Developing Foster Care in Vietnam: A Literature Review

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ABSTRACT

From a social work perspective, this literature review aims at guiding the development of foster care in Vietnam by discussing current research about foster care from different countries. The literature presents major differences between foster care systems in social democratic states such as Scandinavian countries and liberal welfare regimes such as Canada and the UK. Rehabilitation and family reunion is the number one priority in Sweden while the principle of permanency guides all policy-making in the UK. As a result, in the UK national adoptions are preferred which does not require parental consent, while Sweden places children in long-term foster care. Both forms of foster care have positive and negative aspects. The literature supports the claim that a permanent family is essential for healthy development of children. While developing foster care in Vietnam it is important to recognize the positive and negative aspects of foster care. Home-based care is better for child psychological development than institutional care. However, the lack of permanency within foster care might cause emotional instability among children. The best alternative must be assessed in each specific case. Extending kinship care with government support is recommended as a starting point for the deinstitutionalization process in Vietnam. Foster care should replace institutional care when adoption or family reunion is not a possibility. In order to develop a comprehensive foster care system in Vietnam resources are needed to expand professional social work and deinstitutionalize child care. Institutional care can be reduced by supporting birth parents, expanding regulated kinship care and recruiting foster families. Each of the discussed procedures, issues and possible side effects should be seriously considered while implementing foster care in Vietnam. In addition, Vietnam's cultural and socio-economic context must also be taken into consideration.

Keywords: Foster care, Vietnam, institutional care, adoption, child welfare system

CHILD ABUSE

The overall aim of foster care is to support maltreated children and prevent child abuse. Since child abuse is a central theme within foster care this literature review begins by defining child abuse and discussing the causes of child abuse. Even though child abuse exists in all countries, the interpretation of the child abuse definition varies considerably across cultures. This paper will apply the following definition: "Child abuse is any form of physical, emotional or sexual mistreatment or neglect that causes injury or emotional damage" (Red Cross Canada, 2015). This definition is used within the Japanese child welfare system as well as in many other countries (Kadonaga and Fraser, 2015). Child abuse is a gender-based issue because there is a greater risk for girls to be sexually or emotionally abused compared to boys. The societal perception of women and children influences the occurrence and response

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to abuse. Besides, abuse of children is more common in patriarchal societies. Jones et al., (2014) suggests intersectionality as a useful theoretical approach when analyzing exploitation of children. This theoretical perspective argues that child abuse is a multidimensional problem which is affected by the social, economic, political and cultural context. As such, interacting systems of oppression influence the everyday experiences of children. There is a need for strong legislation against exploitation of children in regions where trafficking and sex tourism are common such as Vietnam for instance (Jones et al., 2014). Furthermore, the prevalence of child abuse is high within low-income groups since poverty causes stress and family conflicts. In Japan for example, over seventy percent of reported child abuse occurs within low-income families. Children living in poverty are at greater risk of victimization. Mental illness and substance abuse are other aggravating risk factors (Kadonaga and Fraser, 2015). Nevertheless, it is important to remember that all people living in poverty do not neglect or abuse their children. Similarly, all people who suffer from mental disorders are not bad parents. Instead, parents who experience issues of poverty or mental illness might require more support from their families or local authorities (Gonçalves de Assis et al., 2014). As the literature proposes, raising awareness of the causes of child abuse makes it easier for professionals and society as a whole to identify abuse and develop effective interventions against it. In Vietnam, abandoned children are often placed in institutional care. Institutional care is discussed in connection to foster care in the following section.

