type of preventive policy.

Experts are certain that if professional intervention happens earlier with people who are already exposed to poverty, social exclusion, and/or any type of vulnerability such as child pregnancy, and these people are provided better sexual education and risk awareness, the level of abandoned children will lower drastically. However as it is stated in the last governmental report from 2016, *the number of children at risk from abandonment or separation from their biological parents is among the largest failure of the first stage of the process of deinstitutionalization of Bulgarian children*⁵⁴³. Therefore the measures of prevention and on-time reaction on the behalf of state agents remain of extreme importance and needs further state capacity to start functioning properly. We stipulate that the 59% decrease of the numbers of children in specialized institutions since 2009 (see Figure 36) seems considerable, but it is mostly due to the negative demographic tendency in the country and not adequate preventive measures.

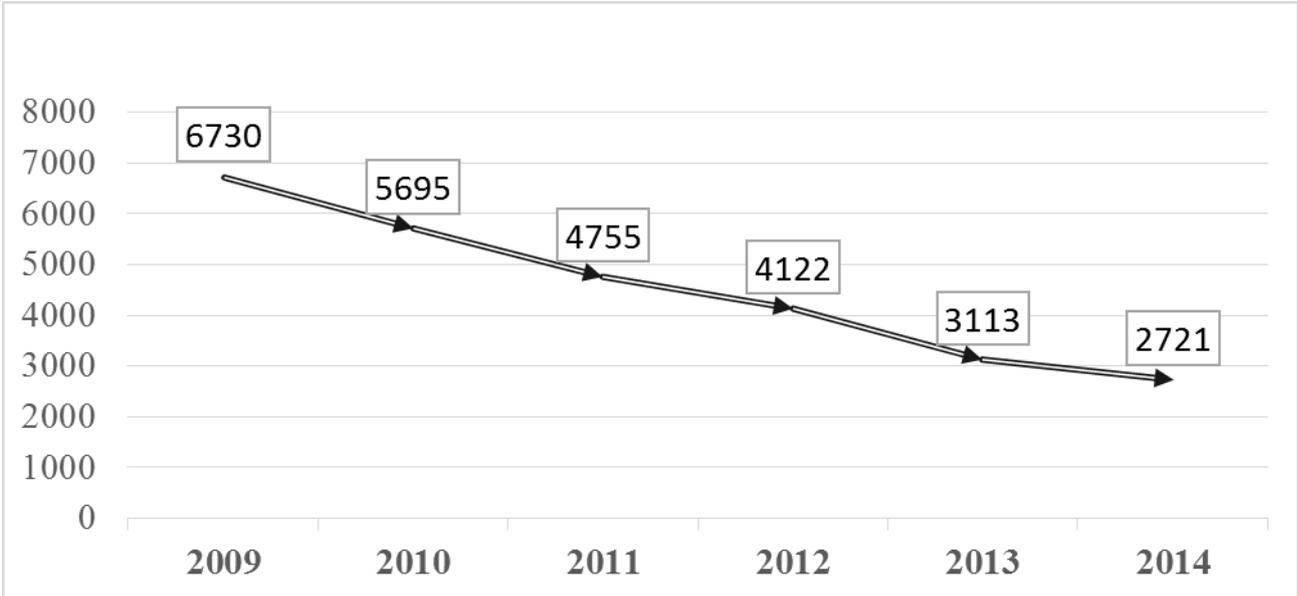


Figure 36 - Number of children and handicap children in the system of care

⁵⁴³ Revision of the National Strategy: Vision for the deinstitutionalization of children in Bulgaria- 2016-2020.

Around 70% of the parents of the abandon babies never go visit them in the institution, and 20% of the mothers go only once per week. The director of the For Our Children Foundation in 2007, E. N., underlines in an interview that *despite the deinstitutionalization plan, in the past years the period of institutionalization increases*⁵⁴⁴.

As it was shown in Chapter IV, Bulgaria is one of the countries in Europe with the highest rate of teenage mothers, and according to statistics from the For Our Children Foundation *10% of all abandoned babies have been born of girls above the age of 18*⁵⁴⁵. One cannot ignore the cultural differences among Bulgarian citizens and Roma citizens, for instance for whom it is culturally accepted to get married around 18, have children, and leave school as early as 15. According to statistics of the Foundation from the same period, *around 70% of all abandoned children are from Roma ethnicity and 90% of the children given for adoption are from Roma ethnicity*⁵⁴⁶ despite these data, official statistics of Roma children in institutions have been lacking since the creation of institutions. Our visits to four of these institutions could also testify to these results. For the purpose of this research, we will not develop the topic of adoption, which represents a whole new aspect of the problem. Regardless of their ethnicity, it is much more likely for lower income families to think of abandonment, and the state should avoid practices that would stigmatize any groups of people only because of their social status.

2) Poverty

A strong indicator about the motives behind a mother's decision to abandon her child is the risk of poverty (2015/21). Our empirical research proves that any type of material and financial support before or after birth has a great chance to influence positively the decision making process of the mother. According to Eurostat, Bulgarian children have double the risk of poverty and social exclusion in comparison to all other European countries⁵⁴⁷. The Innocenti Center for Statistics of UNICEF defines child poverty through fourteen different

⁵⁴⁴ Darik News. First in Europe in child abandonment. Interview with Elka Nalbantova (02.03.2009) <https://dariknews.bg/novini/bylgariia/pyrvi-sme-v-evropa-po-izostaveni-deca-334743>

⁵⁴⁵ FOUNDATION FOR OUR CHILDREN. The rights of children living in institutions and alternative care settings in Bulgaria, Report, 06.02.2015 <https://detebg.org/data/uploads/items/21d31e5e69d9f092143552e1092d03a7.pdf>

⁵⁴⁶ *Ibid.*

⁵⁴⁷ EUROSTAT. At-risk-of-poverty rate by poverty threshold and household type - EU-SILC Survey Consulted March, 2015 at http://ec.europa.eu/eurostat/web/products-datasets/-/ilc_li03

components from which the family of the child should be able to reassure at least one in order to consider the child “non-deprived”. In their report from 2012, the results show that *the highest percentage of deprivation appears among the new members of the EU, for instance the percentage of deprived children in Hungary and Latvia was 30%, in Bulgaria 50% and Romania 70%. In comparison, in France and Italy the percentage is less than 10%, Norway and Sweden less than 3%.*⁵⁴⁸. It cannot be ignored that the 2008 economic crisis also negatively influenced the well-being of Bulgarian families with children and since 2007 the rate of children who live below the poverty line increased by 7%. In 2014 this was 31.7%, increasing from 28.4% in 2013. According to data of the National Statistics Institute from October 2015, 377,300 Bulgarian children live in poverty. The risk of poverty in families with more than two children and in families with children in need increased by more than 11.3% in 2015⁵⁴⁹. Child poverty has been a factor, which influenced the number of children in institutions since their creation. Undoubtedly the state needs to increase the social assistance schemes for people with low revenues so that they are not forced to abandon. However, our observations in the institutions also showed that especially for children from ethnic minorities (such as gypsies) the institutional placement has been used as a constant revenue option from the parents (mothers who have abandoned their child but did not resign from parental authority continue to receive state aid if they visit the child at least once every six months). The director in Brezovo described a case where a mother of nine children, seven of which were spread across different institutions receives per month approximately 700 BGN per month in the form of social aid (100BGN for each child). Such financial support is also an incentive for the mother not to resign her parental rights and thus prevent the child of being adopted. Each of these cases needs to be evaluated individually but question the efficiency of state aid and the incentives behind child institutionalization among some social groups.

3) The disability label

The label “disability” given by the state through the procedure of TELK is worth analyzing closely, because despite being a measure that should give greater priorities to people in need in relation to children, it could actually keep them from being integrated. The

⁵⁴⁸ UNICEF. Innocenti Research Center. Innocenti Report Card 10. Measuring Child Poverty. New league tables of child poverty in the world’s rich countries, Series number 10, 2012.

⁵⁴⁹ *Ibid.*

reform moved faster than the state in the different categorizations of the handicapped. Therefore, when children's numbers must be reduced in the residential care, there are some real challenges. For instance, as described by the direction of the *Complex Olga Scobeleva by 2016 the number of children should be reduced from 40 to 20 in residential care. Following an order from the agency of social protection, 14 children should be moved to a family-type center (19/2015)*. The municipality of Plovdiv once again provided the building. However, the center was labeled as being for children without disabilities and thus excluded children who have TELK (territorial commission of experts) but do not need medical assistance. These are more often children who have mild mental disabilities and need assistance in the educational process. Currently, all these different groups of children lived together.

According to many specialists that we interviewed, the child still needs to follow the system and not the system the child -especially in terms of the financial aid that corresponds to each child. For instance the differentiation that exists in the different Day Care Centers is still not very well understood and accepted by professionals. If we take the example of the home in Plovdiv, the directors have to increase the number of children from 40 to 20 and thus redirect around 20 children in day care centers.

4) School integration

In Bulgaria the current system of primary and secondary education is mandatory and compulsory from age 7 to 16. Since the reform of deinstitutionalization is aimed towards the closure of institutions, 100% of those approximately 7,500 children (with disabilities included) need to be reintegrated into the public educational path by the end of 2018.⁵⁵⁰ At present, our field observation and analysis shows that the majority of public schools are not ready to accept more children from institutions, and, what is more, do not have adequate programs to deal with children from different backgrounds. As the corner stone of social integration and personal independence, such a delay in educational reform could be considered as one of the greatest challenges for the implementation of the model and one of the supreme preconditions for further failure and isolation of the orphans. Results from our data prove that a gap in the educational system for children in institutions have existed since the fall of Communism, when the state collapsed and did not have the political capacity to answer the needs of children from institutions according to Human Rights criteria. Although

⁵⁵⁰ Ministry Of Labour And Social Policy, *National Vision of deinstitutionalization, op.cit.*

the education of children residing in institutions remained formally available, it was not strictly followed by the inhabitants of the orphanages despite the obligation. Records show that 90 % of abandoned children leave schools at the age of 16⁵⁵¹. The majority of them need to leave the institution and start working before the end of high school. According to civil society representatives, inadequate education support for abandoned and handicapped children foreshadows the unequal chance for social integration and professional realization. On paper, the government is obliged to assign a resource teacher for children with a handicap or learning difficulties inside the institutions. In reality, specialists are alarmed that the methodologies used for handicapped children are not adapted individually and are rarely up to date.⁵⁵² In many situations a child who has a handicap is diagnosed too late, and even if he/she has been given treatment, education was often not provided due to lack of communication between the Ministry of Education and the Ministry of Health.

The non-adapted education system is a paradox. For more than 50 years (since circa 1952) the Ministry of Education has been the responsible organ for the State Institutions of child care⁵⁵³. The new type of care should not only focus on basic needs satisfaction but also teach children to survive independently. *These children should stop being treated as parasites that need to be fed by society*⁵⁵⁴. Education is vital for the success of the reform because it can empower children from institutions to become active participants of their future instead of passive recipients of state aid.

H - The Public sector – demagogy in the media

In the past five years there have been an increased number of organizations that invest in large PR media fundraising campaigns. Using the image of sick and handicapped children, these publicities serve as positive awareness but also probably as a manipulative trick to gain public attention. Slogans such as: “Donate via SMS and save a life” or “Be a good citizen and show that you care by sending us 1 euro SMS” could manipulate the public opinion to participate. However, can we really conclude that such passive participation is the best that civil society can do? Without ignoring the advantages of financial contribution, there are

⁵⁵¹ NATIONAL STATISTICAL INSTITUTE Net Enrolment Rate Of The Population In The Educational System In 2016/2017 School Year <http://www.nsi.bg/en>

⁵⁵² Based on an Interview with the foster care team manager at Child and Space Foundation”

⁵⁵³ Regulation of Child Institutions. State Journal 13/1952

⁵⁵⁴ Based on interview with an associate professor and civil activist from Sofia University

some negative impacts one has to consider before considering all of these charity campaigns. There are no official statistics on how efficient the campaigns are and what amount of the funds are invested towards the cause, but we can assume that a considerable amount of the funds go to the state, the mobile operator, and the TV channel. Some of the national NGOs that were interviewed expressed quite critical sentiments towards big international organizations that use their worldwide reputation to attract famous ambassadors and focus their efforts predominantly on PR campaigns. Worldwide, this practice is well known as a means to raise social funds. However, Bulgarian practice may be seen as abusive of the usage of the advertising campaigns on two sides. On the one hand, with the restrained state budget for social spending, the state promotes those media campaigns as the only means for the survival of children in need. On the other hand, it gives citizens a very passive opportunity to participate and “solve the problem” through one click and considers their citizen responsibility accomplished. The laziness of young people to participate actively is very visible when one follows the number of people who support social initiatives on-line and compares it to the number of participants in a protest for the same cause. Independent from those two factors is the vague control mechanism of media fund raising campaigns and the lack of accountability among mobile operators, TV channels, and NGOs. Our observations proved that in some situations the continuous efforts of some of the smallest unknown actors in the field may be more valuable than big PR campaigns.

The other controversial point of campaigns related to children in institutions is the way they portray orphans to the public. The advertisements show blond, white skinned, healthy children with blue eyes when the majority of them are Roma with darker skin and disabilities. Such false media images contribute negatively to foster care candidates who dream of having the babe from the publicity and finally get shocked and discouraged by the actual physical and mental state of the children in institutions. If state and non-state actors allow such kinds of re-shaped images of reality, we put in question not only the integration of abandoned children in society but also the heart of the reform into question. In order to change taboos, disabled children need to be taken from their invisible institutional isolation and brought back to the heart of society to where they belong. In that sense, deinstitutionalization reform represents to a great extent a value reform; a reform that pushes society as a whole to be able to see and treat children not as objects but as human beings; a reform that demands for each child to be accepted as valuable and thus any human as valuable.

I - Social stigma

History has proven that change in social mentality is a process that demands time and can have unpredictable outcomes. Undoubtedly there are some drastic differences in the way liberal and communist societies developed, which precondition the way that European standards and policies will be implemented. Although those risks are some of the hardest to capture in advance, practice shows that they cannot be neglected in advance. Getting out from the almost entirely publicly owned resources during Communism, Eastern European societies adapted a diverged form of individual morality proposed by capitalism. “The result best called ‘personalism’ is an amorality that places no serious value on the collective need.”⁵⁵⁵ This is opposed to individualism (a trait of capitalism), a condition in which individuals tend to abuse resources and power regardless of others and the harm he or she can cause to society. Strikingly enough our interviews show that “personalism” has penetrated deeply not only on institutional level but also the individual level.

From our observations and from the interviews conducted, the general understanding one could get is that the attitude towards abandoned and handicapped children remains highly hypocritical and intolerant in public places (parents reject them in schools, municipalities from their public spaces). It is hard to say if people are not aware of the severe decline of the institutions until there is a media scandal or they have a personal need of the service. Because of its complex implication, the shift from institutionalism to deinstitutionalization affects much larger social dynamics than those related to the provision of child services. It is a reform that demands the post-socialist passive, silent society to take responsibility and act to protect those who have been abandoned. The shift in roles and assuming such new responsibilities cannot be understood overnight. Paradoxically, the majority of those citizens who would need to accept and integrate disabled or parentless children into the social activities of a community were persistently thought throughout forty years of Soviet ideology to alienate and neglect them.

Change in social attitude demands an enormous amount of effort to break down social prejudices in regard to people from disadvantaged backgrounds. However, positive results are not impossible and already occur in the field. An emblematic example of this process is the case of Drianovo Municipality, where in 2004 the state created a new community based

⁵⁵⁵ POZNANSKI, K. Building Capitalism with Communist tools: Eastern Europe’s defective transition. *Eastern European Politics & Societies*, 2001, 15:2, p. 320-355.

service for disabled elderly people transferred from the institution for mentally ill in the region. Immediately after the people living in the community realized that disabled people will move to the center of the city, protests rose up on the streets showing the resistance of civil society to share any public places with the members of the institution. Showing fear and lack of knowledge about the specific needs of disabled people, the public rejected any options for a community-based center. Thanks to an active information campaign with the collaboration of regional authorities, civil society, and the media, the challenge was overwhelmed and today the service functions normally. Unfortunately, there are only 20% of municipalities in the country who work with the non-governmental sector.⁵⁵⁶ Being closer to the public in comparison to state agents and regional authorities, NGOs are the most feasible actor to change existing stereotypes in relation to children in need (with or without disabilities). Community-based care without change in mentality will be a paradox doomed to fail. For the community to act as an agency of power the state needs to use the capacity of its agencies to create a new form of *social partnership through which a shared sense of the public good is created and debated*⁵⁵⁷ The importance of integrating those excluded (the institutionalized population) back into the community will be central to their recognition not as a category with an assigned identity but as individuals.

J - The missing actors of the deinstitutionalization plan

There are largely two big groups of institutions for children: one group which accuses children- the- Prosecutors⁵⁵⁸ and another which must provide protection to the child⁵⁵⁹ driven by the National Agency of Child Protection. The line between the two types is very blurry, and often children who are victims of trafficking or poverty for instance have been treated through the criminal justice system or the juvenile delinquency system instead of the child protection system. The common denominator of both systems is that all the children who are part of these closed institutions are in some way deprived of their liberty.

