Better Care Network

GLOBAL FACTS ABOUT ORPHANAGES

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Better Options for Children in Orphanages

Most people assume that children in orphanages have no one to care for them.[1]   However, the reality on the ground tells another story. As is illustrated by Table 1, many of these children – 80 percent or more in some countries - have at least one surviving parent.   For example, in the aftermath of the Indonesia Tsunami in 2005, over 85 percent of the children placed in orphanages still have at least one parent alive.[2] Poverty is the main factor pushing most children into institutional care. *The large number of children in orphanages with at least one surviving parent is a reminder that many children can be reunited with family*.   The primary need is to strengthen families and communities so they can provide what their children need.

Statistics on "orphans" have caused some confusion, because most international organizations have used the term to refer to children who have lost one or both parents,[3] but many people understand the term to refer to children with no parents. The reality is that the vast majority of orphaned

Table 1: Children in orphanages are highly likely to have one or even both parents alive	
Country	Estimated percentage of children in orphanages with at least one parent alive
Afghanistan	85-90%
Belarus	87%
Bolivia	59%
Kyrgyzstan	80%
Sri Lanka	80%
Tajikistan	80%
Zimbabwe	39%

Sources: On Afghanistan, see Country Reports to the Second International Conference on 'Children and Residential Care: New strategies for a new millennium,' Stockholm, 2003, p. 4; on Belarus, see ibid, p. 13; on Bolivia, see ibid, p. 18; on Kyrgyzstan, see ibid, p. 105; on Tajikistan, see ibid, p. 181; On Sri Lanka, see Save the Children, Sri Lanka, `Children in Institutional Care: The Status of their Rights and Protection In Sri Lanka,' 2005, p3; on Zimbabwe, see G. Powell, et al., 'Children in Residential Care: The Zimbabwean Experience,' UNICEF & the Ministry of Public Service, Labour & Social Welfare, 2004, p.22.

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[1] "Orphanage" is used in this note to refer to facilities for the short- or long-term care of a child other than in a family setting. Other similar terms include residential care, institutional care, or group care.
[2] Save the Children UK, `Protection Fact Sheet: The need for family and community-based alternatives to children's homes.'
[3] *Children and AIDS: Third Stocktaking Report*, 2009, UNICEF.

and vulnerable children worldwide are being care for by their surviving parents and extended family members, not in orphanages. For example, in Zimbabwe, which has had one of the highest HIV rates in the world, a UNICEF study found that over 98 percent of children who have lost one or both parents are living with families.[4]

While in certain situations residential care may be an appropriate care option for some children, it must be appropriately regulated and based on thorough child and family assessments. The inappropriate use of orphanages can lead to children losing connections to their family, community, and ethnic and cultural group –the relationships vital to their long-term development and eventual social integration.   Orphanages, which continue to proliferate worldwide, are viewed as an easy solution, encouraging families to use as a copying mechanism for poverty, and leaving the underlying issues untouched. They reduce the pressures on governments to provide adequate social and welfare support to enable children to live with their families.

> According to Save the Children UK, the estimated number of children in orphanages is 8 million.

The following sections provide an overview of evidence and research around the reasons behind children being placed in orphanages, global trends, the effects of institutional care on children, and, lastly, recommendations for actions.

Why Children End Up in Orphanages

Poverty
Studies have shown that poverty, not the absence of family, is the most common reason for placing children in orphanages. For example:

- ***Eastern Europe and Central Asia*** – Research has shown that material poverty at household level is one of the key motives for placing children in orphanages.[5]
- ***Brazil*** – Twenty-four percent of children and adolescents living in orphanages were placed there due to poverty.[6]
- ***Sri Lanka*** – Over 50% of children in orphanages were admitted due to poverty.[7]

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[4] Powell, G. et al., 'Children in Residential Care: The Zimbabwean Experience,' UNICEF & the Ministry of Public Service, Labour & Social Welfare, 2004, p. ii.

[5] Draft UN Guidelines for the Appropriate Use and Conditions of Alternative Care for Children, accessed on the Better Care Network website, http://www.bettercarenetwork.org

[6] The Research Institute of Applied Economy (IPEA) and the National Council of the Rights of the Child and Adolescent (CONANDA), O direito à convivência familiar e comunitária: Os abrigos para crianças e adolescents no Brasil, IPEA and CONANDA, Brasília, 2004, p. 56.

[7] Save the Children, Children in institutional care in Sri Lanka: The status of their

- *Zimbabwe* – UNICEF found that "The single most important factor contributing to the admission of children to orphanages is poverty."[8]
- *Bulgaria* – The number of children in orphanages increased by more than 20 percent from the early 1990s to the end of the decade, as living conditions deteriorated.[9]

Education

Frequently children are sent to orphanages as a way to access education.

- *Sri Lanka* – Twenty percent of the children in institutional care in North-East Province were there to access education.[10]

Disability

Children with disabilities are at special risk of being placed in an orphanage (placement is often result of over diagnosis or misdiagnosis).

