Children without Parental Care

Where did we come from, where are we now, and where are we going?
We are going to take you on a journey back in time to explore what was happening in the world that led to the development of Guidelines for the Alternative Care of Children.

The fall of the iron curtain exposed the dire situation of children without parental care across Central and Eastern Europe.
The condition of children in Romanian orphanages shocked the world. In 1991 there were over 100,000 children in Romania, and many more across Eastern Europe, living in large childcare institutions. These horrific conditions had an extremely detrimental impact on their health, development and psychological status.
In the early 1990s, Uganda was the epicentre of the HIV/AIDS epidemic with large numbers of children affected. USAID published an assessment report that focused on the importance of mobilizing communities to respond to the needs of orphans and vulnerable children.
In the spring of 1990, the UN began repatriating an estimated 40,000 refugees from DRC back to Rwanda - 10% of these were unaccompanied children – thus began a massive exercise in Family Tracing and Reunification. This effort illustrated the need for greater coordination and led to the Interagency Guiding Principles on Unaccompanied and Separated Children.
Many agencies, donors, and governments knew that family-based care is the best environment for raising children, but it was clear that more guidance, coordination and accountability was needed.

The EU, World Bank, USAID and many private foundations, along with academics, and UN Agencies started to document the challenges in programming, the disconnected responses, and the worrying outcomes for children.
UNICEF and ISS issued a joint working paper calling for international standards to clarify good practice, prevent abuse, and establish responsibilities and accountability.

After the 2005 Day of General Discussion, the CRC Committee recommended that concerned NGOs produced a draft text of the Guidelines. Brazil then spearheaded the efforts to secure intergovernmental consensus.
The 2009 resolution of the Human Rights Council recommended the Guidelines to the UNGA for their adoption on the 20th anniversary of the CRC.

On the 20th of November 2009, the UN General Assembly welcomed the Guidelines for the Alternative Care of Children. The Guidelines provide internationally agreed upon principles, guidance and essential criteria for decisions making in care placements.
Countries, too many to name in this presentation, in all regions of the world have committed to ending the institutionalisation of children, recognised that it is harmful, and creating national strategies, standards and guidance.

The Guidelines are now regularly referred to by the Committee on the Rights of the Child in reviewing state party reports and concluding observations.
We now have extensive experience piloting and refining what works. We have piloted a range of family strengthening interventions with promising results. In many contexts, we have established effective gatekeeping mechanisms, bringing together those with the expertise, knowledge and a mandate - to make sure that any placement of a child is based on a comprehensive and ongoing assessment.

In Brazil, gatekeeping mechanisms contributed to a 50% reduction in the use of residential care and poverty no longer being the primary reason for children being placed into alternative care.
We know that to effectively respond to the specific needs of children and their families; we need a competent trained workforce. For the first time in many countries, there is growing understanding and respect for social work as a profession - having competencies, training and accreditation systems in place with an increasing focus on interagency guidance and effective supervision.
We are now able to respond quickly and effectively in humanitarian crisis to promote quality care and prevent separation. Following the recent disaster in Central Sulawesi, for example, the Ministry of Social Affairs issued an edict to ensure family tracing was conducted as quickly as possible and that childcare institutions and Muslim boarding schools report any children entering their facility from the affected areas.
We now have more research on what works in improving care for children and have invested in practical resources to support the implementation of the Guidelines in numerous contexts. We now have a tracking tool which specifically helps Governments and civil society to monitor their progress in line with the Guidelines.
With the UNGA Rights of the Child Resolution this year focusing on children without parental care and the upcoming Day of General Discussion by the CRC on this topic, we are seeing more and more focus on supporting and encouraging governments to take responsibility for developing strong child care, welfare and protection systems that can respond to the needs of children without parental care.
We have laid the foundations and we are now focusing our efforts on implementation. While we have made incredible progress over the several decades, we need to continue to focus on: preventing separation, ensuring a range of high-quality alternatives, strengthening systems, improving data collection and ensuring the full participation of children.
Our work needs to focus on the range of services required to support children and their families. This includes more holistic work with education, health and social protection and more input from biological families on the problems they face and support they need. We need to address the attitudes that normalise violence against children, marginalisation, stigmatisation and child abandonment.
We need to recognise that a higher proportion of children with disabilities in many contexts are more likely to end up in childcare institutions and design programmes and responses that allow children and families to get the services and support they need in their homes and communities.
The Guidelines are clear that children have diverse needs, circumstances and wishes, so a range of alternative care options should be made available, prioritising, but not limited to, family and community-based care.

We need to recognise that institutionalisation is harmful, but also that all forms of care come with risks that need to be mitigated. We need to continue define, contextualize, and measure what high quality care looks like.
If we are truly committed to reaching every last child, we need systematic ways of capturing data about children who are not living with their parents. We need to track where the funding is coming from, recognising the harmful effects of volunteering, tourism, and mission trips to orphanages.

**Most importantly**, we need to collect accurate data on the outcomes for children as this is the only way we will know if the lives of children are actually improving and their rights are respected.
We have become better in listening to care leavers and hearing their stories, but we need to get better at engaging them to be part of the solution – helping to define what good quality care looks like and the types of support that care leavers need.
We have a strong framework in place, in many countries we have the legislation and the political will, we know much more clearly what works, we now need to focus on accelerating implementation, both to assist governments where they are challenged and holding them accountable—particularly by ensuring that children’s ideas, views and experiences help to shape lasting reform.