⁵⁵⁶ SHIBANI, N., DIMITROVA, M., *Quality of social services In Bulgaria. Review of the legislation for quality and control of community based services*. PACEL; Sofia, 2008

⁵⁵⁷ HUMAN DEVELOPMENT REPORT, Oxford University Press, New York, UNDP, 1997.

⁵⁵⁸ Institutions belonging to the criminal justice system, Institutions belonging to the juvenile delinquency system

⁵⁵⁹ Homes for children deprived of parental care, Shelters for neglected children; Institutions for refugees, asylum seekers and migrants.

*According to the Optional Protocol to the Convention of the United Nations against Torture and Other Cruel, Inhuman or Degrading Treatment or punishment, ‘deprivation of liberty’ is ‘any form of detention or imprisonment or the placement of a person in a public or private custodial setting which that person is not permitted to leave at will by order of any judicial administrative or other authority*⁵⁶⁰.

Within the Bulgarian state this definition is implied to children put in institutions belonging to the child protection system such as Homes for Children Deprived of Parental Care who are also *not entitled to freedom of movement outside the institution and are declared wanted by the police in case of unannounced departure from the confines of the institution or fail to respect the deadline for returning to the institution*⁵⁶¹. These two systems contradict each other, because even if the child has committed a crime – for instance prostitution- he or she has to be protected and taken care of by the state since the state and his/her parents failed to provide him with the adequate care and support for his/her wellbeing and normal social integration and development. Our interviewee from the BHC confirmed that the decision of where a child will be placed remains very subjective and unpredictable. For instance, children victims of trafficking were found both in special homes for temporary placement as well as correctional boarding schools. One can imagine how traumatized and confused a child could be when he/she becomes a victim of people who try to sell him/her or his/her organs abroad, and then he state sends him to a ‘correctional’ school as if it were his/her behavior that caused the trouble. Another example is with children who were forced to beg on the streets and when caught by the police - they are moved to Social-pedagogical boarding schools and accused of “wrong” behavior. *Being caught behind the walls of those institutions, the children are everything else but “educated” to be proper citizens. In reality, what they are “educated” to be are criminals* (2015/20). All of the cases that we studied show that the amount of violence is outrageous, both between the children but also among children and staff. We found several cases of inadequate staff behavior and uncontrolled supervision of children. Most of them prefer the prison instead of “this forgotten by everybody place” where rules and any type of social behavior, values, and justice become relative terms. In addition, very rarely can you see a functional educational system within the institution. We saw the “school” but it lacked

⁵⁶⁰ Optional Protocol to the Convention against Torture and other Cruel, inhuman Degrading Treatment or Punishment, GA resolution 57/199 of 18 December, 2002, Art. 4(2).

⁵⁶¹ BAEVA, S. *Children Deprived of Liberty in Central and Eastern Europe: Between Legacy and Reform.*, 2014. *op.cit.*, page 85.

“education”. Not only do students not know the subject they are supposed to be studying and which grade they are in, but the majority of them do not know how to write their names properly. *These so called ‘corrective institutions’ become just ‘secure’ places for children to be abused undisturbed by the outside world* (2015/20). It must be underlined that these corrective institutions do not fall under the national deinstitutionalization plan, and therefore will remain open for any child at risk who has no other place to go within the community-based services. This becomes a very possible scenario, since most of the foster care families or day care centers in the community do not have the staff capacity to meet the needs of children who have problems with the law, behavioral difficulties, or have a history of prostitution. By erasing the only state-based care for children under 18 and replacing it with inadequate community-based care we leave a big gap in the state system of protection for “violent” children, victims of violence, or physically and psychologically abused “children thieves”. The only solution provided by the state for them remains punishment and a place in the state prison system. Even though there are no official statistics, BHC said that a large number of adults in prisons come from such type of “corrective” institutions. Thus, when one reads governmental reports that there are fewer children in institutions, one need to remain skeptic of to where these children have actually been transferred. And if they are no longer in protective institutions, have they been just moved to the other side and sent into corrective homes and afterwards into prisons? *Looking at the overall number of institutions where children are kept ‘prisoners’ or the protection systems, one realizes that their number is much more than the official number declared by the state* (2015/20). What should be underlined is that the simple fact of moving them into a different category should not translate into a decrease of their number, since they will remain dependent on the system (with no family, a lack of education, and a criminal dossier) and will still lack adequate support from the state and society.

What is more, children who are in conflict with the law are not recognized as children in risk. According to a report given by the Bulgarian Helsinki Committee in 2014, in Bulgaria there are children who have been deprived freedom for illegal and unjust periods of time⁵⁶²⁵⁶³.

⁵⁶² BAEVA, S. *Children Deprived of Liberty in Central and Eastern Europe: Between Legacy and Reform.*, 2014. *op.cit.*

⁵⁶³ This book is the result of a two-year project and is produced with the financial support of the specific programme Fundamental Rights and Citizenship for the period 2007 – 2013, as part of the General Programme “Fundamental Rights and Justice” at the Directorate-General for Justice of the European Commission .

Instead of being the last possible measure as is mentioned in the UN Convention of Child Protection, the deprivation of liberty is very often used as a solution to children who have no parental control or those who have done any socially unacceptable act (for instance street begging or prostitution). The Bulgarian Helsinki Committee estimates that children deprived of liberty suffer from severe discrimination, violence, and systematic violation of their social, economic and civil rights. The report does a two year overview of five countries including Bulgaria, Hungary, Romania, and Poland, looking precisely at the legal heritage in the sphere of child punishment and protection left from the socialist regime and its new forms under European regulations. It includes closed institutions that are part of the penal justice system, the fight against antisocial behavior, and corrective institutions. The main representative of the Bulgarian Helsinki Committee, K.K., concluded that the *lack of definitions for antisocial actions leads to unfair deprivation of liberty* (2015/20). In Bulgaria the term “antisocial act” includes school absences, fleeing home, arrogance, inability to adapt to institutional life, prostitution, or even forces sexual exploitation. The justice system of the state seeks responsibility for the actions provided by children, which if done by adults would not be considered illegal. Such inconsistency is severely discordant with international standards for child justice, where it is explicitly mentioned that the legal state framework should consider that any act for which an adult is not considered guilty, a child should not be either. *The rights of children during the administrative penal procedures are not respected. The guarantees given by the Bulgarian constitution for free legal support and fast forward trial for children are rarely respected*⁵⁶⁴. Additionally, there are numerous signs of maltreatment, violence, and child abuse after their entrance in a corrective institution. *Among some of the most striking cases are the ones in institutions for children deprived of parental care, police offices for detention of minors and internment areas. Most of the children however refuse to describe the atrocities through which they live, because “once we leave the institutions everything starts all over again* (2015/20) explains J. Ivanova, a researcher from the program Evaluation and Research. From the numerous interviews given by BHC and other NGOs, most of these violations are well known to the directors of the institutions, and yet no action is taken against the staff and in protection of the children. Second, from the rare statistics that we see and from our own investigation, it is obvious that the population targeted in these institutions is

⁵⁶⁴ BAEVA, S. *Children Deprived of Liberty in Central and Eastern Europe: Between Legacy and Reform*. 2014. *op.cit.*

predominantly coming from the most marginalized and discriminated groups in society, such as children with intellectual and physical disabilities, children from socially deprived backgrounds, children from minority backgrounds, and children who are already interned in another type of institution – *55% of the deprived are Roma, 20% Bulgarians, and the rest from the Turkish minority* (2015/20). Third, the corrective institutions are usually in very bad physical condition, lacking proper ventilation, electricity, hot water, and toilets. Due to the lack of special places for condemned children, some of them are enclosed together with adults. Due to a lack of specialized places for girls, all minor girls are welcomed in a separate part of the prison for adult women in Sliven.

The most common reason for detention is robbery, rarely have the children committed other serious crimes such as rape or murder. Instead of looking at the reasons for them to rob, the state prefers to enclose and isolate the criminals who in fact are nothing more than victims. Coming from poor and aggressive families, most of these boys and girls have been beaten, raped, and kept hungry since their birth. It is ironic to punish them for the crimes of their parents or absent family support and completely deny them their rights to home, food and, basic living conditions. *Being aggressive is the only model of behaviour that they have seen and therefore the only one they can reproduce* as the psychologist of the Sliven's prison described in an interview. *In the corrective institution a lot of the children speak to specialists about their state of mind for the first time and meet people interested in hearing their pain (...); however, their loss is irreplaceable - they lose the freedom to be a child and the freedom of childhood*⁵⁶⁵. By sharing or delegating the responsibility of care, education, and provision of basic rights to the state, parents are excluded from the social system. Instead of being even more vigilant, parents of children accused of crimes have abdicated their responsibilities – *60% of the boys in the internment center have never been visited by their parents (despite the regulated permitted visits every weekend)*⁵⁶⁶. During the arrest, the isolation of the child is even stronger and contact with the family becomes harder and follows specific security measures. The non interest of the state vis-à-vis the parents could be pointed out as one of the major reasons for the initial degradation of the child, since any preventive measures for

⁵⁶⁵ TOMOVA, N. *Children behind the bars*. E-vestnik. 27th of August, 2008, Consulted on Jan.2010 <http://e-vestnik.bg/4500/деца-зад-решетките/>

⁵⁶⁶ KUKOVA, S. Fundamental Rights situation of persons with mental health problems and persons with intellectual disabilities: desk report Bulgaria. *op.cit.*

support and not punishment would have eradicated the uncertain grounds on which children live from very early age.

In addition, what should not be neglected is that in part of the enclosed institutions there is no access to education, or if there is one the level is so basic that children cannot integrate back into public school after they have been in the institution. Furthermore, the state agency of child protection does not have the capacity (neither financial nor human) to check the conditions in which children are kept prisoners with no permanent medical support, no access to education, no sanitary conditions, or adequate individual evaluation and treatment. Therefore, the state has the means to repress but not to support. Children who are victims turn into criminals, and the line between the system that protects and the one that punishes is almost invisible. Children who are in conflict with the law are not recognized as children at risk, despite the fact that very often they have been victims of violence.

Ideas, Interests and Institutions: The Conflicts

Since deinstitutionalization reform is still in progress, this research emphasizes ongoing challenges, which need to be taken into consideration when applying the reform. In order to separate the roles and define the responsibility of child protection, we decided to analyze the major groups of actors who should be transformed in order to make the reform work: state institutions, local governance through municipalities, and non-governmental institutions. This chapter depicted their separate challenges and strategies for accomplishment of the set reform of closure of all child care institutions by 2025. Our findings prove that public policy instruments do have the capacity to change the course of public policies as much as institutions, because in relation to child protection there is a great change in the hierarchy of actors (through decentralization of responsibilities), in the prioritization of interests (state versus family care), and in the definition of the problem (deinstitutionalization considered as the only strategy) that will dominate and guide public policy and public opinion.

		EXTERNAL ACTORS		INTERNAL ACTORS		
3I's	EU	IO	STATE	REGIONAL	NGO'S	
CONFLICTS	<ul style="list-style-type: none"> Investment in institutional infrastructure in conflict with the national vision for deinstitutionalization No evaluation of the applied projects Excessive bureaucracy in relation to social work Severe bureaucratic accountability of the cost and expenses of SF Lack of flexibility in EU projects No evaluation and accountability of the cumulative effect of the deinstitutionalization reform over child wellbeing; - lack of specific independent monitoring authorities for each country The results of the reform contradict strategic goals drafted by commission and by member states (Horizon 2020) No comparable data on children in institutions as of 2017 Decisions move forwards with no institutional decision The mechanic transfer of social practices does not work - no common platform for exchange of the downfalls of the models that has been already adapted in other EU member states (no procedure established to link national complaints related to the deinstitutionalization reform and the commission or the EEG) 	<ul style="list-style-type: none"> Focus on alternative models not on institutional care; Copy/paste approach of care to a different setting Focus on communication campaigns for the positive image of the EU No coordinated efforts on the field Statistics of number of children differentiate largely among the IO's 	<ul style="list-style-type: none"> Lack of coordination among the different actors Concentration on the creation of the alternative centers and no focus on prevention Access to public information is not easy- numbers of children in institutions are not comparable among the internal actors General misunderstanding of the reform among professionals Fast move of foster care families from State Direction of Social Support to the foster care teams of municipalities Lack of clear state definition of the role of the NGO's as part of the decentralization of service delivery / no centralized list of the children and their individual assessment The system could not match what type of family would fit the best the interests of the children Double foster care provision from both state and municipalities and thus inequality of foster care across the country The state budget for the social service is not enough for the continuation of the newly established services 	<ul style="list-style-type: none"> Not enough capacity and resources to prioritize services; no legal mechanisms of control; discrepancy among municipalities Lack of evaluation of the effect of the new community based centers Long term maintenance of the structure is not guaranteed The cooperation between NGO's and Municipalities is still very limited because of the different principles of financing Not enough choice of providers subjected to the limited financial resources (the providers are not selected on the basis of quality but availability) The control over the distribution of resources is not well effectuated and there is increased danger of corruption Lack of clear strategies on how to decentralize services Lack of human resources trained with the specificities of the institutional management 	<ul style="list-style-type: none"> Lack of enough freedom and resources Lack of cooperation between the NGO's which are partners of the municipalities, suppliers of services, evaluators and trainers Lack of monitoring of the new services Monopole of bigger NGO's Their financial budget is not dependent on the beneficiaries of the projects (their interest is to convince the financial institution and not the beneficiary) 	

Figure 37 - Ideas, Instruments and Institutions Part 2 Challenges (the case of Bulgaria)

The present moment encompasses in itself some positive preconditions for the successful implementation of deinstitutionalization reform. In comparison to the Soviet era, the liberal state is more willing to subsidize and facilitate the work of other non-governmental actors and does not have an interest in limiting the power of the private or the public sector and thus decentralize responsibilities (NGOs, community associations, trade unions). The purpose of this chapter was to analyze the extent to which social change and Europeanization are linked in the Bulgarian context of childcare. Our empirical research proved that changes in social attitude induced by Europeanization happen even slower than legal and institutional transformations. It also showed that through the process of Europeanization there was an infusion of supranational actors whose presence changed the dynamics between national actors and influenced power relations through the integration of Western models of child care. Financial factors are at the core of this conflict in the majority of cases. The transfer of financial aid through the European structural funds turned out to be conditional and to a great extent discouraged local actors from tapping into Bulgarian know-how. The correct investment of those funds is challenged to a great extent by the incompetency of the newly emerged civil actors and the rigidity of the bureaucratic state administration. The more the dialogue between administration and civil society is unclear, the more there is a danger that reform will remain simply shallow, transferring the old status quo and the culture of institutionalism into the newly constructed pro-European institutions for alternative care. The position of non-governmental organizations and their accountability is still not determined vis-à-vis the state which on its side suffers from administrative difficulties in coordinating its missions effectively.

The deinstitutionalization reform foreshadows a social transformation in institutions from several sectors (including health, social care, housing, education, employment, transport, leisure, criminal justice, and social security) as part of a long and dynamic transitional process. The concept of social inclusion requires all those different actors⁵⁶⁷, which may be new to the existing policy framework, to be included in the process with a high level of coordination in order for both providers and beneficiaries to be satisfied.⁵⁶⁸

⁵⁶⁷ "Organizations of service users and their families, non-governmental organizations wanting to be involved in providing new models of service, public authorities who have not hitherto played a role in helping their disabled citizens" (EU Report, Knapp.)

⁵⁶⁸ CLEAVER, F. Institutions, agency and the limitations of participatory approaches to development. In COOKE, B., KOTHARI, U., *Participation: The New Tyranny?* p.36-55, London: Zed Books, 2001.

The identification and analysis of both internal and external obstacles facing the deinstitutionalization reform proved that time determines the impact of path dependency and the extent to which the operating actors are likely to change their attitude and adjust European child protection strategies to the Bulgarian context. In the next chapter we will analyze the extent to which how different the challenges of deinstitutionalization and decentralization are in the British context.

VIII - The UK know-how and its Implementation in Bulgaria

The central questions of this thesis addressed the external and internal factors that stimulate political changes in the sphere of childcare prior and throughout the European Union membership. The previous chapters illustrated the historical background on which the on-going development of the Bulgarian deinstitutionalization reform occurs while demonstrating the dynamics between the normative setting of the reform and the practical implementation of it throughout the prism of key players on both European and Bulgarian key players. The following and last chapter of our analysis aims to check how does the same reform develops in an older active EU member state that has a long lasting history of liberalism, broader network of decentralized non-governmental services and pioneer role in the implementation of the deinstitutionalization principles across new member states. By doing so we will aim to see how the evaluation of the reform differs according to the development and type of the welfare state and the extent to which its success depends on the Union guidance or is path dependent on the cultural and territorial context. In the first part we will examine what are the bases of the British child welfare and how political ideologies of the Left and Right wing governments twisted the drivers behind the changes in child protection policies. The UK case illustrates that state approaches towards child welfare vary from a tradition of family privacy to the need of state intervention even in states where there was no heritage of Soviet principles. Further the UK case exemplifies the impact of the marketization of the child services in a longer period of time and the unexpected challenges of community based services.