- *Central and Eastern Europe and Commonwealth of Independent States Region* –A child has a 46-times increased likelihood of being in an orphanage if disabled. In the *United States* there is a 36-fold increased likelihood.[11]
- *Jamaica* –Sixty-five percent of children with developmental or physical disabilities live in homes run exclusively for children with disabilities.[12]

Ethnicity

Ethnic minorities and other socially marginalized groups tend to be disproportionately represented among children in orphanages.

- *Sweden* – Children over 12 are three times as likely to be in an orphanage if from a non-Swedish ethnicity.[13]
- *Australia* –Aboriginal children represent 237 per 10,000, while the non-Aboriginal population is only 36 per 10,000.[14]

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rights and protection in Sri Lanka, 2005.

[8] Powell, G. *et al*., p. 25.

[9] Gantcheva, R. & Kolev, A. Children in Bulgaria: Growing impoverishment and unequal opportunities, Innocenti Working Paper Series No. 84, UNICEF, Florence, January, 2001, p. 35.

[10] *Home Truths: Children's Rights in Institutional Care in Sri Lanka*, Save the Children in Sri Lanka, p. 12.

[11] For CEE/CIS data, see the Innocenti TransMONEE database for 2003. US figures taken from the Institute of Education Sciences, US Department of Education, for 2002-3.

[12] Thoburn, J, 'Improving the life chances of children who need out-of-home care: some lessons from a cross-national study for social work teachers and researchers,' University of East Anglia School of Social Work, Norwich, UK

[13] See Country Reports to the Second International Conference on 'Children and Residential Care: New strategies for a new millennium,' Stockholm, 2003.

[14] Thoburn.

- *Bulgaria* – Approximately 60 – 80 percent of children in orphanages are from the Roma minority who represent only four percent of the total population.[15]
- *Romania* – Forty percent of children in orphanages are Roma, even though the Roma people account for less than 10 percent of the country's population.[16]

Violence

Violence within the family can place those affected children at a higher risk of being placed in an orphanage than their peers. In Latin America, for example, SOS Children's Villages found that 73 percent of children in their Villages in *Venezuela* had prior experiences of physical or psychological violence, including sexual violence.[17]

Cost of Care in an Orphanage

In contrast to the popular perception that orphanages are a cost-effective solution, the costs of maintaining a child in an orphanage (or any form of institutional setting) tend to be significantly higher than alternative forms of family and community-based care.

- In *Central and Eastern Europe and the Former Soviet Union*, orphanage care is twice as expensive as the priciest alternative (small group homes); three – five times more expensive as foster care; and approximately eight times more costly than providing family and community support services to vulnerable families.[18]
- The World Bank reported that the annual cost for one child in residential care in the Kagera region of *Tanzania* was over USD $1,000, almost six times the cost of supporting a child in a foster home.[19]

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[15] Project appraisal document on a proposed loan in the amount of Euro 8.8 million (US$ 8.0 million equivalent) to Republic of Bulgaria for a child welfare reform project. Budapest: Human Development Unit, Europe and Central Asia Region. http://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2001/03/08/000 094946_01021705363340/Rendered/PDF/multi_page.pdf (accessed 11 December 2006).

[16] Tobias, D., Moving From Residential Institutions to Community-based Social Service in Central and Eastern Europe and the Former Soviet Union, World Bank, Washington DC, 2000, p.25.

[17] United Nations, Report of the Independent Expert for the UN Study on Violence against Children, op. cit., p.185.

[18] Save the Children UK, Protection Fact Sheet: The need for family and community-based alternatives to children's homes.

[19] "Coping with the Impact of AIDS" in Confronting AIDS: Public Priorities in a Global Epidemic (Mead Over and Martha Ainsworth) World Bank, Oxford University Press, 1997, p. 221 and personal communication with Mead

- In *South Africa*, the monthly cost of statutory residential care can be approximately six time more expensive than providing care to children living in vulnerable families (i.e., home based care and support for HIV/AIDS affected families), and four times more expensive than statutory foster care or adoption.[20]

- In *Eritrea*, the average economic cost for one child in residential care averaged about $1,900; in *Benin* about $1,300. The corresponding cost of a child's integration into a family in Eritrea was about $100.[21]

- A recent cost comparison in *East and Central Africa* by Save the Children UK found residential care to be ten times more expensive than community-based forms of care.[22]

- A study of residential care in *Moldova* by the EveryChild Consortium concluded that "residential care is expensive, easy to access, ineffective in providing for a child's proper development and, in large measure, an overreaction to the problems facing children and their families."[23]

Regional and Country Trends in Overall Number of Orphanages

- In the *Central and Eastern Europe and Commonwealth of Independent States*, the proportion of all children who are in institutions has increased. While the total number of children living in orphanages is estimated to have fallen by over 100,000,[24] the birth rate in the region has also fallen dramatically, and in many of the region's countries, the proportion of children in orphanages has actually increased.[25]

Over. The text actually reports that institutional care was 10 times as expensive as foster care but a subsequent review of the data indicated that the ratio was closer to six to one.