PSYCHOSOCIAL DEPREVATION

Developing foster care in Vietnam is essential because there is extensive research on the negative consequences of institutional care of children. Psychosocial deprivation is common amongst children who have lived in institutions such as orphanages (Troller-Renfree et al., 2014). A child's emotional and cognitive development requires love and attention. Children learn by imitating a caregiver. Lack of play and stimulation causes developmental delay and total apathy in worst-case scenarios. Institutionalized children often experience attention problems and learning disabilities. Mental disorders are common within post-institutionalized children as well (Troller-Renfree et al., 2014). Psychosocial deprivation of institutionalized children can be explained with the use of attachment theory. This theory claims that a close bond between the child and at least one adult is crucial for healthy development (Bolwby, 1970). A study from Romania by Troller-Renfree et al., (2014) shows that children removed from institutional care and placed in a foster family experience improved social, emotional and cognitive development. As a result, psychosocial deprivation can be limited or prevented if institutionalized children are placed with foster families at a young age. The effectiveness of foster care relies on the quality of foster care and the age of the child. Therefore, early interventions are recommended in order to promote healthy development as soon as possible for vulnerable children (Bolwby, 1970). In brief, the reviewed literature suggests that institutional care should be the last choice for out-of-home care of children. Instead, a fostering home-based environment would be better for child psychological development.

FOSTER CARE PLACEMENTS

There are different types of alternative care for children in need such as institutional care, kinship care and foster care. Child welfare policy seeks to protect children from harm. All

articles used in this literature review claim that abandonment, abuse and neglect are the most common reasons for foster care placements (Chanely and Spell, 2015). If parents are absent or lack the capacity to care for their children government authorities are required to intervene. This is not the case in all countries. Developing countries rely heavily on social institutions whereas developed countries have advanced foster care systems which rely mostly on foster families. Yet, adolescents who abuse drugs or engage in criminal behavior are sometimes institutionalized within developed countries as well, Sweden and Japan for instance. In these cases delinquents need more advanced care and supervision than foster families can provide (Kadonaga and Fraser, 2015; Swedish National Board of Health and Welfare, 2009). Japan has a developed and advanced child welfare system which draws resemblance to child welfare services in Australia and Sweden. However, due to a lack of Japanese foster families only ten percent of children in protective care live in foster homes. The remaining ninety percent of children lives in residential care which is a non-family-like institution. Compared to Australia, ninety-eight percent of children in protective care are placed in home-based care (Healy et al., 2011). According to Kadonaga and Fraser (2015) it is difficult to find foster parents in Japan because most couples want to adopt if they are unable to have biological children. Another reason for the low amount of foster parents is that children who live with their relatives are not registered by local authorities and it is therefore not regulated either. In addition, Japan has infant and children's homes which no longer exists in many parts of Northern Europe (Kadonaga and Fraser, 2015).

The Republic of Georgia's child welfare system has made significant progress. Since 2014, seventy-one percent of children under state care live in foster homes. The country has thereby almost eliminated institutional care of children. With a strong government initiative and support from UNICEF and non-governmental organizations, Georgia recruited 600 foster families by offering financial compensation. Poverty is the number one reason why parents abandon their children. Therefore, family reunion and prevention have also been prioritized by providing financial support to biological parents (Greenberg and Partskhaladze, 2014). In comparison, Vietnam and Georgia are both low-middle income countries while the population of Vietnam is significantly larger. The process of deinstitutionalization would therefore take much longer time in Vietnam. Still, the example of Georgia shows that eliminating institutional care for children is not an impossible task if the government is supported with enough resources.

KINSHIP CARE
It is called kinship care when a child is placed with a relative. Kinship care is preferred because children who live with a relative face lower risks of maltreatment and reentry into the foster care system than in non-relative foster homes (Jackson Foster et al., 2015). However, vulnerable children who are mistreated by parents often lack a strong social network. The possibility for kinship care is therefore limited. In Sweden only twenty percent of foster care placements are in fact kinship care. The remaining eighty percent consists of un-known foster families which have been evaluated and selected by social services (Swedish National Board of Health and Welfare, 2009). In some countries such as Sweden and Australia, local authorities are involved even when the child is placed with a relative. Kinship foster families are regulated in the same way as other foster homes. Yet, one difference

between foster care in Sweden and Australia is the financial support given to foster families. In Sweden foster parents receive a small salary for their services, while Australian foster parents receive a limited allowance which only partially covers the child's costs (Healy et al., 2011). Additionally, according to Swedish legislation, children must receive help from their foster families to maintain contact with their biological parents. In comparison, countries in Southern Europe do not require government authorities to regulate kinship care (Hedin et al., 2012).