Taking into consideration the different historical and institutional backgrounds of the two countries, the comparison between UK and Bulgaria will be regarded only in terms of the impact that EU guidelines for child deinstitutionalization have over two equal member states. We chose the UK also because of its great impact on the creation of the Bulgarian methodology for the closure of state-care homes. Influential British NGOs have brought experts and agents working in the field, and have accompanied the Bulgarian stakeholders in the past ten years and previous to the accession (For instance For Our Children Foundation). What is more the organization that has led to the creation of the common *EU Guidance for*

the Transition from Institutional to Community-based Care together with the European Expert Group on the Transition from Institutional to Community-based Care is also founded and driven by British experts. Chapter VIII puts forward the challenges across the British system of childcare comparing them with the ongoing political and social transformation of Bulgarian institutional state centered care for children exposed previously in the thesis.

As of 2011 the number of family units in the UK reached 17.9 million and marked an increase of 0.7 million couples in comparison to 2001. Official statistics show that there are 18% more children in 2011 in comparison to 2001 (if on average one mother had 1.56 children in 2001, by 2011 one mother had 1.84 children a decade later)⁵⁶⁹. *The reasons behind this demographic boom are hidden within the successful development of fertility treatments among women between 30 and 35 years old and the increased number of second generations immigrants who give birth (1/4/ of the new borns have mothers with an immigrant status).* In 2014 the social expenditures in the UK were 15% of the GDP and the expenses for children and families were equal to 16, 4 milliard pounds (the total social expenditures were 112, 4 milliard pounds). In the country there are different possible measures through which the state supports parents. Single parents (0.4% of the new couples in 2011) receive social security contributions and benefits equal to 20.70 pounds and 25% council tax benefit from the municipality⁵⁷⁰. In the cases they are eligible for *income support* lonely parents benefit from free medications, dental services, optician services and free hospitality checkups⁵⁷¹. Low income families could also benefit from maternity grant provided by the Sure Start Maternity Grant equal to 500 pounds per family. The children of parents who are eligible for *income support* between seven and sixteen years of age have access to free food supply, Income-based Jobseeker's Allowance and Child Tax Credit⁵⁷². Education is free of charge from five to eighteen years old but the attendance is not mandatory⁵⁷³⁵⁷⁴.

⁵⁶⁹ Project: Vision for Family Policies, Parents Opinion, The Experiences Of Europe And The Point Of View Of The Psychoanalysis. Implemented by the unity Child and Space, National Network for research of the population to the Bulgarian Academy of Science with the financial contribution of European Economic Space

⁵⁷⁰ *Ibid.*

⁵⁷¹ Social Security Contributions And Benefits Act 1992, art.56 Child Special Allowance

⁵⁷² Universal Infant Free School Meals' Scheme

⁵⁷³ Education Act 1996 of the Parliament of the United Kingdom It led to the establishment of special local authorities, who for example would identify children with special educational needs

A - British state framework of child protection – from Social Democracy to Neoliberalism

Using Esping-Andersen's welfare typologies, the comparison of this research aims to analyze how welfare regimes differ in relation to child protection policies. The UK policies and practice in relation to child care within the (neo) liberal welfare type strongly influenced the post 1989 transformations in Bulgaria so with this chapter we aim to explain the British child welfare and its evolution in regard to protection of children deprived of parental care. After the end of the Second World War the traditional Conservative Party accepted a social democratic vision, which involves greater degree of *decommodification* or less dependence of individuals and families social standards on market participation⁵⁷⁵. *The market is rejected as the sole arbiter of justice, the public is favored over the private sphere and there is a focus on egalitarianism and the need to eliminate the causes of social inequities by state intervention, particularly by the creation of the welfare state*⁵⁷⁶. Since the 1950's Labour and Conservative governments alternated with no severe discrepancy in the way child policies evolved *and where modern social work developed initially providing separate services for children, mentally ill people and elderly*⁵⁷⁷. Thereafter in the 1960's the country went over an overview of its departmental services and considered some overlapping or gaps in services provision. As one of the major drivers behind the political judgments for change at that period, the Seebohm Report (1968) recommends major changes at local and national level of the administration so that social workers receive greater resources and autonomy⁵⁷⁸. Up until the world economic crisis in 1973 social work with children and their families was guided by the perception that prevention and individual work are the key tools of treatment and protection of families in need. According to Ferguson, the economic and petroleum crisis provoked three main changes: mass unemployment, cuts of public spending and the end of the political consensus between the two main political parties in the UK regarding the welfare provision of

⁵⁷⁴ Complete national overview - United Kingdom (England)". European Agency for Special Needs and Inclusive Education. Retrieved 6 September 2014.

⁵⁷⁵ ESPING-ANDERSEN, G. *Three worlds of Welfare Capitalism*. Princeton, NJ: Princeton University Press, 1990.

⁵⁷⁶ ROGOWSKI, S. From child welfare to child protection/safeguarding: a critical practitioner's view of changing conceptions, policies and practice. *Practice: Social Work in Action*, 2015, Vol. 27, N 2, p.97-112

⁵⁷⁷ *Ibid*, p.99

⁵⁷⁸ The Seebohm report was published in July 1968, UK Prime Minister was Harold Wilson, <https://navigator.health.org.uk/content/seebohm-report-was-published-july-1968-0>

services⁵⁷⁹. Alike other western countries unemployment rates in Britain reached the historic number of 1 million in 1979⁵⁸⁰. The welfare state regime was also destabilized by severe cuts in the public spending, which *was reduced by 9.5 % in real times after allowing for inflations in real time between 1976 and 1978 and then under the Conservative Government huge inflation provoked the closure of large numbers of schools and hospitals*. With the rise of the new right and the election of Margaret Thatcher in 1979, social policies officially transformed from preventive and inclusive to *targeted services to particular client groups*⁵⁸¹, *gradually implementing curbs on the power of trade union and privatization of nationalized industries*⁵⁸². The social democratic consensus that existed beforehand between left and right parties became increasingly shaken. Central understanding to that consensus was the necessity of state intervention in the provision social welfare as described by the ideology of Keynesianism. The left, *including feminists and anti-racists, were concerned that Social Services Departments were ineffective, distant and oppressive, leaving the user powerless and without a voice*⁵⁸³. The right or the New Right as it is referred by the economist Milton Freedman advocated *free markets and free trade as the best way to achieve human well-being*⁵⁸⁴ and thus *Keynesianism was replaced by monetarism or the prototype of present day neo-liberalism*⁵⁸⁵. The triggers of the new right welfare state could be summarized with three main propositions – *marketization, consumerization and managerialization* of the public sector⁵⁸⁶. Despite the financial crisis in 2008, the Great Recession and the numerous critics of the impact of neoliberalism on the most vulnerable once acknowledged in the Munro Review of child protection in 2011, at the moment there is no alternative to the neoliberal approach. Thus, our historical overview shows that since the 1970's social services in the UK turned back to the free market ideologies that were discredited after the Great Depression in the 1930's and were highly influenced by the degree of implication of neo-liberal ideas, political upheavals of right wing parties and their degree of decomodification. When welfare

⁵⁷⁹ FERGUSON, H. *Child Protection Practice*. Basingstoke: Palgrave Macmillan, 2011.

⁵⁸⁰ *Ibid.*, p. 23

⁵⁸¹ *Ibid.*, p. 23

⁵⁸² ROGOWSKI, S. *op.cit.*

⁵⁸³ *Ibid.*, p.100

⁵⁸⁴ HARVEY, D. *A brief history of Neo-liberalism*. Oxford: Oxford University Press, 2005.

⁵⁸⁵ FERGUSON, *op.cit.*

⁵⁸⁶ ROGOWSKI, S. *op.cit.*

typologies are investigated in relation to childcare, Esping-Anderson demonstrates that welfare regimes differ in the extent to which they are dependent on the market and the degree of private provision and stratification.

1) **The Postcode lottery policy**

In England the national government has a responsibility to determine the legislative framework, the main policy priorities, and funding arrangements for health care and social benefits. The provision of housing, education and social services depends on local government, which means that they are means-tested and paid differently depending on the local government councils. Researchers have evaluated this policy as *the postcode lottery – in which the kind of services a person receives (sometimes whether they even receive services at all) depends not on their needs but on where they live*⁵⁸⁷. Such type of experience strengthens even more the importance of national governments in establishing mechanisms through which they can assure that rights of children who are under the system of social protection have all been equally defended. This can be assured only if there are instruments for coordination, communication, and control despite the fact that through decentralization the service will be planned and provisioned by local or regional institutions. Unlike the common public perception among eastern European countries that link liberal governance with complete decentralization of power, in the UK in terms of child protection the non-governmental sector plays a statutory service. Since the major development of local authority child protection departments in 1948 there is a very strong public provision for services of children and vulnerable families and the system of child protection remains to a great extent very state-centered and is publicly financed but also publicly provided in the UK. Since the establishment of National Health Service (NHS) in 1948, residential institutions for handicapped children were taken from local authorities and independent providers and put under its' control.

2) **From child welfare to child protection**

Maltreatment of children in the UK has been a government issue since the late nineteenth century, when in 1889 the *Prevention of Cruelty to Children Act* gave power to

⁵⁸⁷ BEADLE-BROWN, J. KOZMA, A. *Deinstitutionalization and community living – outcomes and costs: report of a European Study*. Vol. 3. Country Reports. Canterbury: Tizard Centre, University of Kent, 2007

*social workers to bring parents before the courts, largely because of neglect*⁵⁸⁸ The social inspectors as well as precursors created the assumption that in order to decrease maltreatment among children, *parents were increasingly approached as individuals who could be reformed and the concept of 'casework' was born, eventually becoming working with parents and children on a therapeutic basis*⁵⁸⁹. Historically, policies of child protection changed together with the conception of child maltreatment. In the 1960's the term used in policy and practice was 'child cruelty' referring to children who received serious physical abuse and thus *doctors and social workers were the once with the responsibility to identify the issue (...) and work therapeutically with the family*⁵⁹⁰. In the 1970's however, there was an increased disapproval against the established welfarism in child care. Public negative opinion increased with the tragic death of Maria Colwell who was killed by her stepfather in 1973. The investigation of this case showed that the involvement of doctors, health visitors and social workers is crucial but not enough and thus by 1976 the Social Services Department (working as the child care agency) included the police as another vital agent. This change was considered crucial to the organization of the system and the model of care moved from *medico-social model to socio-legal model with the emphasis on investigating, assessing and examining the evidence*⁵⁹¹.

By the 1980's 'child abuse' became the generic term to cover physical, sexual and emotional abuse and neglect until 1990's when it was superseded by 'child protection'⁵⁹². According to Ferguson, social work practice passed through the stage of inspection and support to parents (until the end of the Second World War) to a much more *authoritarian, punitive approach*⁵⁹³. Within the spectrum of the neoliberal view state intervention should be seen as the last possible resort, which automatically puts the responsibility and treatment in case of abuse in the hands of parents. These changes in the practice of social workers mirrored the transition from social democratic consensus (associated to the post-war decades) to a neoliberal consensus. *There is no doubt about the overbearing influence of neoliberalism – instead of the state, through the government of the day, playing a key role in ensuring the*

⁵⁸⁸ FERGUSON, 2011, *op.cit.*

⁵⁸⁹ ROGOWSKI, S. From child welfare to child protection/safeguarding: a critical practitioner's view of changing conceptions, policies and practice. *Practice: Social Work in Action*, 2015, Vol. 27, N 2, p.97-112

⁵⁹⁰ *Op.cit.* p.,101

⁵⁹¹ *Ibid.*

⁵⁹² *Ibid.*

⁵⁹³ FERGUSON, 2011 *op.cit.*

basic needs of citizens , the belief in the free market and values of individualism and self-responsibility are now to the fore⁵⁹⁴. Since the 1980's in the UK, one observes conflict in the role of the state in the provision of child protection – on the one hand authorities avoid direct intervention in the private space of families and respect their autonomy, on the other hand child protection becomes more and more of a public issue and the state recognizes the necessity to act. *British social policy is based on a tradition of family privacy. (...) there is a dominant view that normal families would not want or need the state intervention which should rather be reserved for the feckless, deviant or inadequate*⁵⁹⁵. This tension was illustrated with the dramatic tragedies in Cleveland, Rochdale and Orkney where pediatricians diagnosed children as sexually abused and children were taken forcefully from their parents and given to foster care families. When foster care parents were not enough children were put in a section of the local public hospital. Inquiries of the cases in Cleveland (Butler-Sloss report), however proved that the diagnoses were incorrect and by 1988, 92 out 112 of the children were brought back to their biological parents⁵⁹⁶. Social workers were seen *as being over-zealous in removing children because of allegations of sexual abuse and not respecting the rights of the parents*⁵⁹⁷. The Cleveland child abuse scandal, as well as the prevailing criticism towards social workers, led to the implementation of the Children Act 1989, which sought to take into larger consideration the role of the parents and the partnership between the social workers and legal agents in order to achieve greater individual assessment. A year earlier in 1988 the Department of Health published *Protecting Children. A Guide for Social Workers undertaking a Comprehensive Assessment*. Known as the Orange Book this guide contained 167 questions and was the first official guideline for comprehensive assessments of cases of child protection⁵⁹⁸. Importantly, for the first time the assessment included the *risk of future significant harm* to children and thus suggested that social workers could put in place preventive measures in situations of family history of aggression or abuse⁵⁹⁹. The *Working*

⁵⁹⁴ ROGOWSKI, *op.cit.*

⁵⁹⁵ CANNAN, C.,WARREN, C. *Social Action with Children and Families*, London: Routledge,1997, page 2

⁵⁹⁶ PRAGNALL, C. (December 13, 2014). "Torn from their mothers' arms What are social workers for? Charles Pragnell considers some disturbing cases". The Independent. Retrieved July 17, 2014.

⁵⁹⁷ Secretary of State for Social Services. Report of the Inquiry into the Care and Supervision provided in relation to Maria Coldwell. 1974. London: HMSE

⁵⁹⁸ FOWLER, J. A practitioner's tool for child protection and the assessment of parents, London: Jessica Kingsley, 2013.

⁵⁹⁹ *Op. cit.* p.11

Together law published under the Children Act in 1991 by the Department of Health and in conjunction with the Home Office and the Department of Education marks the will of the government to seek new ways of child management that includes the inclusion of a larger scope of professionals in the field of child care. In 1999 the *Working Together under children act 1989* was replaced by *Working Together to Safeguard Children* inter-agency guide where the government (Department of Education, Home Office and Department of Health) voted that agents in *health, education, police, social services, probation and others involved in child protection to work together to promote children's welfare and protect them from abuse and neglect*⁶⁰⁰. This legal step was combined with the fact that in December 1991, the United Kingdom ratified the United Nation Convention on the Rights of the Child where *Article 19 requires that legislative, social and educational measures should be taken to protect children from any form of abuse whilst in the care of their parents and any other person, and appropriate systems should be in place to investigate and report on issues of child protection*⁶⁰¹.

Despite that the Children Act of 1989 considered families as partners, the actual implementation of policies in the 1990's and early 2000's demonstrated a retreat from the personal face to face practice and became severely bureaucratic⁶⁰². An important role in the way the practice of social workers evolved plays the introduction of new technologies and the electronic computer based systems used to report cases. *The introduction of new information and communication technologies involved a shift from a narrative to a database way of thinking and operating, resulting in social work operating less on the terrain of the 'social' and more on the terrain of the 'informational'*.⁶⁰³ As a result, official assessments could not trace what is the need of children and their families and how it should be met but on managing the risk and police the socially deprived families. This policy has been described by Featherstone, White and Morris⁶⁰⁴ as the *muscular authoritarianism*, which involves *parents simply being told to change their behaviors and lifestyles or face the prospect of having*

⁶⁰⁰ *Op.cit.* p.12

⁶⁰¹ *Op. cit.* p.12

⁶⁰² PARTON, N. Changes in the form of Knowledge in Social Work: from the 'Social' to the 'Informational'. *British Journal of Social Work*, 2008, Vol. 28 (2): p.253-268.

⁶⁰³ ROGOWSKI, *op.cit.* p.103

⁶⁰⁴ FEATHERSTONE, B., MORRIS, K., and WHITE, S. *Re-imagining Child Protection*. 2014, Bristol: Policy Press

children removed for adoption. The framework of this policy was the neo-liberal imperative that people, including children and families, *are self-responsible and, if for any reason they cannot be, they have to face the consequences*⁶⁰⁵. The balance between state authority and family independence is hard to find⁶⁰⁶ and our analysis shows that there is a discrepancy between the way social workers and critics analyze the reform and the way it is presented and explained by politicians. From the point of view of social workers there is a concern that the consequences of the neo-liberal imperative for the children could be quite drastic and not justified and what is more that the increased bureaucracy and pressure over families reduces the resources for prevention and support to the family. On the other hand, politicians presented child protection as one of their major priorities and both Tony Blair⁶⁰⁷ and Gordon Brown set as policy priority to tackle child poverty: *The Government will do all it can to support parents but in turn it is right that parents fulfill their responsibilities too (HM Treasury 2001, pp.iii-iv), and this included doing their part to end the scourge of Britain's high rate of worklessness*⁶⁰⁸. *UK's government strategic unit points to the very strong evidence on the cost effectiveness of targeted investment in children*⁶⁰⁹. Such political statements could lead to the assumption that *New Labour has put children at the center of a social investment strategy and of social policy making*⁶¹⁰. However, one could ask to what extent children took a central instrumental role in political discourses in order to achieve economic benefits instead of greater social support to the most vulnerable once.

3) The tragic deaths of Victoria Climbié and Peter Connolly

There are two big cases that marked the evolution of these policies in the 2000's- the Victoria Climbié and Peter Connolly tragic deaths. Despite the numerous signals and the interaction of social services with their biological and foster care parents, both children deaths could not be prevented by the system and they died from their injuries (tied up, burned,

⁶⁰⁵ *Ibid.*

⁶⁰⁶ OTWAY, O. Social Work with children and families from child welfare to child protection. In *Social Theory, Social Change, Social Work*, edited by N. Parton, 152-171. London: Routledge

⁶⁰⁷ BLAIR, T. *Children are the Government's top priority because they are 100% of our future*, Labour Conference Speech, 1999, p.16

⁶⁰⁸ CHURCHILL, H., LEWIS. (ed.) *Children, Changing Families and Welfare States. op.cit.* p.52

⁶⁰⁹ *Ibid.*

⁶¹⁰ HENDRICK, 2005, p.8

beaten, starving). The case of Victoria was investigated in the Laming Inquiry⁶¹¹ and highlighted the inability of agencies to work together : *the complete breakdown in the multi-agency approach to child protection and the blinding incompetence of the people meant to protect the child- social service departments (Haringey, Ealing, Brent and Enfield), three housing departments, two hospitals (Central Middlesex and North Middlesex), two Metropolitan police child protection teams, and a specialist run by the National Society for the Prevention of Cruelty to Children*⁶¹². As a result of the Laming inquiry the Children Act was created and became the official administrative tool of children's welfare and education under the statutory authority of the local Directors of Children's Services. The purpose of this Act was to give boundaries and help for local authorities and/or other entities to better regulate official intervention in the interests of children⁶¹³.

Unfortunately, despite the recommendations of Lord Laming, another baby, Peter Connolly, died out of neglect and abuse by his caregivers several years later in 2009. In June 2010, the Secretary of State of Education asked Eileen Munro, Professor of Social Policy at London School of Economics and Political Sciences, to undertake another review of the state of child protection policies across England. The coalition government that took power in May 2010 had for a mission to evaluate the impact of the regulatory systems and check the extent to which the system remains child-centered. In order to understand the logic of the review and its methodology we got into contact with E. Munro and interviewed her personally in 2014. In addition, Mrs. Munro was asked to review the child protection reform by the incoming government because there was a general public concern that child mortality remains as high as it was twenty years ago and therefore something had to change in the existing system. Since that was one in a series of reviews she decided to use a different methodology and applied a systems approach that would reveal why previous reforms did not have the same effect and what kind of effect they had. The system approach analysis includes a new vision where one considers the social system as an open system where there is no linear causality in the way things will interact and therefore a system where unintended problems can arise: *it's a living dynamic rather than something that could be reduced to static child assessment on a*

⁶¹¹ Lord Laming published *The Protection of Children in England: A Progress Report* on 12 March 2009. The report, which was warmly welcomed by children's services and social work leaders, made 58 recommendations.

⁶¹² LAMING, L. *The Victoria Climbié Inquiry*. 2003, London: Stationary Office.

⁶¹³ *Ibid.*

sheet of paper (33/2014). This new system was supposed to contradict the pre-existing reasoning in the social sphere that was based on results and not as much on the process. Until then, if a child died and the social worker declared that he or she followed the procedure that was enough for the defense and the inspection process. The decision was based on computer records rather than whether the children were dead or alive. *In this country whenever a child dies there is a huge public echo and as a result the system becomes especially punitive against professionals, which leads towards more recommendations and therefore procedures and rules to follow* (33/2014). According to Munro this practice destroys the flexibility needed in each individual case and family. After the conservative government in 1979 there was a great demand for public transparency in areas where there was previously a lot of professional privacy. Since then the government focused on process issues rather than quality issues: *filling a particular form following a particular time scale, rather than whether the form contained anything sensible for the particular case...and so overtime the system prioritized the management of the process rather than engaging the family and the interest of the child* (33/2014). Many people grew up in a culture where they were taught that meeting a time schedule is more important than anything. The report also very correctly foreshadows the risk of maltreatment if the government does not plan further investments in support of families who need additional help- described by experts as the *heavy end of child protection* (33/2014). Munro's work on the English child protection system from 2005 stipulates that government policies in the last decades have been shaped by the negative outcomes of person centered perspective.

The Munro report demonstrated that despite the obvious failures of the system, on theory on local authority level the structure allows for good coordination and monitoring:

*The landscape of service provision in England is currently that government agencies select and fund places in residential care, the great majority of which are provided by independent agencies. These agencies may be large national or regional organizations, but they may be also individual homes set up by interested persons*⁶¹⁴. The quality among the different local agencies varies incredibly despite the set by the government national minimum standards. Each authority has a local save guarding children board led by people from

⁶¹⁴ MUNRO. E. *The Munro Review of Child Protection Final Report. A child centred system*. Department of Education, May 2011

different domains including police officers, social workers, education agents and others who have the responsibility to coordinate and ensure that all entities work together. Each member has individual responsibility but they have to inform the others on how they intervene to protect children. Thus it becomes extremely hard for the system to evaluate and follow the quality of care provided to children by the multitude of providers which leads to some severe gaps in the detection of urgent cases.

Munro's research on child abuse inquiry reports over a twenty year period in Britain proved *that in 75% of the cases human error was cited as a major factor in the adverse outcomes*. This fact according to her led to enormous public pressure to increase monitoring of workers and the implementation of rules, procedures tools and performance indicators. However, despite these new policy measures offered to improve the quality of practice there were further death incidences with infants. According to Munro's study the negative tendencies and failure of the system was predominantly due *to the over protection measures and growth in the bureaucratization of child care that encourages paper work instead of peoples work* (2014/33). The review proved that social workers did not have enough time to spend with children due to their administrative obligations. Further it showed that the focus of the ongoing policy of child protection was only on assessment of children and their families by different agencies rather than targeted respectful to the parents provision of services where the central focus is the interest of the child. Another conclusion that we identified was the danger of the strict administrative procedures to transform the system into one where the child needs to follow the system and not one where the system individually assists the family situation of the child and his/hers needs.

B - Re-institutionalization of abandoned children in the UK

As in other EU member states, the peak of the residential care in England was around the 1970's when *local authorities accommodated around 40,000 children, which accounted for approximately 40% of all placements for looked after children*⁶¹⁵. Since then the

⁶¹⁵ NAREY, M. Residential Care in England. Independent Review of Children Residential Care. Report to the Education Secretary July, 2016 Available at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/534560/Residential-Care-in-England-Sir-Martin-Narey-July-2016.pdf

government got into multiple programs aiming to decrease the proportion of children in residential care. In 2015 the estimated number of residents *accounted for 8,320 which is approximately 12% of the overall population spread among 1,795 active children homes- which is 41 more than in 2014*. The reasons behind the abandonment vary but one cannot ignore the four recurrent *primary* reasons for them quitting the family environment: handicap – 62% of 8,320 had clinically significant mental health difficulties; violence – 74% were reported to have been violent or aggressive in the past six months⁶¹⁶, abuse - accounting for 45 % of the cases and family dysfunction⁶¹⁷. Previous governmental reports led by the Department of Health⁶¹⁸ in 1992 and The House of Commons in 1997 conclude similar challenges and issues related to the existing system in England including *an increasing number of difficult children and adequate staff preparation, damaging succession of placements with 1/3 of the children not receiving an education*⁶¹⁹.

Despite these negative statistics, what strikes the attention when one starts to analyze residential care in the UK is the interesting link that has been made by some analysts on the field concerning the positive link between foster and residential care: *The evidence show that residential care should be viewed not as the end of the journey , but having the potential to act as a bridge to a different fostering experience, not least by blurring the boundaries between fostering and residential care*⁶²⁰. One of the biggest challenges with fostering recognized by the government is very similar to what we have identified in Bulgaria and is related to the chronic need for competent staff that can resist such challenging adolescents. On the one hand, the qualifications of personnel have not being adequately assigned to the needs of the children needing to be fostered. On the other hand, private providers of care seem to abuse the system and profit on the back of volunteering organizations:

In 2014-15, eight commercial fostering agencies made around £41m profit between them from providing foster placements to local authorities. This is pure profit. It's after allowances for foster careers, staffing costs and support services. The fact that £41m of public

⁶¹⁶ BODDY, J. A review of research for the Care Inquiry Understanding permanence for looked after children: a review of research. *Care Inquiry*, 2013.

⁶¹⁷ *Ibid.*

⁶¹⁸ DEPARTMENT OF HEALTH. Choosing with care: report of the committee of inquiry into selection, development and management of staff in children's homes. 1992.

⁶¹⁹ House of Commons, 19 November 1997 in the Review.

⁶²⁰ NAREY. M. *op.cit.*

*taxpayers' money, allocated to support children in state care, actually ended up in the pockets of some seriously rich capital firms is obscene*⁶²¹.

This example brings on the surface the importance of achieving good financial conditions for foster care parents and thus reassure that they will be able to successfully care for the most challenging individuals. The problem in the English context is related to the uncontrolled mechanisms of finding of local authorities and market competition between private and public providers. Bulgaria is still at the beginning of the implementation of these services but the practice shows that unfortunately the negative practices describes in the UK are already reproduced within the country. The severe financial crisis also led to cuts in the welfare spending not only in the UK but in other EU member states and analysis show that the impact of these financial restraints is mostly visible over children: *Two years after the crisis broke out its impact on the daily lives of millions of families, children and young people is clearly perceptible. Although the impact of the crisis is by no means uniform across the EU, evidence suggests that children and families are being disproportionately affected*⁶²².

Re-institutionalization of abandoned children in the UK stems from the challenge of the liberal state to provide early childhood services for abandoned children. Until 1990, the UK's government did not seem to take into consideration the necessity of developing non-parental childcare. Active political engagement driven by pressures of “*de-familiazation*” could be traced with the election of Blair's government. The expansion of Early Childhood Education and Care (ECEC) in Britain since 1997 appears chimerical or paradoxical within the constraints of the liberal regime and limited social rights expansion⁶²³. However, after the horrifying death of baby Peter⁶²⁴ in 2007, the UK government reported an inability to protect abandoned children from abuse in foster care and showed evidence of decreased quality of health and education provision. After almost ten years of inadequate measures, the shift that

⁶²¹ ELVIN, A. Why do we let fostering agencies profit from caring for vulnerable children. *The Guardian*. January 11, 2016. <https://www.theguardian.com/social-care-network/2016/jan/11/why-let-fostering-agencies-profit-caring-children>

⁶²² EUROCHILD. How the economic and financial crisis is affecting children & young people in Europe based on evidence collected through Eurochild membership. 2011. Available at :www.eurochild.org, consulted on March 7, 2014

⁶²³ WINCOTT, *op.cit.*

⁶²⁴ The Peter Connelly case, also known as the “Baby P” or “Baby Peter” case, and the subsequent dismissal of Haringey Council's director of children's services, fundamentally changed child protection in England

we observe in the UK can be summarized as a drastic increase of state protection and outside of the family care provision:

*The numbers of children who have been taken from their families by social workers and put into state care reached 10,000 in a year and by October 2010 there were more than 85,000 children in care of the state in the UK. For the first time, 900 children were removed from their homes in a single month*⁶²⁵.

The government continued to cut the budget for children in social services and for the period 2010-2017 registered a record number of children in residential care: *The number of looked-after children in England and Wales reached 72,670 in the 12 months to March 2017- marking the biggest annual surge of children in care in seven years*⁶²⁶. What is more, national statistics show that as many as 140,000 vulnerable children at risk of abuse and neglect might not be getting help because *local authorities have been forced to shrink or abandon family support. Council leaders underline that cuts had pushed children's social services to "breaking point", with action only being taken when youngsters were at imminent risk of harm.* Data from the charity Action for Children based on responses from 129 local authorities identified that *in 2015-2016, 184,500 children's needs assessment were closed so no further action as they did not meet the threshold for statutory services*⁶²⁷. Such welfare cuts undoubtedly affect negatively the well-being of children but also show the inability of the system as it is today to provide assistance to parents who have been identified already once. Between 2007 and 2013:

*7,143 birth mothers appeared in 15,645 recurrent care applications concerning 22,790 infants and children*⁶²⁸. What is more, of more than 46,000 mothers with more than one or

⁶²⁵ DOUGHTY, J., JAMES, H. MAHMOOD, S. *Child care and protection. Law and practice.* 2012, Wildy, Simmonds and Hill Publishing

⁶²⁶ BULMAN, M. Record number of children in care as social services reach tipping point. The Independent. Consulted on May 2017, <https://www.independent.co.uk/news/uk/home-news/social-care-crisis-uk-children-figures-per-day-a7995101.html>

⁶²⁷ ACTION FOR CHILDREN. *Revolving Door Part 1: Are Vulnerable Children Being Overlooked?* Available at: <https://www.actionforchildren.org.uk/media/9363/revolving-door-report-final.pdf> (Consulted on May 15, 2016)

⁶²⁸ BROADHURST, K., HARWIN, J. SHAW, M. Capturing the scale and pattern of recurrent care proceedings: initial observations from a feasibility study. *Family law*, August 2004, (Consulted on April 12, 2015), Available at JSTOR

more children in care proceedings, 7,060 were repeat cases — 44% of the repeats cases involved mothers who first had babies as teenagers⁶²⁹.

Most mothers who have already had one of their infants taken away have fewer chances to take care of any other child, and as research proves, they are so ignored from the social system after the child has been removed that *there would be more attention paid to your rehabilitation if you were a criminal*⁶³⁰. Such policies demonstrate that there is no state policy for support to biological parents and very little assistance is provided to vulnerable mothers from disadvantaged backgrounds.

Similarly in Ireland, the European Union's Reviews of Services for Young Children in the European Union concluded that access to provision of services in the early years is not equally available to all and that *children who are most in need of early childhood services are least likely to have access to them*⁶³¹. What is more, a recent governmental report of Children Schools and Family Committee called *The Looked after Children*, raises alarms about the return of children to inadequate mothers, the possibility of leaving them to languish in children's homes, or the potential for them to change more than twenty foster families before the age of thirteen increases drastically the risks of sexual exploitation, homelessness, and criminality. The more abandoned children were reoriented to alternative community-based care the greater the chance that they would stay with no educational qualifications and in an unhealthy environment. As evidence, government statistics show that *49 % of children in care go straight to prison*⁶³². What strikes our attention is the inability of the government to coordinate programs related to childcare and the unclear accountability of the Early Development and Childcare Partnerships⁶³³. In addition, Childcare Partnerships lack the

⁶²⁹ Extract from interviews that Dr Karen Broadhurst, of The University of Manchester, has done with more than 60 birth mothers in five local authority areas for a Nuffield Foundation study

⁶³⁰ BROADHURST, K., HARWIN, J. SHAW, M. Capturing the scale and pattern of recurrent care proceedings: initial observations from a feasibility study. *FAMILY LAW op.cit.*

⁶³¹ HORGAN, D. Childcare in Ireland: Themes and Issues, *Irish Journal of Applied Social Studies*: 2001 Vol. 2: Iss. 3, Article 8

⁶³² INTERDEPARTMENTAL CHILDCARE REVIEW. Delivering for children and families: inter-departmental childcare review Great Britain. Cabinet Office. Strategy Unit. 2012, Cabinet Office, Strategy Unit, Cabinet Office.

⁶³³ *Ibid.*,

capacity deliver the targets set by central governments. *More over the existence of similar but differently named and separately branded initiatives only serves to confuse the picture*⁶³⁴.

These statistics foreshadow three main conclusions to us. First, a massive re-institutionalization of children due to the failure of the system to support the family unit before there is a risk for the deterioration of the quality of child well-being. Second, the increased numbers of children removed from their parents suggest the transformation of the liberal UK state into an over restrictive state, which serves as a corrector (just like Bulgaria did over Communism) of the *failed* parents. Both issues contradict the main principles of the deinstitutionalization reform related to family reunification and child individual assessments. Third, the link between community based care, increased criminality and illiteracy puts into question the delegation of child care services into private providers. Paradoxically, the UK case shows that under budget restrictions and post economic crisis budgetary cuts, private provision of care fails to answer the needs of children who are born in families at risk.