THE BEST INTEREST OF THE CHILD

'The best interest of the child' is a theoretical perspective and a practical approach. It is based on the ecological systems theory and the Integrated Children's System (ICS) from the United Kingdom. The best interest of the child is the general public policy within the child welfare system in the United States, the United Kingdom, Australia, Canada, Scandinavian countries and other European countries (Bardzell and Bernard, 2015). This policy is mentioned as a key principle for child right fulfillment stated by the United Nations International Convention on the Rights of the Child (United Nation General Assembly, 1989). The aim of this policy is to prevent child abuse by placing children's needs in focus within all decision-making that influences children or their families. The child's wishes must be heard and taken into consideration. Everything must be explained to them based on their level of understanding (Hedin et al., 2012). In addition, the Integrated Children's System is a model which is used to evaluate parenting capacity, family and environmental factors and the developmental needs of the child (See figure below). The triangle is used to collect information about the child and assess their well-being. The ICS draws on Bronfenbrenner's ecological systems theory of human development. From this perspective children are viewed as a part of multiple interacting systems. Children interact with their environment and many external factors influence the development and well-being of children (Lindström and Dahlberg, 2006).
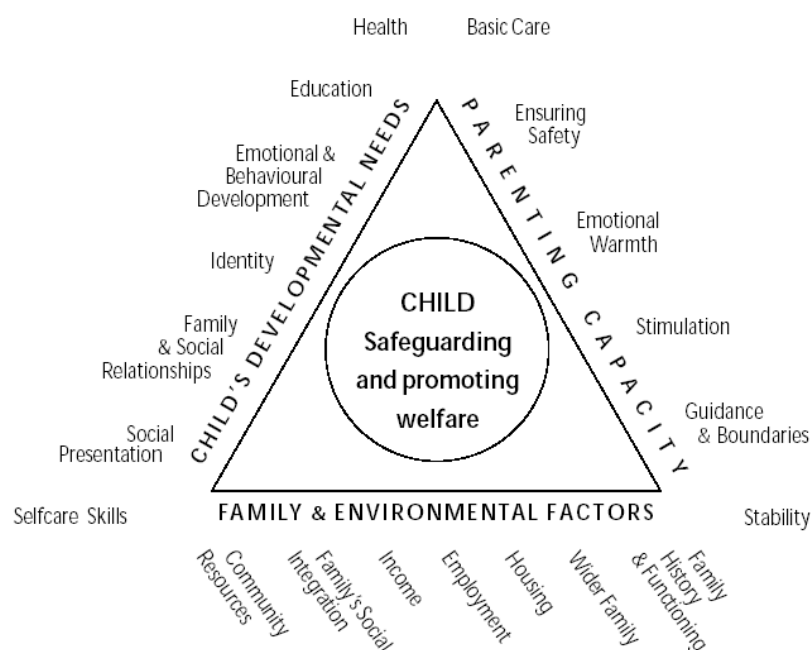

Figure 1.1 The Integrated Children's System (ICS). Source: Lindström and Dahlberg, 2006:37

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PARENTAL RIGHTS: ADOPTION VS. FOSTER CARE