In the spectrum of our comparison with the deinstitutionalization reform in Bulgaria and quest on the impact of the Europeanization reform over new member states these findings represent a fundamental point of saturation. At first, it seems logical that new member states such as Bulgaria are guided by older member states while applying EU requirements. The controversy lies in the fact that while the United Kingdom pleads for a complete deinstitutionalization of childcare services in Bulgaria, it simultaneously introduces reforms to re-institutionalize its own social services for abandoned children due to deterioration of community-based care observed over the last couple of years. As the East of Europe becomes westernized, old member states begin to push to the extreme the welfare state model (to an extent assimilate the obsolete status quo of the Soviet regime) to reconfigure the role of the state in the provision of social services. In its nature, deinstitutionalization reform contrasts two antithetical models of child protection – the Soviet approach, which perceives social care as better than parental (linked to the full authority of the state in communism), and the liberal approach, which gives children individual status and prioritizes the importance of parental care for child development (associated with decentralized services for childcare based in the community). This analysis proves that none of the models guarantees unconditional child protection and proves that the specific nature of child policies could transform the relationship

⁶³⁴ WINCOTT, *op.cit.*

between economic and social policy development. The reform of child care services for children deprived of parental care in Bulgaria and The UK can be regarded as an example of circulation of social policy models of child protection – from centralized to decentralized across the past hundred years and despite of the political status quo of the countries. Furthermore, the deterioration in the quality of child care in the UK and Bulgaria can be seen as the result of applying identical policy solutions to discrete European social models, and as a consequence of the decline of the state as a controlling power. Adversely, the descent in the quality of child care may be perceived as a lack of common European strategy for child protection that put children into the heart of the social investment policies of the Union.

Common dysfunctionalities of child protection among Bulgaria and UK

Such transfusion of policies foreshadows on the one hand, that child welfare is totally dependent on the political framework of each country and on the other hand, that the neo-liberal imperative brought some common dysfunctionalities of the child welfare in Bulgaria and the UK.

First of all, both systems of child protection became largely dependent on slow bureaucratic systems, which are not flexible enough to follow individual assessment procedures. In both countries this obstacle creates conditions in which *the child needs to follow the system* and thus fit into the predefined sets of procedures. The examples provided throughout the thesis as well as the evidences from our field work show that both child protection systems are not child centered and despite the tragic ends of children, the administration continue to follow under the motto *one size fits all*.

Second, both countries seem to lose the focus on family policies, which are key to prevention of abandonment and invest in alternative care methods rather than in the biological family unit. This is due to the overall lack of qualified social workers, deficiency of adequate training, and low levels of working conditions. *When the evidence tells you one thing [about a vulnerable child] but the budgets tell you a different thing, you go with the budget rather than the evidence*. This quote of a British social worker illustrates well the extent to which budget restraints in the neo-liberal welfare lead to contra productive policy outcomes, which as we have demonstrated cost more to the state in long run. The shortfall of early intervention and

government support in both countries led to a greater number of children removed from their families. These statistics show that similarly to the communist state, the neo-liberal one also adopts corrective functions despite the different child welfare mechanisms. This study pleads for greater support of biological parents and at the same time it acknowledges the fact that the closure of these institutions will not serve as a panacea for child abandonment.

Third, even though Bulgaria has much less experience since its first decentralization strategies (2003) in comparison to the UK, both countries experience difficulties with the division of power in regard to child welfare and we witnessed limited cooperation among different state-agencies, municipalities and NGO's. As we have demonstrated in Chapters VII and VIII, the more actors the state delegates its services to, the greater the delusion of responsibility and lack of transparency on the quality of child care. Such an issue leads both countries to adopt specific strategies of decentralization, which require limited delegation of services rather than full autonomy of the non-governmental actors.

Fourth, despite the overall awareness of the two states about the specificity of community based centers, there is still no common policy tool for measurement of their impact over children in the long run. The transfusion of models for child protection of children deprived of parental care from the UK to Bulgaria started already in the 1990's and happened without any systematic overview of the advantages and disadvantages of the British model in the context of complete economic and political downfall of the Bulgarian state. The immaturity of the Bulgarian institutions allowed the copy-paste of measures that did not fit completely to the Bulgarian cultural and administrative setting after the arduous transition period. Today the country is caught between the inertia of path dependent institutional memory and the image authorities defend in front of the European Union. In the UK, the private provision of services led to inequality of care in the different municipalities and pushed the state to adopt corrective measures such as a re-institutionalization in residential state homes.

Finally this comparison underlines the collision between market based welfare models and socialist welfare models in terms of child protection. The above described common challenges of the reform show that market based economies and neo-liberal policies struggle to guarantee social protection to children and their families in risk of abandonment. Child care

policies in Europe through the prism of the Bulgaria and the UK turn to be some of the most prominent cases of the deinstitutionalization reform. In addition both cases question the consistency and coherence of social policies within the European Union and their ability to protect rights of abandoned children. Regarding the evolution of institutional care in the UK and Bulgaria we determined how recent political reforms foreshadow the transformation of childcare, which are deemed to be part of a supranational debate over child protection policies. Paradoxically, today there are tendencies in the New Labour social policy that could lead to one of the most liberal welfare regimes in Europe - the UK- towards new child welfare provision close to universal state based care. At the same time, after the British public put enormous pressure on EU and UN institutions to close state run institutions in Bulgaria and adopt decentralized social policy provision, the Bulgarian government implements the national vision for *deinstitutionalization* of child care homes in the country. Such transfusion of policies foreshadows on the one hand, that child welfare is totally dependent on the political framework of each country and on the other hand, that the neo-liberal imperative brought some common dysfunctional patterns of the child welfare in Bulgaria and England.

IX - The Contested Role of the European Union

This PhD came about as a response to the media attention surrounding institutional care for abandoned children in Bulgaria. Our reaction to the BBC documentary initiated a quest for answers related to the existence of these “homes” and their development, as well as personal frustration and inability to understand how in 2010 society, the state and the European Union can ignore the neglect of such an important part of the population- the abandoned children. Taking the deinstitutionalization reform as a European tool for the transformation of child protection policies, we analysed the correlation between the changes that occurred on the national level and the mechanisms adopted by the European Union. In order to fully grasp the application of the Europeanization concept in the transformation of child protection policies, we executed a multi-level analysis of the exogenous influential factors coming from the EU and the domestic social, institutional, and administrative predispositions of the Bulgarian state that incorporated the alteration to community based care services.

On the one hand, the unintended consequences of the reform are partly linked to the specific nature of child protection policies, which intersect purely national priorities and other aspects of EU governance, such as human rights, social exclusion, disability, and anti-discrimination, *where new actors have been actively mobilizing European legal resources (especially directives) and successfully changing the field's principles and instruments*⁶³⁵. As a member of the European Union since 2007, Bulgaria was subjected to great conditionality measures. Through a variety of EU instruments such as legislation, policy tools, and exterior stakeholders, Bulgaria transformed big areas of its governance (as described in Chapter IV and V). Our exploration of European Union policies proves that the Copenhagen conditions for accession vis-à-vis the Bulgarian state were vague and general and provided uncertain standards to be met in the provision of social policy. Despite the fact that the psychological and psychiatric literature has been largely in consensus about the negative impacts of institutionalization, the EU guidelines for the replacement of institutional care with community-based care were drafted in 2012 as recommendations and are not legally binding.

⁶³⁵ <https://spire.sciencespo.fr/hdl:/2441/2v1bnaoeja8vgrgc6vn19bf9t2/resources/ph-palier-published-pdf.pdf>

They were drafted that late, because as already signalled by others,⁶³⁶ social policies have never represented a sufficiently powerful area for EU compliance. Data collected in our interviews points to another reason for this delay, namely that child protection policies were not social policy preferences that concerned the new member states, who were more concerned with employment or health policies. However, the European Commission initiated the biggest multi-sectorial structural funding program precisely to eradicate institutional care from Bulgaria and Romania. These mixed signals led to unexpected results of the reform within the nation states revealed throughout our interviews and field observation. Throughout the accession period, shaken from the severe economic collapse of the transition period, the Bulgarian state accepted unconditionally the administrative, institutional, and social aid provided by solid foreign stakeholders. As a result there was almost no time and/or possibility for interior formation of an alternative elite who could have defended reconstruction according to the institutional and administrative capacity of the state. The lack of evaluation of how the deinstitutionalization reform affected other EU states in 2007 did not stop the abrupt pressure from the EU through its conditionality measures and initiated within itself the introduction of a totally new set of public policy tools. The results of this EU involvement were highly criticized during this study, but we cannot ignore that the increased awareness and mobilization of non-governmental actors as well as political tools to ameliorate the care given to children deprived of parental care happened partly due to these conditionality tools. Hence, we adopted the understanding that the impact embodies both positive and negative consequences. According to the normative basis, the Bulgarian social policy became European in a sense that it replaced unconditionally the previous regime of state-run large home institutions with the only possible EU-presented alternative – community based care services. Our inquiry was guided from the results of this change and questioned 1) the extent to which the European ideology could be adapted within the Bulgarian reality or would Bulgaria succeed to adapt the new strategy and at the same time respect its national interests? and 2) why there was only one possible alternative for institutionalization within the EU system. Our analysis showed that implementation is not happening without any risk for the children and exposed eleven major preconditions that might lead to its unsuccessful

⁶³⁶ CERAMI.A. Europeanization and Social Policy in Central and Eastern Europe, in BAFOIL,F. BEICHEL,T.(eds.) *Européanisation. D'Ouest en Est*. Coll. Logiques Politiques, L'Harmattan: Paris, pp. 137-168,2008.

application. Furthermore, it concludes that small member states such as Bulgaria might also change the EU dynamics on child protection policies and suggest the necessity for diversification of the deinstitutionalization alternative for child protection models.

A - Unintended consequences of the reform

Building up our arguments on the theoretical reasoning of Lascoumes and Le Galès in relation to public policy instruments, we started from the understanding that the effectiveness of public policy instruments is a dependent variable which has the capacity to change the course of public policies as much as institutions. As the only exit strategy from the old status quo, deinstitutionalization reform in Bulgaria led to the decentralization of the decision makers and thus the change in the hierarchy of actors, bringing about a clash between the prioritization of interests between state and society. This research tests empirically the extent to which local constituents are ready to benefit from European resources (administrative structure, strong civil society) and play their role in the provision of social policy services along with the state. Identifying the groups of factors that thwart the process of adaptation to the European practices provided a concrete diagnosis for some of the most significant barriers to the reform and its conformance with the European timeline.

The overall conclusions out of the eleven identified challenges in Chapter VII could be summarized as follows: First, the goal of the deinstitutionalization reform must be to upgrade the existing system so that it can adapt its methods to the child, rather than vice-versa. Reducing the size of the institutions does not lead to automatic reduction of the demand for long term full care service provision. Despite the optimistic statistics of the Ministry of Labour and Social Affairs showing a decrease of the number of children in institutional care, both qualitative and quantitative data clearly shows that children who seek protection from the system continue to rise.

Second, the Bulgarian government achieved a considerable progress in the creation of alternative care and according to statistics the state has overcome its initial delay better than other post-soviet countries. However, eight years after the political legalization of the reform what we witnessed on the field suggests that there is a real danger of *transfer of institutionalism*. Uncoordinated and weak policy measures to ameliorate the wages of social workers, their trainings, evaluation and support lead to the reproduction of old care practices within the newly formed community based centres.

Third, the long term existence of the newly established community services remains uncertain due to their EU *project life*. Hence, after the abrupt closure of all large-scale institutions for handicapped children, family-type centres become the dominant alternative left for this part of the population. However, as of 2015 the state cannot guarantee that these homes will represent long-term solutions and permanent homes for the abandoned children. Such an uncertainty is due to clear methodology on how to finance the community centres outside of the project logic and the great dependence on foreign companies for their realization-(100% of the on-going projects are financed with more than 50% external EU or IO funds). Further, our analysis shows that mechanisms for qualitative evaluation of their functioning are lacking, and thus there is no assessment if the conditions of care actually affected the children positively (for instance are they less aggressive, do they continue to pee out of fear at night, etc.). Such evaluation of the current status of each individual child as a result of the deinstitutionalization reform will serve as an indication for both the Bulgarian government and the EU and is undeniably essential.

Fourth, our study proves that the decentralization of power among state, municipalities, and NGO's is threatened by lack of clarity of state priorities, weak communication among them and low confidence. Municipalities were identified as one of the most inflexible links in the system, where dependence on the old status quo and clientelism was still very much alive. Since there are no legal sanctions for the insufficient provision of services, city councils continue to endorse community uses with no real beneficiaries and disenfranchise the creation of services identified as key by NGOs working in the field. Contrary to the logic behind the reform to decentralize the decision makers and cooperate with non-governmental organizations, social programs led by municipalities remain governed for the top-down with few positive practices of cooperation between them and NGOs.

The fifth challenge to the success of the reform relates to the role of society in the implementation, or lack thereof, of European standards for childcare. What if child care institutions resisted the transition for twenty years because they were indeed indispensable for society? What options, if any, were available after the collapse of Communism to marginalized Bulgarian families who could not provide for their children's survival, other than to leave them to the state? If society did not reject the old model by itself, should we expect today's public to be open and to apply European models without resistance? We

stipulate the emergence of *personalism*⁶³⁷, or in other words social disconnection from the collective need. This becomes mostly visible through the reactions of society when ex-institutionalized children and personnel were moved into community-based centres in a specific neighbourhood. The country witnessed multiple protests against the integration of these children sometimes accompanied by aggressive acts, social misunderstanding, and a lack of solidarity. Long lasting transformations in social models seem possible only when there is an interaction between *below* and *above*, so that changes are themselves envisioned, shaped, initiated, and propagated.

Sixth and final challenge, with this study we would like to break the silence around the so-called abandoned children. The children in demand of institutional protection are not orphans in more than ninety percent of the cases, but children of poor, sick or socially at-risk individuals. This fact illustrates the necessity of a more complex understanding of the issue within a greater social and economic framework. Prevention measures such as accurate family psychological and financial assistance as well as free and obligatory sexual education need to be urgently taken into greater consideration among policy stakeholders if the state really aims to eradicate the causes of the social stigma.

B - Social policies are resilient to foreign influences

The analyses of the challenges of the deinstitutionalization reform in our particular setting helped us to identify the above-presented interior issues that challenge the present status of the transformation. However, in order to understand the greater framework of the process within the spectrum of the European Union, we had to analyse the EU tools and one other EU member state that had already adopted and put in practice the deinstitutionalization reform. We chose the UK because of its long liberal traditions and strong influence in the establishment of the reform in Bulgaria. This comparison allows us to conclude that the full complexity of the factors responsible for the switch of social protection models within the European Union relies on inclusion rather than imposition of practices. As demonstrated in Chapter VIII we identified at least five common challenges for the implementation of the deinstitutionalization reform among the two states. Paradoxically, despite the fact that in the UK these problems of the system of deinstitutionalization of services were noted by state

⁶³⁷ POZNANSKI, K. *Building Capitalism with Communist tools: Eastern Europe's defective transition. op.cit.*

authorities in numerous child protection reviews, there was no obstacle (within the European Union framework) for their reproduction in Bulgaria.

1. European Legal Norms - Confronting Pre-existing Beliefs

Bulgaria is not an exception to the “normalization” of European rules in new candidate countries and complies with the EU’s legislation in many spheres, including child protection. Compared to the dominant Communist legislation from the period 1944-1989 (Chapter III), the legal preconditions for the development of a new childcare model through decentralization of power and active participation of the non-governmental sector represent a central Europeanization mechanism. With their own political agendas in the sphere of child rights, the European Union (through the Acquis) and the Bretton Woods institutions played controversial roles in the Europeanization of Bulgaria’s childcare policies by portraying the deinstitutionalization reform as the only alternative to the established culture of institutionalism. Thus, conditioned within financial and economic constraints, the Bulgarian state was pushed to adopt a variety of mechanisms that led to the formation of new legislation for child protection in 2000, the Vision of deinstitutionalization, and the gradual creation of community-based care. It is not a secret that the European Union participated in those transformations through a significant amount of European structural funds. What was not publicly portrayed, however, was the incoherent spending of those funds. A significant amount of the funding was invested in the maintenance of institutions and therefore perpetuated long term institutionalization (Chapter VI, VII). As highlighted by this study, the EU did not have the capacity to follow the usage of its funds, and local institutions did not demonstrate genuine interest in preventing the investment of the funds in the renovation of the buildings (and not in the amelioration of care). Moreover, the increased amount invested in the physical condition of the institutions prompted further opposition to the reform from local actors and provided greater incentives for corruption and implementation of the funds for anything else but the interests of the children. As the present economic crisis hinders the fight against corruption, the new independent services demand greater and more targeted investment of public capital as well as superior mechanisms for accountability of decentralized care. The findings of our study predict that children will be soon considered on a different level of EU policymaking – for both economic and human rights reasons. Until prevention policies start to be the focus of both the national and supranational governments,

there will always be preconditions for low child wellbeing, social exclusion, and forced separation of children from their families.

2. Resilience of Child Policies – Member State Share Similar Challenges with the deinstitutionalization reform

One of the essential conclusions of this analysis posits that child protection policies are strongly affected by the internal dynamics of the nation state. Therefore, drawing assumptions about the impact of the Europeanization process in different old and new member states is not sufficiently justified. However, since there are European guidelines for closure of institutional care and numerous public policy instruments put in place to change the existing national legislations, adopt different policy tools and introduce new stakeholders, we found it important to identify some of the common problems within the English and Bulgarian child care models. In contrast to the tools that British NGOs introduced and established within the Bulgarian context, such as decentralization of services and liberalization of services among non-governmental institutions, in the UK child services are largely provided by the state. Additionally, the recent analysis of deinstitutionalization services in the UK shows some real issues with community-based care such as maltreatment, child criminality, child pregnancy, and bureaucratic rigid administration that leads to excessive numbers of children taken from their biological parents (explained in detail in Chapter IV). The comparison puts in perspective what would have happened if the EU had a better coordination and communication platform where the impact of similar measures is shared and communicated among member states. The fact that liberal states such as the UK appear to be returning to universal childcare mechanisms, albeit in a widely modified and updated format, as a real possibility for new government direction and as a viable solution to child welfare needs⁶³⁸ proved that deinstitutionalization reform should not be the only possible alternative for new member states' policies for children deprived of parental care. The circulation of models of child care from *institutionalization* to *deinstitutionalization* and the opposite shows clearly that no matter how developed a nation is (economically and democratically), social policies remain extremely resilient to transformation and adapt to new orders in very unintended ways. Therefore, the solutions of the deinstitutionalization reform of tomorrow are hidden behind

⁶³⁸ WINCOTT, D. *op.cit.*

exogenous and endogenous dynamics that are part of a bigger system of interconnections between state, society, and children.

The Oxford Dictionary defines *metamorphosis* as a *process of transformation and change in the form or nature of a thing or person into a completely different one*⁶³⁹. Metamorphosis is precisely what the Bulgarian child care system has been continuously undergoing over the course of the past several decades. However, in contrast to nature where metamorphoses are somewhat predictable, in politics the scope and mechanisms of change remain ambiguous. Social policy has always been under foreign influence (in the Bulgarian case over the past 100 years) despite being considered internal affairs- all political powers acknowledge the fact that by changing social policy, especially related to children, they get into the heart of the state. The impact of that influence depends on the strength of the state to be resilient to factors which can go against its own political interest. The EU and member states have to find better tools for communication and coordination of policy transformation since we prove that the impact/ metamorphosis is already there.

At the end of our intellectual journey we would like to put forward the more general question of the place of the child within the correlation between family, society, state, and union. The deinstitutionalization reform challenges the sociological tradition *rooted in deductive reasoning and the use of ideal state types*⁶⁴⁰. One of those possible platforms for comparison is given by Esping-Andersen's typologies constructed on the basis of the three most dominant political movements in 20th century Western Europe and North America: Social Democracy, Christian Democracy (or Conservatism) and Liberalism. When these typologies are investigated in relation to childcare, Esping-Anderson demonstrates that welfare regimes differ in the extent to which they are dependent on the market and the degree of private provision and stratification.⁶⁴¹ Thus, even though Esping-Andersen's typologies are useful for the classification and comparison of state regimes, they have been criticized as being built upon the fast disappearing European family bread winner model and too narrowly focused only on the state-market nexus⁶⁴².

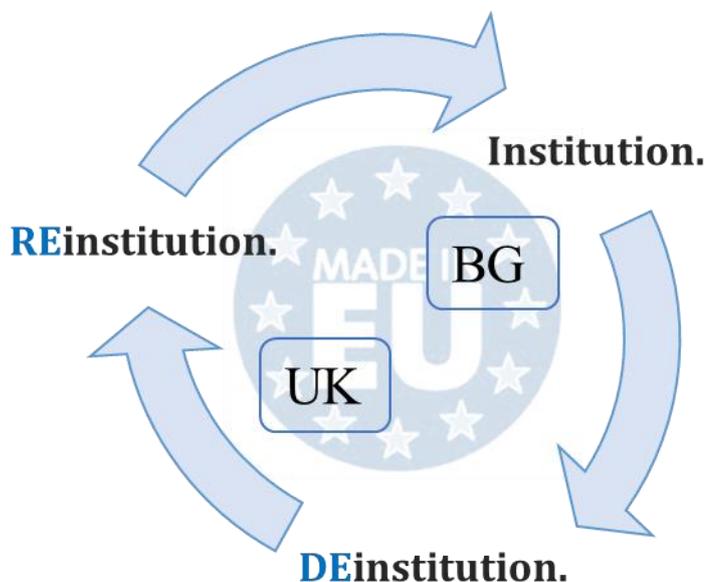
⁶³⁹Oxford Dictionary of English 3rd edition , Consulted May 20, 2013
<https://www.oxforddictionaries.com/>

⁶⁴⁰ MICHEL, 2006

⁶⁴¹ ESPING ANDERSEN, G. *The Three Worlds of Welfare Capitalis. op.cit.*

⁶⁴² ESPING-ANDERSEN, G. *op.cit.*

Therefore, this thesis challenge the limitation of regime types inside state borders, testing the hypotheses of more flexible conceptions of welfare regime typologies where diverse spheres of public policies display characteristics of different regime types⁶⁴³. The new configuration of the household and the new role of women in the work force are undoubtedly calling for alternative arrangements of care. The effect of those new community oriented approaches on the quality of children's development, and how they challenge social equality have been expounded on through an analysis of the newly emerging concepts of “Social Europe” and foreshadow the necessity for development of new welfare types, *which no longer take place exclusively within national boundaries*⁶⁴⁴. The increased number of children in large scale residential institutions shows that caring for children, as well as for the elderly, the sick, and the disabled, is no longer within the realm of the family. Since neither the market nor the family can be a reliable actor for delivery of quality care, public childcare policies turn into an integral component of welfare state redesign⁶⁴⁵.



⁶⁴³ MAHON, 2002 Mahon, R. Child Care: Toward What Kind of “Social Europe? *Social Politics: International Studies in Gender, State & Society*, Volume 9, Issue 3, 1 December 2002, Pages 343-379

⁶⁴⁴ *Ibid*

⁶⁴⁵ *Ibid*.

Figure 38 - Institutionalization, Deinstitutionalization, REinstitutionalization

Above all, the deinstitutionalization reform presupposes that the place of the child in Bulgaria changed from a system where the child was at the centre of society, and thus the state is the actor that provides protection, to a system where the child becomes an individual actor with rights, and the state needs to reassure he/she will be protected within society if the family is missing. Depending on the way the state defines childcare, there will be either repressive (corrective) or assistive institutions put in place. During Communism, within the traditional patriarchal family of the socialist order, children had to comply with existing social norms so that social dynamics could stay intact. *The child is not appreciated as a personality but as a natural continuation of the parents and thus of society. Therefore the upbringing of a child outside of his own family was not considered to be a bad act as far as the alternative provides his or her basic needs*⁶⁴⁶. The whole ideology behind the formation and guidance of educational principles happens within the institution and therefore it is controlled, imposed, and targeted by the state. The complexity of the empirical analysis includes an understanding of the change in norms depicting the *normal parental care* and the *best interest of children*, while understanding the power struggle that these new norms create within society and between decision-making actors. Since 1989, states (not only post-Soviet regimes) are facing a drastic institutional reconstruction, whereby centralized governance aims to become subsidized. The power of the state establishes preconditions and acknowledges the existence of other social actors without taking their power: *this state, the market and the social society*⁶⁴⁷. Therefore, when a state aims to transform the logic behind a system that needs to eradicate the risk for children in disadvantaged social positions, there are many preconditions that remain at stake.

These homes for children deprived of parental care are so specific in their functioning that in order to understand what could potentially replace their existence, we needed to go beyond the normative basis of change and think in terms of “strategies”, which are described

⁶⁴⁶ RADEVA, I. Learning the language of the deaf. The transformations of state institutions for parentally deprived children in post- 1989 Bulgaria, In ELENKOV, I., KOLEVA D. (eds.): *Childhood under Socialism: Political, Institutional and Biographical Perspectives*. CAS/Riva: Sofia, 2010.

⁶⁴⁷ HAUSNER, J. The creators of economic development Създаването на деятелите на икономическото развитие. *Социологически проблеми*, 2000, n 3-4, p. 12.

to be *not as conscious rules but as actions that are linked to something that comes before the conscious decision making, even though it is part of the logic of the practice itself*⁶⁴⁸. For a post-socialist country like Bulgaria, there is still an on-going challenge to overcome severe internal tensions stemming from the necessity to replace the old social normative horizons with new ones. The whole notion of childhood should be modified, and this on-going change is especially visible at this moment in time. The complete collapse of the centralized political institutions of the social state and the new, heavily externally influenced, framework of development of Bulgarian society after 1989 are undoubtedly the reasons for the on-going socio-economic crisis in the country. This type of policy change demands in its core a change in the value system of society. As far as the institutionalization of children is engrained in socialistic child development, the deinstitutionalization reform of children's homes is linked to a liberal understanding. Thus, we observe an opposition of two completely different paradigms of child wellbeing. The socially constructed perspectives of the child and its position in society in the post-socialist time are largely inspired by a rhetoric that is not necessarily Bulgarian. The liberalization and reform of childcare is, as we have demonstrated earlier, a precondition for membership to the EU and has been presented as one of the most urgent and drastic changes within Bulgarian social policy. Analysing the challenges of this reform, we have to ask if the failure of the reform is due to a (possibly subconscious) engrained belief in society and institutions that the old status quo actually works.

C - Europeanization 3.0

As stated in the introduction, the present research project aspires to verify *How Does Europe Matter*⁶⁴⁹, as opposed to *Does Europe Matter*.

Our findings confirmed that the Europeanization is a permanent phenomenon as far as the European Union exists and affects largely non EU member states (such as Suisse) and those who leave (Brexit). The thesis also proved the relevance of a bottom-up perspective in the analyses of the interaction among actors and regional stakeholders in the transformation of child protection policies. Further it took the Europeanization concept as a *dependent*

⁶⁴⁸ RADEVA, I. Learning the language of the deaf. The transformations of state institutions for parentally deprived children in post 1989 Bulgaria. 2010

⁶⁴⁹ BAFOIL, F., SUREL Y. Européanisation plurielle. In L'Européanisation d'Ouest en Est, ed. BEICHELT and BAFOIL, 299-328. Paris: L'Harmattan, 2008. p.308

*variable*⁶⁵⁰ where actors interact and model the adaptation of administrative norms (characteristic for top-down models) in transformations related to child protection policies. This exploration started by analysing previous debates around the impact of European integration over nation states where *Europeanization 1.0* is considered as political regime and plead that *Europe matters*⁶⁵¹ and top down guidance is accepted *in the name of Europe*. After subsequent enlargements, however, countries became so divergent in their individual administrative, institutional and social capacity to absorb the tenets of membership that we witnessed the theoretical reconceptualization or *Europeanization 2.0* as a process, which combines *multi-level governance* and embodies both European and domestic factors, feeding the literature on the transformation of public policies and converting the understanding of the concept from *régime politique inédit mais également comme un processus multiforme et aux conséquences de plus en plus importants sur les sociétés des Etats-membres*⁶⁵². Our reasoning suggests that these first two conceptualizations corresponded well to the first years after the establishment of the EU when there were fewer members with closer cultural and institutional heritage as well as common economical interest. The present study on Bulgarian child protection policy transformation suggests that as of the contemporary unstable economic and social setting combined with the increasing nationalistic waves across Europe another metamorphosis of the Europeanization is inevitable.

⁶⁵⁰ RADAELLI, C. PASQUIER R. 2007, *op.cit.*

⁶⁵¹ PALIER, B. SUREL. Palier B. & Surel Y. (dir.). *L'Europe en action. L'europeanisation dans une perspective comparée*, 2007, L'Harmattan.

⁶⁵² BAFOIL, F., SUREL Y. Europeanisation plurielle. In *L'europeanisation d'Ouest en Est*, *op.cit.* p.298

INSTITUTIONALIZATION / DEINSTITUTIONALIZATION / RE-INSTITUTIONALIZATION [REFORM]

INTERNAL PRECONDITIONS FOR THE UNINTENDED CONSEQUENCES OF THE REFORM		
<u>CAUSE</u>		<u>EFFECT</u>
Decrease of provision of institutional care	⇒	Increased of demand for protection
Chronic stuff issues (lack of training, low wages, etc.)	⇒	Transfer of institutionalism
Lack of evaluation of community based services (better infrastructure ≠ better care)	⇒	Lower quality of provision of health and education services
Cut budgets for family prevention (financial and social support)	⇒	Increase of residential entries
Lack of monitoring of the public–private partnership	⇒	Delusion of responsibility
Path dependency	⇒	Strong social resistance towards integration of children into community based services
High bureaucratization of child protection policies	⇒	States where the child needs to follow the system

EXTERNAL PRECONDITIONS FOR THE UNINTENDED CONSEQUENCES OF THE REFORM		
<u>CAUSE</u>		<u>EFFECT</u>
European legal norms (for deinstitutionalization) confront pre-existing ideas, interests, institutions	⇒	No control, evaluation and monitoring of the Europeanized child protection system
Lack of exchange among good and bad practices among member states	⇒	Reproduction of the UK downfalls in the Bulgarian context
The arduous transition to liberal welfare model of social provision	⇒	Deterioration of quality of child care
Financially strong organizations impose pre set models of child care	⇒	Adoption of unsustainable welfare models of social protection

The deinstitutionalization reform of child services questions the positive impact of the Europeanization process over UK and Bulgaria. Hence, positive effect of the Europeanization process on Social Policy is not an obsolete idea but it should be reconfigured:

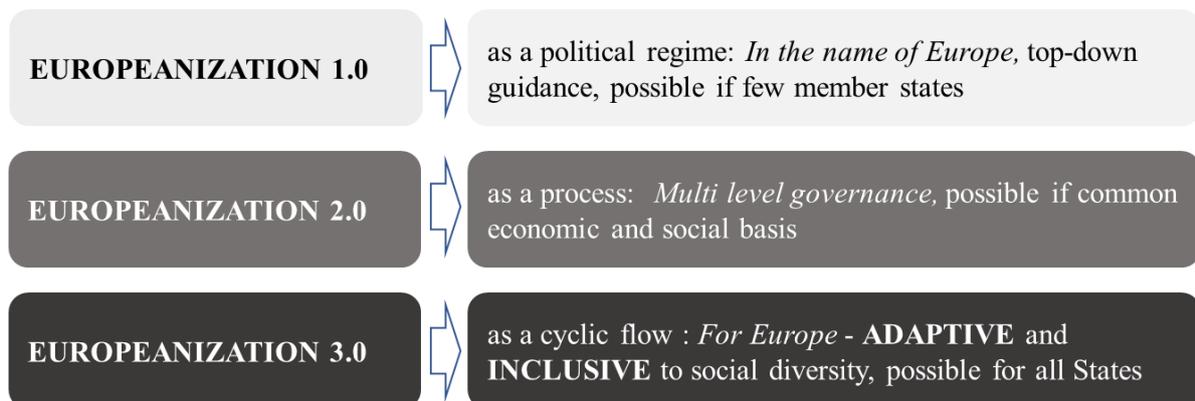


Figure 39 - Conceptual map: main findings

Based on the above presented theoretical evolution and the concrete case for social policy transformation of children deprived of parental care we conclude that *Europeanization 3.0* is not obsolete, but its relevance depends on the extent to which it can equally include its member states, interchange their negative and positive experiences, and consider less imperative models of governance.

Europeanization 3.0 differentiates from *Europeanization 1.0* and *2.0* but steps upon its good and bad practices and benefits from the lessons learnt in the implementation of the concept across the EU. The nature of *Europeanization 3.0* depends on the overall European Union vision for development and should be structured around the same priorities. Post-war political crisis, great economic downfall or increased nationalistic waves are all symptoms for an interior malaise but also opportunities for greater progress. As the father of the Union Jean Monnet posits *Europe will be forged in crises, and will be the sum of the solutions adopted for those crises*⁶⁵³. Through the analysis of European policy applied on child protection issues, this thesis posits that one of the greatest challenges of the Union of tomorrow will be to answer some of the chronic social inequalities and de-personification of policies set up in the past decades. Therefore in order for the *Europeanization 3.0* to be more fruitful than its precedents it will embrace the dynamic transformation of the European Union and adapt three new basic characteristics: First, *larger openness/inclusiveness* of the specificities of the diverse EU member states and imply a *bi-directional* communications instead of directional. Second, *adaptability* not only to the institutional and administrative capacity of members states but also to their socio-cultural heritage; the eradication of one political model and its implementation into a new system of power relations does not function especially in social politics. Third, greater *cyclic flow*—in order for the social policy models of protection to function successfully there needs to be conditions for their replacement and circulation among member states, which implies better and deepened exchange and communication.