The literature presents major differences between foster care systems in social democratic states such as Scandinavian countries and liberal welfare regimes such as Australia, Canada the United Kingdom and the United States (Healy et al., 2011). In Sweden for instance, national adoptions require consent from biological parents. As a consequence, approximately 200 Swedish children are adopted in Sweden each year while about 15'000 children are placed in foster care on any given day in 2008 (Swedish National Board of Health and Welfare, 2009). Reuniting the biological family is the number one priority because removing the child from birth-parents is viewed as extremely harmful for the child. Critiques argue that Scandinavian child welfare systems are parent-centered instead of child-centered. In fact, sometimes parents who have committed murder still have legal guardianship of their children (Andersson, 1999; Vinnerljung and Hjern, 2011). As a result, many children spend their entire childhood in foster families without being adopted. Long-term foster care might cause insecurity among children. Children often lose contact with their foster family when they reach adulthood. In comparison, adopted children are a part of the family for the rest of their lives not only during childhood. Youth without family or parental guidance are at greater risk of unemployment, homelessness and poverty (Lloyd and Barth, 2011).

In contrast, the principle of permanency guides all policy-making in the United States, Canada and the United Kingdom. Parents who have shown insufficient parenting capacity due to mental illness, alcohol or drug abuse may in fact lose all parental rights since adoptions do not require consent from biological parents (Vinnerljung and Hjern, 2011). In these cases the child is adopted instead of being placed in long-term foster care. The biological parents' parental rights are thereby terminated. The negative consequences of this principle are that the birth family cannot be reunited and adopted children are more vulnerable than children who live with their birth family. In fact, limited evidence has been found from US studies about the positive effects of foster care. Adoption is therefore preferred (Jackson Foster et al, 2015).

Vinnerljung and Hjern's (2011) Swedish research compares the long-term cognitive and educational outcomes between national adopted children and foster care children. Their study presents that foster care children have significantly lower cognitive and educational outcomes than adoptive children. Yet, adopted children preform lower than majority population peers. Additionally, young adults who have previously lived in foster families tend to have much lower self-esteem and more behavioral problems than adopted peers (Vinnerljung and Hjern, 2011). Similarly, research from the United States by Lloyd and Barth (2011) suggest that children who are adopted or reunited with their birth mothers have significantly better life chances than foster children. Likewise, Berger et al., (2015) claim that foster children have lower school achievements in comparison to children within socioeconomically disadvantaged groups. However, it is important to note that foster children might have been severely traumatized by birth parents before being placed in foster care. This trauma might be one reason behind foster children's poor outcomes. Also, these studies compare foster care with national adoptions. International adoptions might show different results (Lloyd and Barth, 2011; Vinnerljung and Hjern, 2011).

In brief, these studies support the claim that a permanent family is essential for healthy development among children. While developing foster care in Vietnam it is important to recognize the positive and negative aspects of foster care. Home-based care is better for child psychological development than institutional care. However, the lack of permanency within foster care might cause emotional instability among children. The best alternative must be assessed in each specific case. Extending kinship care with government support is recommended as a starting point for the deinstitutionalization process in Vietnam.

CHILDREN'S RIGHTS IN FOSTER CARE

Children's contact with birth parents during foster care placement is an essential part in foster care. However, it might not always be in the best interest of the child to stay in contact with a birth parent. Article nine of the United Nations Convention on the Rights of the Child states that all children have the right to keep in contact with their parents during separation, unless harmful for the child. This is important in order to preserve children's emotional attachment with parents and relatives. It also promotes a strong social network (Swedish National Board of Health and Welfare, 2004; United Nation General Assembly, 1989).