⁶⁵³ MONNET, J. The future of the European Union. *The Economist*. March 25, 2017 <https://www.economist.com/news/special-report/21719188-it-marks-its-60th-birthday-european-union-poor-shape-it-needs-more>

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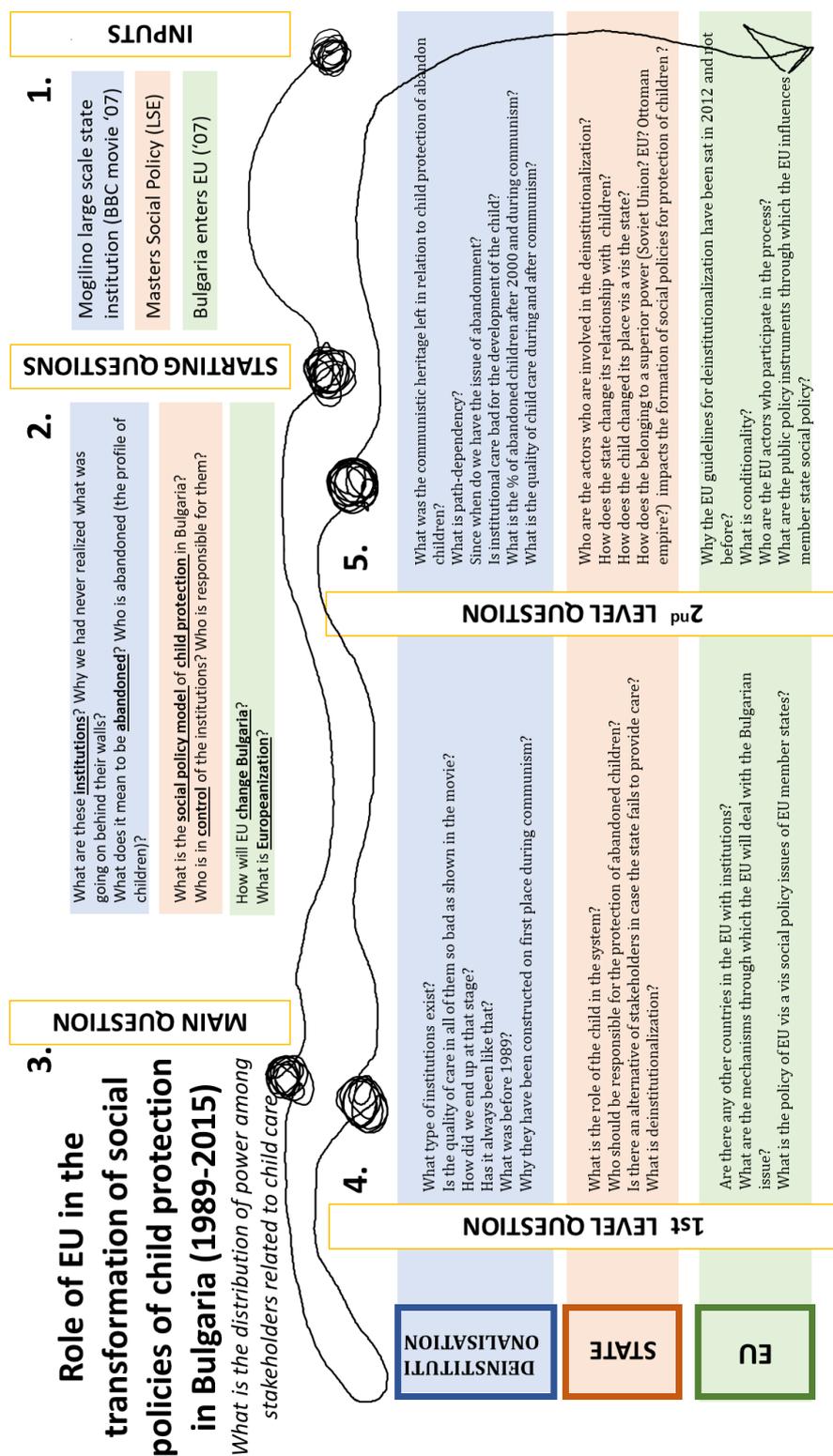
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Appendix 1 - Conceptual mind map



Appendix 2 - List of Interviews and Codes for Citations

Interviews Conducted 2012-2013				
CODE	ACTOR TYPE	CITY	POSITION	NAME
2012/01	State /national	Sofia	Ministry of Labour and Social Affairs: Vice President of the State Agency of Child Protection/ Head of Nationwide Campaign	D.K.
2012/02	State /national	Sofia	Ministry of Education: T.I. Junior specialist at the Section "Support for development. Special schools. Integration	T.I.
2012/03	State /national	Sofia	Ministry of Health: Director European Programs	T.V.
2012/04	NGO (BG)	Sofia	Know-how center	Elen-Mitova Ivanova
2012/05	University	Sofia	Bulgarian Academy of Science	Ekaterina Markova
2012/06	Foundation (BG)	Ruse	Foundation Child and Space: Head of programs in the Association and Former Director of the State Agency of Child Protection	Vessela Banova
2012/07	IO (BG)	National	Director Program services	M.Harizanova
2013/08	Foundation (BG)	National	Foundation For Our Children: V.I. Manager of the Foster Care Center; M.T. Team Leader Center for Foster Care	Vladimir Ivanov
2013/09	NGO (International)	National	Bulgarian Helsinki Committee:- K.R. responsible for the Activities in Protection of the Rights of Children in Institutions	K.R.
2013/09	State (home)	Varna	Home for children deprived parental care Kniaginia Nadegda, Varna: (3-18 years old/boys), staff and children	Anonymous
2013/11	University	National	Professor at the Sofia University / Department of Social Work	Monika Bogdanova
2013/12	State (home)	Varna	Home for children deprived parental care Kniaginia Nadegda, Varna: (3-18 years old/boys), staff and children	Anonymous
Interviews Conducted 2014-2015				
2014/13	State /national	Sofia	Member of Parliament "Патриотичен фронт - НФСБ и ВМРО"	Sultanka Petrova
2014/14	State /national	Sofia	Coordinator from National Agency of Child Protection and Ministry of Health on the project "Childhood for all" (1st job)	Evgenia Ivanova
2014/15	NGO (International)	Plovidv	National Representative of Lumos in Bulgaria	R.P.

2015/16	State+ NGO(BG)	Sofia	Former Deputy Minister of the Ministry of Social Affairs / Coordinator at the Know-How Center	Valentina Simeonova
2015/17	State	Sofia	Deputy Minister of the Ministry of Social affairs	Zornitza Rusinova
2015/18	State	Sofia	Head of the Agency of child protection	Ewa Jecheva
2015/19	Regional	Plovdiv	Director of Center for Social Services "Olga Scobeleva"	Nina Gargova
2015/20	NGO (International)	Bulgaria	Member of the team for evaluation of quality standards of children with no parental care (Quality4Children) and Bulgarian Helsinki Committee project for children in corrective institutions	Jenya Ivanova
2015/21	NGO (BG)	Sofia / Plovdiv	Regional Manager community social services	Alexander Malinski
2015/22	NGO (International)	National	Director of FICE International	Donika Krалеva
2015/23	National	Sofia	Know-how center	Elen-Mitova Ivanova
2015/24	Presidency	Sofia	Advisor to the President of Bulgaria-Rossen Plevneliev	Deyana Kostadinova
2015/25	State (home)	Sofia	Home for Medico-social care for children - Dom Maika I Dete, Sofia. Two staff members	R.I./M.K.
2015/26	Regional	Sofia	Center for Social and Health services "St.Paraskeva"(2 staff members)(driven by Foundation for Our Children)	Anonymous
2015/27	Regional	Plovdiv	Center for Social Support (driven by Foundation for Our Children) 1 staff member	Anonymous
2015/28	Regional	Debelec	Center for Social and Health services Debelec	Anonymous
2015/29	Regional	Varna	Foster Care Families (2)	Anonymous
2015/30	Regional	Ruse	Foster Care Families (2)	Anonymous
2015/31	Regional	National/Vratza	Deputy Minister of Youth and Sport/ Actual Mayor of Vratza (ex-resident of state home institution)	Kalin Kamenov
2015/32	Regional	National	Foundation "Podarete Kniga"	Blagovesta Pugova
2014/33	UK	London	Official reviewer of the British child protection system	Eileen Munro
2014/34	UK/EU	London	Chief Executive of Lumos	Georgette Mulheir as the
2014/35	EU	Brussels	Commission coordinator for the rights of the child	Margaret Tuite
2014/36	UK/EU	London	Policy Officer and Regional Team Manager	Ines Bulic

2015/37	EU/BG	Brussels	DG Employment Social Affairs and Inclusion-Bulgaria/ Structural Funds	Kiril Kiriakov
2015/38	EU	Brussels	DG Employment Social Affairs and Inclusion-Bulgaria	Aurelio Cecilio
2015/39	UK	London	Director of the Bulgarian Abandoned Children Trust – UK-based charity	Siobhain Santry
2015/40	International Organization	Brussels	Partnerships Manager at UNICEF	Michaela Bauer
2015/41	EU	Brussels	Legal officer at EC DG internal markets and services (edited the toolkit for independent living)	Silvio Grieco
2014/42	IO	Brussels	Secretary General "Euro Child"	Jana Hainsworth
2014/43	EU	Brussels	Policy Officer Social Inclusion, Social Policy Aspects, DG Employment Social Affairs and Inclusion	Marie-Anne Paraskevas
2014/44	Government/ FR	Paris	Chef du département de l'Union européenne et des organisations multilatérales	François Gorget
2014/45	EU	Paris	Représentation en France de la Commission européenne	Gaëtane Ricard-Nihoul
2014/46	IO	Paris	President of the Foundation "La voix de l'enfant"	Martine Brousse
2015/47	Local	Sofia	Children from institutions	Dinko, Mihaela
2015/48	Local	London	Two women whose children were taken away from by state authorities and put in institutional care	Anonymous
2015/49	EU	Sofia	Director of the Representation of the European Commission in Bulgaria	O. Zlatev
2017/50	Bulgaria	Brezovo	Director of the Home for Children deprived of Parental Care "Roza"	

Appendix 3 - Interview Guides

Preparation of the question grid

Key informant face-to-face interviewing is employed in order to obtain information from the representatives of the selective organizations. All the interviewees were presented with set of both closed and open-ended questions divided in five categories. Participants are asked to:

- firstly, present themselves, describe their responsibilities and role in the deinstitutionalization process as well as their goal in the implementation of the process in practice;
- secondly, to list a variety of challenges they face and who they identify as their main partners and/or adversaries; and then precisely to describe in which phase of the deinstitutionalization they focus on and what are the necessary steps that need to be taken for the reform to be successful (in regard to the specificity of their mission);
- third, group of questions are related to public action- the role of national and international partnership in relation to child care services; the way EU and UN directives influenced the process and the impact of the reform in the field;
- Fourth, interviewees are asked to critically evaluate the reform in the present moment describing the right preconditions for the successful implementation of state/European policies (interaction done by national government together with the EU/UN (Unicef) and other international organizations (LUMOS));
- Fifth, the questions guide the actors to define recommendations for the successful implementation and ultimate goals of the reform and in what time framework that would be possible. In addition, the respondents were encouraged to add whatever information they regarded as relevant.

The usage of this grid proved to be extremely useful in the analysis of our data. It gave us ground to compare very different actors in various settings influencing the dynamics of the reform of the deinstitutionalization. The fact that we tape-recorded the interviews helped us capture all different details my interviewees give. In the process of analysis we realized that in some situations what they mention the least turned out to be what interests us the most.

Acknowledging the fact, that my personality and the setting of the interviews could influence the details we get, we complimented our data with observations.

Course and specificities of the interviews

Interviews with adults lasted between an hour and three hours depending on the context (office, domestic, or public environment). Interviews with children (from 5 to 18 years old) were quit shorter: 40 min on average- those children who were living in orphanages (12 in total from 2 orphanages) were interviewed in groups in random order. In order to obtain my meetings we prepared individual letters in Bulgarian language explaining the topic of my research, where we lead it and how we need their cooperation in order to obtain enough information for the synchronization of the reform among the variety of actors and help them objectivise their impact. We did not plan to hide our identity but remained neutral in our opinion over the subject so we can predispose the interviewees and obtain as much information as possible without them feeling judged. Our aim is to see the impact of European policies over childcare through the prism of the different actors and thus we present the utility of our interviews as a platform for participants where they can express doubts and fears as well as pride and satisfaction from their work in relation to the reform. The invitation letter for the interviews is sent beginning of November 2013 while the actual interviews took place throughout 2014 and 2015.

The individually taken 50 interviews were conducted in different location and took an average time of 1.30 minutes. The interviews were tape recorded for our own use accepts in cases where permission was denied. All invitations were accepted and in cases where the person was not available we were directed towards another possible representative of the same institution. Due to the sometimes limited amount of time spent in London or Brussels sometimes we had to lead more than one interview per day which created some difficulties related to appropriate time slots for all parties, travel expenses and ability to concentrate and remain attentive throughout two/once even tree interviews in a roll. The order of the interviews was constructed on random principle depending on the availability of participants and my mobility in the different cities.

SAMPLE 1: INTERVIEW GUIDE /GENERIC/

- **Present yourself / the organization you present**

What do you do? What are your responsibilities/capacities? What are your goals?

How would you define the deinstitutionalization reform?

- **Challenges / Solution**

Who are your partners? Who are your adversaries? How and with whom do you negotiate? What type of actors should be involved? What kinds of solutions have you found so far for those obstacles? At what stage are you now- what are the necessary steps that need to be taken for the reform to be successful?

- **Public Action / Partners**

National / International partnerships? Do you follow any EU / UN directives? Who finance your projects? Who do you aim to get involved from the public sphere (municipalities / schools / NGO's government etc)?

- **Evaluation**

What do you expect to happen so that the reform (your project) works? What are the right preconditions for the successful implementation of the reform? Which actors need to do what? How do you evaluate the interaction done by the national government, the EU / UN (Unicef) and other international organizations (Lumos etc)?

- **Results**

Define what are the ultimate goals of the reform? In what time framework?

SAMPLE 2: PROFESSOR EILEEN MUNRO (London School of Economics and Political Science)

1. The Munro Review of child protection: A child centred system “What helps professionals make the best judgments they can to protect a vulnerable child?”
 - What was the purpose of the report? How is it different from other reports?
 - What was the research method that you used?
 - Could you please elaborate why did you use the system theory approach?
 - How is it different from other methods used so far?
 - Would you say that this method can be applied to other areas of public policy?
 - What are the steps that follow?
2. What is the main shift in child protection that one observes today in the UK?
 - How would you define the role of the different actors involved in the decision making process and its implementation (state agencies, social workers, NGO's) ?
 - How does a state ensure coordination between those actors and their activities?
 - How can we achieve a cost-effectiveness of targeted investment in children?
 - Is there a shift from reactive to a preventive approach? To what extent risk assessment in the UK is accurate?
3. Do you think that there is confusion in the role of the state in child protection? To what extent the Individual autonomy (UK) is against the idea of children as public good (France)
4. What is the role of the European Union over the formation of the UK policy of child protection? To what extent can we talk about European child protection system? Could there be an European method of child protection?

SAMPLE 3 : INES BULIC: Policy Officer and Regional Team Manager Coordinator of the European Coalition for Community Living

1. You were advising the European Commission (DG EMPL and DG REGIO) on the use of SF in Bulgaria, Czech Republic, Hungary, Slovakia:
 - How does an adviser for the commission prepares himself- how did you became an expert on those three countries?
 - What is your feedback from that experience?
 - What are the main differences and similarities between the three countries?
 - Do you think that since than progress has been made? Are there any practices from which we can learn for the new member states?

2. Common European Guidelines and toolkit of the usage of structural funds
3. Could you tell me more about the European Expert Group on the Transition from Institutional to Community-based Care (EEG):
 - who are the members;
 - what is the decisions making process;
 - what were your goals?
 - How would you describe the challenges that you have met throughout the process?
 - What is the evaluation method you are using?
4. Deinstitutionalization=social innovation. How does the deinstitutionalization reform affect child protection policies?

Appendix 4 - Data sources Figure 2

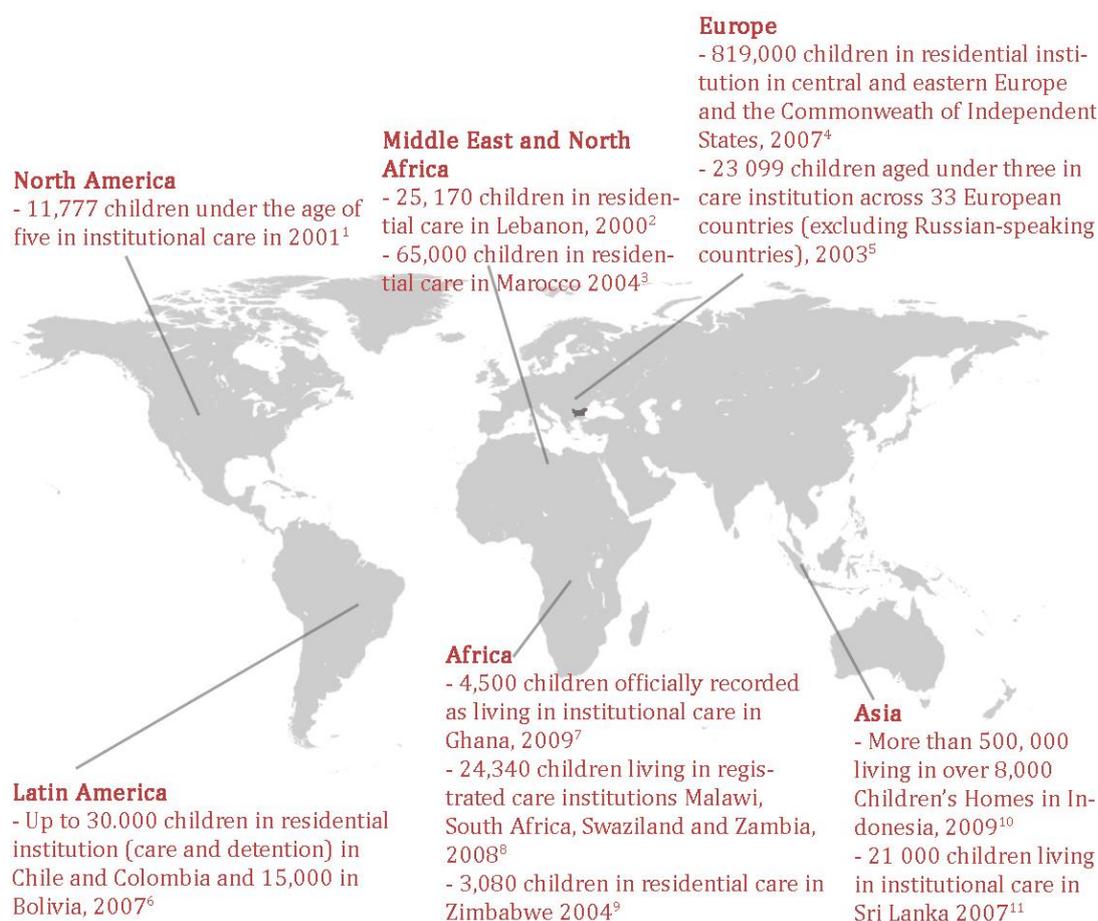


Figure 2: Estimated numbers of children in institutions in selected countries:

¹. R Johnson, K D Browne and C E Hamilton-Giachritsis, "Young children in institutional care at risk of harm", *Trauma Violence and Abuse*, 7: 1–26, 2006

². H Ghosheh, *Children in Residential Institutions: Egypt, Lebanon and Morocco*, Save the Children UK, 2001

³. http://lib.ohchr.org/HRBodies/UPR/Documents/Session1/MA/UNICEF_MAR_UPR_S1_2008anx_Annex.pdf

⁴. UNICEF, *Child Protection Information Sheets*, UNICEF: New York, 2007

⁵. Browne et al, *Evidence-based Training to De-institutionalise Care Services for Young Children*, Centre for Forensic and Family Psychology, University of Birmingham, and Nobody's Children Foundation, Warsaw, 2003

⁶. UNICEF, *Key Information on Child Protection*, UNICEF Latin America and Caribbean Regional Office, 2007 [http://www.unicef.org/lac/Key_info_on_Child_Protection\(1\).pdf](http://www.unicef.org/lac/Key_info_on_Child_Protection(1).pdf)

⁷. <http://www.irinnews.org/Report.aspx?ReportId=84582>

⁸. A Dunn and J Parry-Williams, *Alternative Care for Children in Southern Africa: Progress, challenges and future directions*, UNICEF: Nairobi, 2008

⁹. G Powell et al., *Children in Residential Care: The Zimbabwean experience*, UNICEF and the Ministry of Public Service, Labour & Social Welfare: Zimbabwe, 2004

¹⁰. DEPSOS, *Save the Children and UNICEF, „Someone that Matters”: The quality of care in childcare institutions in Indonesia*, Save the Children UK: Jakarta, Indonesia, 2007

¹¹. <http://www.irinnews.org/Report.aspx?ReportId=74073>

Appendix 5 - Data sources Figure 3

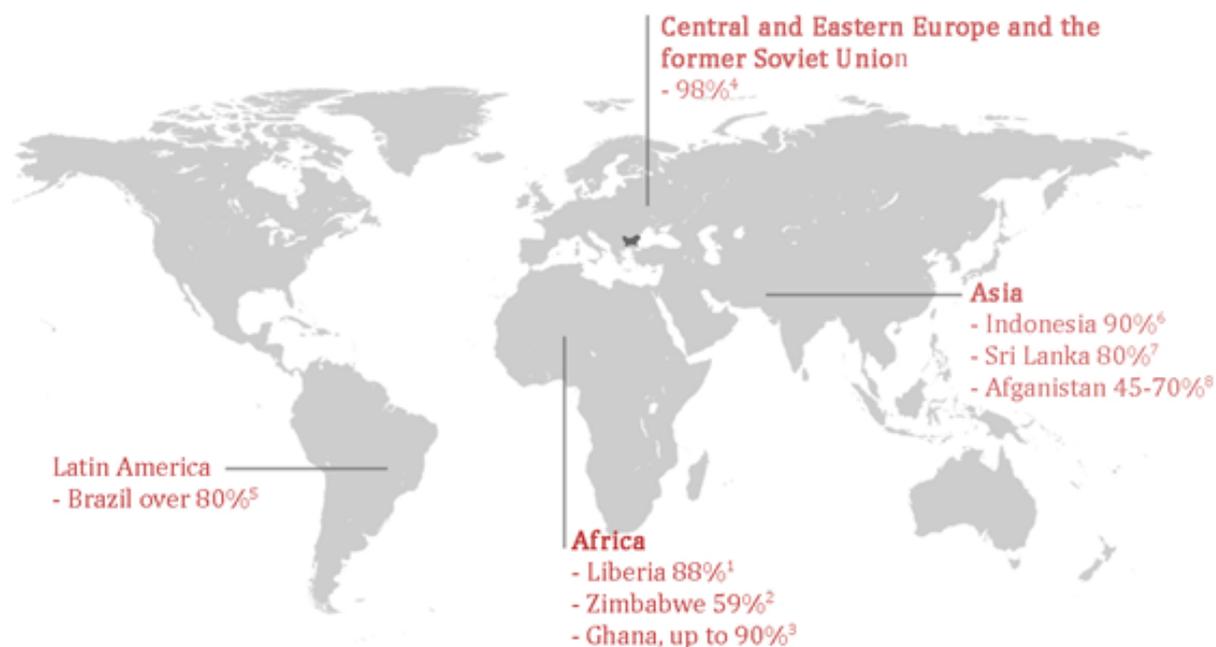


Figure 3 Percentage of children in institutions with one or both parents alive, in selected countries

¹ K Paine and Subah-Belleh Associates, "Situational Analysis of Children Orphaned by AIDS and Children made Vulnerable by HIV/AIDS in Liberia 2005: A report for the Government of Liberia and UNICEF", 2005

² G Powell et al., *Children in Residential Care: The Zimbabwean experience*, UNICEF and the Ministry of Public Service, Labour & Social Welfare: Zimbabwe, 2004

³ <http://www.irinnews.org/Report.aspx?ReportId=84582>

⁴ K D Browne, C E Hamilton-Giachritsis, R Johnson and M Ostergren, "Overuse of institutional care for children in Europe", *British Medical Journal*, 332, 485–487, 2006; R Carter, 2005; D Tobis, *Moving from Residential Institutions to Community Based Social Services in Central and Eastern Europe and the Former Soviet Union*, World Bank, 2000

⁵ Brazil Report to the Committee on the Rights of the Child, 2005, <http://www.unhcr.org/refworld/docid/45c30b780.html> [accessed 4 Mai 2012]

⁶ DEPSOS, Save the Children and UNICEF, "Someone that Matters": *The quality of care in childcare institutions in Indonesia*, Save the Children UK: Jakarta, Indonesia, 2007

⁷ Save the Children in Sri Lanka and Save the Children Canada, *Research Project on Children in Institutional Care: the status of their rights and protection in Sri Lanka*, 2005, <http://www.irinnews.org/Report.aspx?ReportId=84582>

⁸ *Afghanistan Country Report to the Second International Conference on „Children & Residential Care: New strategies for a new millennium”*, Stockholm (2003)

Appendix 6 - Number of Children in Residential Institutions 1955

Number of Children in Residential Institutions in
Central and Eastern and the Former Soviet Union 1955

Country	Total number of children under 18	Children in residential institutions			Share of total children in institutions (percent)b	Share of children with disabilities in institutions (percent)b
		Without disabilities	With disabilities	Total a		
Albania	1,246,000			585c	0.05	
Armenia	1,213,000			10131	0.80	
Azerbaijan	2,828,000	1,148c	695	1.843	0.20	0.07
Belarus	2,655,000	5.587	1.841	7.428	0.30	0.70
Bosnia and Herzegovina	933.000					
Bulgaria	1,903,000	12.718	8.246	20.964	1.101	4.0
Croatia	1,034,000					
Czech Republic	2,400,000	8,684d	11.583	20.267	0.80	5.0
Estonia	358.000	1.47	404	1.874	0.50	1.0
Georgia	1,529,000	723	1.634	2.357	0.20	1.0
Hungary	2,250,000	9.708	738	10.446	0.50	0.3
Kazakhstan	5,890,000					
Kyrgyz Republic	1,904,000					
Latvia	609.000	1,751e	420	2.171	0.40	0.70
Lithuania	957.000	5.037	1.790	6.827	0.70	0.2
Macedonia FYR	636.000					
Moldova	1,382,000	1.084	600	1.684	0.10	0.4
Poland	10,589,000	30,265d	37.700	67.700	0.60	4.0
Romania	5,646,000	39,622d	62.230	101.852	1.801	11.00
Russia	37,115,000	106.094	231.433	337.527	0.90	6.00
Slovak Republic	1,468,000	6.815	4.386	11.201	0.80	3.0
Slovenia	426.000					
Tajikistan	2,842,000					
Turkmenistan	1,887,000					
Ukraine	12,377,000	16.433	8.525	24.958	0.20	0.7
Uzbekistan	10,614,000					
Yugoslavia	2,678,000					
Total for countries with data available	115,369,000	247.139	372.225	630.08	0.70	4.0
Total estimate for countries with no data available	28,844,000	79,188f	122.72	201.908	0.70	4.0
Total	115,369,000	326.327	494.945	821.272	0.70	4.0

Note: This table understates the total number of children who reside in residential institutions. It is based primarily on data gathered by UNICEF⁶⁵⁴ on children in public care. According to UNICEF (1997) children in residential institutions include “children in permanent and temporary residential care (various types of infant and children’s homes, including boarding schools for children without a parental guardian); [and] children with severe disabilities in health facilities, although in some countries this includes children with less severe disabilities in full or part-time care ... Children in punitive institutions are excluded in most instances.” These data also generally exclude children who attend boarding schools or sanatoria and are in the custody of their parents.

a. It is difficult to determine a precise total because no database covers all countries of the region, there is no standard methodology for counting institutions and children, country classifications of children by level of disability are increasingly arbitrary, and some residential institutions have inflated the number of children on their rosters to increase government funding for those institutions.

b. According to WHO (1978), about 10 percent of the population in each country has disabilities.

c. Data are for 1998.

d. Data are for 1994.

e. Data are for 1992.

f. The aggregate number of institutionalized people with disabilities in countries for which data are unavailable was estimated using the same percentage (60.8 percent) of people with disabilities among all institutionalized children in countries for which data are available.

⁶⁵⁴ UNICEF 1997, 1998b; Albania General Administration of Social Services 1998; Armenia Ministry of Education and Science 1998b.

<http://siteresources.worldbank.org/DISABILITY/Resources/280658-1172671461088/MovingFromResTobis.pdf>

Appendix 7 - Additional Parts of the Methodology

The interview with the Foundation for Our Children was scheduled in the office of the organization responsible for the support and creation of foster care services in Sofia. In order to prepare for our meeting and direct me towards the right person from the team, the secretary of the foundation asked for a sample of the groups of questions in advance. Couple of days later I was directed towards the Manager of the Foster Care Center - Mr. V. I.. Although initially I was in contact only with Mr. V.I., on the day of the interview another representative of the foundation - Mrs. M.T. – Team Leader Centre for Foster Care - welcomed me⁶⁵⁵. Despite this last minute change for which I was not informed in advance the interview went very smooth while both of them followed the five groups of questions breaking the answers in regard to their competences.

Since this thesis aim to follow the impact of the European adjustment process and directives over national actors, interviews with international agencies and their Bulgarian partners were extremely important and relevant for the purpose of this analysis. Representatives of international level non-governmental organization proved to be very cooperative and with the majority of them the contact was easy and the communication continued even after the interviews via e-mail.

In order to enlarge our spectrum and perceive the nuances of international influence, we tried to get in contact with some of the oldest and most influential organizations involved in the development of child welfare policies and implementation of the deinstitutionalization reform in Bulgaria since 1990's (Unicef; World Bank; Lumos;) as well as some of the smallest newly established international NGO's active on the field. Except in the case of Lumos, we had contact directly (and only) with the national representatives of the organizations, and the interviews were conducted in Bulgarian. Since most of those actors are very interrelated and cooperate in different European and national strategies, previously to the interviews we had to research specificities of their roles (state advisors, donors etc.) and redirect our questions accordingly. Overall interviews lasted on average 2.30h and were all tape-recorded. Three organizations were chosen as representatives of major external advisors to the Bulgarian Government in the formulation of the national strategy for

⁶⁵⁵ r. Ivanov has asked his college to assist the interview since he had an unpredicted meeting in an hour.

deinstitutionalization in 2007: UNICEF⁶⁵⁶, the World Bank⁶⁵⁷, and Lumos⁶⁵⁸. Aware that they represent very powerful institutions with their own financing mechanisms and policy agenda that were not dependent on the state (and other partnerships with BG or international NGO's), the actors were quite confident in their answers. While there are some evidences of huge discrepancies among the priorities of this actors and the state, none of them was willing to discuss or elaborate over the subject (explained in detail in the analytical part of the research). In that context, we felt that the answers were overall explicit but quit controlled.

The only actor who was previously informed for our research and which we managed to observe in two different settings (Sofia and London) is the UK non-profit organization *Lumos*. Our previous contact with G.M. - the chief executive of Lumos UK in the headquarter of the organization in London (February 2011) somehow gave us bigger credibility in front of the national representative Mrs. R P. who received me in her home city Plovdiv little before Christmas holidays (Dec 2011). Mrs. P. was very explicit and extremely cooperative in her explanations throughout the interview. However, she kept asking a lot of questions related to our work/life which were not necessarily important for the purpose of our meeting. In order to remain on topic we had to politely redirect her attention towards the groups of questions. Although interesting, such talkative behavior prolonged the interview to 3.00h.

The interviews led with state representatives from the *Ministry of Labour and Social Affairs*, *Ministry of Health* and *Ministry of Education* and their respective agencies followed the same format of semi-directive questions and were not recorded following inside security procedures of the Ministries. Previously to the interviews we were informed that the meetings could not last more than an hour due to their tight schedule. The limited amount of time made the ambiance of the interviews a bit more intense and answers quit rapid. All interviews were conducted in the conference/or office rooms in the Ministries itself and in order to access the buildings and pass a security check at the entrance, we were issued a day pass (since the interview was previously scheduled via e-mail a month in advance that was not an issue). Interviews taken with actors from the national level proved to be some of the hardest once in terms of openness and critique of the present situation.

⁶⁵⁶ Represented by M. H. Social Services Officer

⁶⁵⁷ Represented by P. P. Senior Operations Officer

⁶⁵⁸ Represented by R. P. CEO Lumos

The contribution of UNICEF, the World Bank or *Lumos* and the ways in which they combine international experience with the Bulgarian context become crucial for the objective positioning of Bulgaria among other European members. However, their cooperation with other Bulgarian non-governmental organizations is not well defined and thus we had to remain objective to hear the opinion of Bulgarian experts whose voice turned out to be less powerful, and quit pessimistic. The national NGO's chosen for the purpose of this research were all created in the past ten years either through the adaptation of international methodologies by Bulgarian experts or as followers of state priorities. For instance, *Child and Space* association has been created in Bulgaria as a result of investigative interdisciplinary French-Bulgarian project "To Grow Up Without Parents"⁶⁵⁹ which has a significant impact on the structural reform of the Ministry of Health concerning the transformation of Mother and Child homes in the period 1998-2004. The interviewee Mrs. V.B. is a licensed psychologist Head of Programs in the Association and a former director of the State agency of Child Protection. The profile of Mrs. B. was not an exception. All of the experts we met from Bulgarian NGO's have rich experience in both the government and non-governmental sector. Those interviews represented an enormous interest for my research since like Mrs. B., all of the interviewees proved to be extremely competent and shared detailed chronological facts of the reform since 1989. The tone of the interviews was very emotional and full of personal judgements that were dictated by the fact that the people interviewed were personally involved (as psychologists and/or state control agents) in the closure of national social care homes across the country (Mogilino for instance). Despite this, responses remained on topic for all of the presented groups of questions. The conversation was recorded and lasted 2.30h because of often telephone and door rings, which she had to answer.

⁶⁵⁹ "To Grow up without Parents" project covered the period 1998-2004 with the support of "MDM", Bordeaux, France, "Child and Family Development" foundation, Bulgaria, The Interdisciplinary Center for the Child's professional organization and The French Institute in Sofia.