LGBT RIGHTS

Lesbian, gay, bisexual and transgender (LGBT) youth experience extensive stigma and social exclusion which drive some young individuals to commit suicide. In the United States LGBT youth is overrepresented among foster care children. About thirty percent of foster children identify as LGBT youth in the United States. Suicide is common within this group. These individuals risk physical and sexual abuse within their biological families and in foster care as well. Some young people hide their sexual orientation in order to avoid abuse. Some studies suggest that the risk of suicide is significantly reduced when LGBT foster youth are placed in foster homes with same-sex foster parents. LGBT parents can provide acceptance and support in ways that traditional families cannot (Bardzell and Bernard, 2015). However, this might be difficult in religious or traditional societies where LGBT people lack parental rights. The parental right of same-sex couples is a controversial issue. In the United States same-sex couples have been prohibited to adopt until the Supreme Court legalized gay marriage in all states and thus allowing all married couples to adopt. As of 2015, same-sex marriage is legal in twenty-one countries worldwide. In spite of these improvements, it still remains a challenge for LGBT individuals to become foster parents in the United States and elsewhere (Bardzell and Bernard, 2015). Therefore, Social Workers need to continue to raise awareness of these issues in order to prevent suicide and abuse of LGBT youth in Vietnam.

DEVELOPMENT OF FOSTER CARE IN VIETNAM

There is a high demand of disadvantaged children in Vietnam who need State protective services such as foster care. Ministry of Labor, Invalids and Social Affairs, MOLISA, (2009) confirms that around 1,54 million of children are under difficult circumstance, accounting for 18,2% of Vietnam's child population. Parents' divorce or separation has caused a significant increase in the number of this disadvantaged group (Vietnam's CRC report No. 4). As obligated by the UNCRC, Vietnam government has the judicial responsibility to provide

sufficient and effective care and protection for those children in needs of special protection, responding to all forms of child abuse and neglect.

Among State's efforts for child protection, literature reviews suggest the need to develop and strengthen foster care system in Vietnam. Firstly, the CRC and other international legislations highlight the importance of the family and that children should be brought up within a family environment (Hamilton et al., 2010). Specifically, the convention's Articles 20 and 21 claim that foster care should be considered as one of the most prioritized alternatives for protecting children deprived from family separations (United Nation General Assembly, 1989). Secondly, other types of alternative care for disadvantaged children have been reported to be less effective in Vietnam. Institutional care is believed as the only formal care available for Vietnamese children, which, however, is not the best option for the children because of the lack of an effective social work assessment practice (Hamilton et al., 2010). Consequently, the rate of children living in state institutional care is relatively low, at only around 0,05% of the total child population (UNICEF Vietnam, 2009). Meanwhile, oversea adoption mostly takes place with children under one year of age and also creates certain risks for the children and their birth families (UNICEF Vietnam, 2009). In addition, UNICEF and MOLISA's reports all confirm that the idea of foster care fits well with the approach of Vietnam's community-based child protection system and the traditional kinship care (MOLISA, 2009, 2015; UNICEF Vietnam, 2009a, 2009b).

The Vietnamese government has realized the importance of developing alternative care for disadvantaged children in general and foster care service in particular. Various legal documents have mentioned about the necessity to establish and strengthen foster care system, such as the Decision 38/2004, Decree 67/2007/NĐ-CP, the Adoption Law, the Marriage and Family Law, and the Law on Child Protection, Care and Education 2004, etc. Especially, the draft Children Law 2016, which is going to be ratified in late 2015 and comes into effect in March 2016, includes a large number of articles on alternative care and foster care. In addition, MOLISA has been piloting a foster care model in several provinces. For example, the newest piloting model in Dong Hy district, Thai Nguyen province has recruited ten foster families for ten disadvantaged children, who received both financial and technical support from the provincial social work center (MOLISA, 2015).

Despite the good efforts in laws and policies, the implementation of formal alternative care in general and foster care in particular has been very limited. Rosenthal (2009) blames that there is no "publicly-regulated foster care system" in Vietnam. Hamilton et al., (2010) also claim that though the Decision 38/2004 regulates on selecting and supporting foster care for families and children, this service is not well implemented in practice. In the reality, the type of foster care in Vietnam usually takes place informally with little to no formal investment from the Government (Hamilton et al., 2010). UNICEF Vietnam (2009a, 2010) also confirmed that formal foster care had not existed in Vietnam by 2010. Instead, informal foster care and kinship care, undertaken by the people themselves voluntarily, without or little support from the authorities, have long existed within Vietnamese tradition (UNICEF Vietnam, 2010). This conclusion was once confirmed by UNICEF Vietnam and MOLISA's leaders during a workshop on foster care in late 2014.

This literature review also provides some recommendations for foster care development in Vietnam, which might be worth mentioning hereby. First, UNICEF East Asia and the Pacific Regional Office's recommendations for a good child protection system (2009) suggest that a clearer legal framework as well as guiding processes on foster care should be developed in order to make it a responsive service to child abuse and neglect. Rosenthal (2009) and Hamilton et al., (2010) both support this idea by confirming the need to establish and spread out a clear formal procedure and minimum standards for foster care implementation. In addition, the government should invest in developing a database monitoring system for all children at risk and strengthen case management procedures and social work ethical principles in alternative care and foster care practices in order to better protect those children (Hamilton et al., 2010). Importantly, the implementation of foster care system in Vietnam should seriously consider the traditional practice and cultural norms of Vietnamese people, strengthening the State's monitoring and support for informal foster care and kinship care undertaken at the grassroots level (UNICEF, 2010; MOLISA, 2015). More communication and campaigns to synthetize foster care as a child protection service should also be staged (UNICEF Vietnam, 2009).

CONCLUSION

In sum, foster care systems are complex and demands extensive resources and monitoring. The most common reasons for foster care placements are abandonment, neglect and abuse (Chanely and Spell, 2015). Institutionalized children often experience psychosocial deprivation such as developmental delay or learning disabilities (Troller-Renfree et al., 2014). This is why countries such as Australia, Sweden and Georgia have almost eliminated institutional care for children. There are different kinds of alternative care such as institutional care, foster care and kinship care. There is an agreement within the literature that kinship care is preferred above non-relative foster care. Since relatives have a stronger bond with the child. This increases the child's well-being and sense of permanency (Jackson Foster et al., 2015). In conclusion, most research suggests that adoption and family reunion should be the primary goal for children because having a permanent family is crucial for child development. Foster care should replace institutional care when adoption or family reunion is not a possibility. In order to develop a comprehensive foster care system in Vietnam resources are needed to expand professional social work and deinstitutionalize child care. Institutional care can be reduced by supporting birth parents, expanding regulated kinship care and recruiting foster families (Vinnerljung and Hjern, 2011).

REFERENCES

Andersson, G. (1999). Children in permanent foster care in Sweden. *Child and Family Social Work*, *4*, 175-186.

Bardzell, A. & Bernard, N. (2015). Adoption and foster care. *Georgetown Journal of Gender & the Law*, *16*(1), 3-40.

Berger, L. M., Cancian, M., Han, E., Noyes, J., & Rios-Salas, V. (2015). Children's academic achievement and foster care. *Pediatrics*, *135*(1), e109-e116.

Bowlby, J. (1970) *Attachment and loss. Vol. 1., Attachment.* London: Hogarth.

Chanely, C. & Spell, M. (2015). "In the System:" A Qualitative Study of African-American Women's Foster Care Stories. *The Western Journal of Black Studies, 39*(2), 84-101.

Gonçalves de Assis, S. G., Pinto, L. W., & Avanci, J. Q. (2014). Nationwide study on children and adolescents in foster care in Brazil. *Paediatrics Today*, *10*(2), 135.

Greenberg, A. L., & Partskhaladze, N. (2014). How the Republic of Georgia has nearly eliminated the use of institutional care for children. *Infant mental health journal*, *35*(2), 185-191.

Hamilton, C., Barnes, R., & Regan, C. (2010). Analysis of the child and family welfare and protection services system in Vietnam. Retrieved from http://www.unicef.org/vietnam/Full_report_Child_and_Family_Welfare_and_Protection_Services_in_Vietnam_2010.pdf

Healy, K., Lundström, T., & Sallnäs, M. (2011). A comparison of out-of-home care for children and young people in Australia and Sweden: Worlds apart?. *Australian Social Work*, *64*(4), 416-431.

Hedin, L., Höjer, I., & Brunnberg, E. (2012). Jokes and routines make everyday life a good life—on 'doing family' for young people in foster care in Sweden. *European Journal of Social Work*, *15*(5), 613-628.

Jackson Foster, L. J., Phillips, C. M., Yabes, J., Breslau, J., O'Brien, K., Miller, E., & Pecora, P. J. (2015). Childhood behavioral disorders and trauma: Predictors of comorbid mental disorders among adult foster care alumni. *Traumatology*, *21*(3), 119.

Jones, A. D., Jemmott, E. T., Maharaj, P. E., & Da Breo, H. (2014). *An Integrated Systems Model for Preventing Child Sexual Abuse: Perspectives from Latin America and the Caribbean*. Palgrave Macmillan.

Kadonaga, T., & Fraser, M. W. (2015). Child maltreatment in Japan. *Journal of Social Work*, *15*(3), 233-253.

Lindström, A. M., & Dahlberg, C. (Eds.). (2006). *The best interest of the child*. Stockholm: Swedish National Board of Health and Welfare. (In Swedish)

Lloyd, E. C., & Barth, R. P. (2011). Developmental outcomes after five years for foster children returned home, remaining in care, or adopted. *Children and Youth Services Review*, *33*(8), 1383-1391.

Ministry of Justice (2015). Various laws and policies on child protection. Retrieved from http://moj.gov.vn

Ministry of Labor, Invalids and Social Affair – MOLISA (2015). Social support program for children. Retrieved and consolidate from www.molisa.gov.vn

MOLISA. (2010). National Program for Child Protection, 2011-2015.

Red Cross Canada (2015). 'Definitions of Child Abuse and Neglect' Retrieved from http://www.redcross.ca/

Rosenthal, E. (2009). The rights of children with disabilities in Vietnam - Bringing Vietnam's Laws into compliance with the UN Convention on the Rights of Persons with Disabilities. Retrieved from http://www.unicef.org/vietnam/Final_legal_analysis_report_in_E.pdf

Swedish National Board of Health and Welfare (2004). *Foster care guidelines in Stockholm, Sweden.* Stockholm: The municipal government. (In Swedish)

Swedish National Board of Health and Welfare. (2009). *Children and youth – Interventions in 2008.* Stockholm: Swedish Official Statistics. (In Swedish)

Troller-Renfree, S., McDermott, J. M., Nelson, C. A., Zeanah, C. H., & Fox, N. A. (2014). The effects of early foster care intervention on attention biases in previously institutionalized children in Romania. *Developmental science 18*(5), 713-720.

UNICEF East Asia and the Pacific Regional Office (2009). East Asia and the Pacific Region Child Protection Programme Strategy Toolkit

UNICEF Vietnam. (2009a). Adoption from Vietnam - Findings and recommendations of an assessment. Retrieved from http://www.unicef.org/vietnam/Eng_Adoption_report.pdf

UNICEF Vietnam. (2009b). Creating a protective environment for children in Vietnam: An assessment of child protection laws and policies, especially children inn special circumstances in Vietnam. Retrieved from http://www.unicef.org/vietnam/legal_review_on_cp.pdf

UNICEF Vietnam. (2010). An analysis of the situation of children in Vietnam. Retrieved from http://www.unicef.org/vietnam/sitan_2010_full_report_eng.pdf

United Nation General Assembly. (1989). Convention on the Rights of the Child. United Nations, Treaty Series, 1577(3).

Vinnerljung, B., & Hjern, A. (2011). Cognitive, educational and self-support outcomes of long-term foster care versus adoption. A Swedish national cohort study. *Children and Youth Services Review*, *33*(10), 1902-1910.