[20] Desmond, C. & Gow, J, "The Cost Effectiveness of Six Models of Care for orphans and Vulnerable Children in South Africa", University of Natal, Durban, South Africa, Prepared for UNICEF South Africa, 2001, p. 37.

[21] Menahem Prywes, Diane Coury, Gebremeskel Fesseha, Gilberte Hounsounou, and Anne Kielland, "Costs of Projects for Orphans and other Vulnerable Children: Case studies in Eritrea and Benin," World Bank, July 2004, p. 1.

[22] Swales, DM, "Applying the Standards: Improving quality Childcare Provision in East and Central Africa", Save the Children UK, 2006, p. 108-110.

[23] Larter D. & Veverista, E. "Capacity Building in Social Policy Reform in Moldova," EveryChild Consortium, October, 2005, p.13.

[24] Carter, R, Family Matters: A study of institutional childcare in Central and Eastern Europe and the Former Soviet Union, Every Child. 2001, p. 16.

[25] UNICEF, Innocenti Social Monitor 2006: Understanding Child Poverty in South-Eastern Europe and the Commonwealth of Independent States. UNICEF Innocenti Research Centre, 2006, p 62. available at http://www.unicef-icdc.org/publications/pdf/ism06_eng.pdf

- In the **UK, Italy and Spain**, the number of children living in children's homes has dropped significantly over the last 20 years.
- Anecdotal evidence from the field, as well as concrete figures for countries such as **Uganda** and **Zimbabwe**, suggest that in some developing countries there is a worrying surge in the number of orphanages being built for children. The number children in orphanages in **Uganda** have nearly doubled between 1998 and 2001.[26] Similarly, the numbers have approximately doubled in **Zimbabwe**.[27]
- This trend appears to extend beyond sub-Saharan Africa, and includes countries such as **Afghanistan**, which experienced an "alarming increase in residential care," with numbers in some Kabul institutions doubling between 1998 and 2003.[28]

Negative Impact of Orphanages on Children

- Age is a key factor. The evidence strongly suggests that the experience of orphanage care is most damaging for children under the age of five,[29] and especially so for children under the age of three, since it is during these critical years that children need to develop the physical, cognitive, psychological, and social foundation for the rest of their lives.
- Extensive research in child development has shown that living in an orphanage from an early age can result in severe developmental delays, disability physical stunting, and potentially irreversible intellectual and psychological damage. The negative effects are more severe the longer a child remains in an orphanage, and are the most severe in younger children.[30] One study on orphanages in Europe, for example, found that young children (0-3 years) placed in orphanages were at risk of harm in terms of attachment disorder, developmental delay (i.e., reaching developmental milestones and gross and fine motor skills), and neural atrophy in the developing brain.[31]
- The ratio of children to staff in an orphanage is nearly always higher than to adult carers in a home setting and the continuity and dependability of

[26] Uganda Country Report, Ugandan Ministry of Labour, Gender and Social Development, 2001, p.197.
[27] Powell, G. et al, p. ii.
[28] See Country Reports to the Second International Conference on 'Children and Residential Care: New strategies for a new millennium,' Stockholm, 2003., p.6
[29] Tolfree, D. `Community Based Care for Separated Children,' Save the Children Sweden, Stockholm, 2003, p. 8.
[30] On age of stay, see ibid ; on length of stay, United Nations, Report of the Independent Expert for the United Nations Study on Violence against Children, op. cit., p.189.
[31] See Mapping the number and characteristics of children under 3 in institutions across Europe at risk of harm, EU Daphne Programme 2002-3, Copenhagen, Denmark, 2004, World Health Organisation

relationships is lacking. These deficits deprive a child from the continuous, attuned relationships with caregivers that are necessary to developing attachments, a fundamental human requirement. In contrast, families, even those that are poor, provide these essential developmental connections. Nothing can make up for the personal attention and love of a parent, aunt, or grandmother.

- Children living in orphanages are more likely to have health problems and are at increased risk of infectious diseases.[32]

- Children raised in orphanages often suffer from severe behavior and emotional problems, such as aggressive behavior, antisocial development, have less knowledge and understanding of the world, and become adults with psychiatric impairments.[33]

- Popular perception is that orphanages protect children from abuse and neglect. However, research has shown that children in orphanages can face a higher risk for violence and abuse than in family settings, especially if they are disabled.[34] These risks stem from a variety of sources, including staff and other children. Reports have documented instances of children subjected to beatings with hands, sticks, and hoses, and having their heads hit against a wall, while in orphanages for children with disabilities children may be subjected to violence as part of their purported "treatment."

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[32] Johnson, D. E., et al.,(1992) The health of children adopted from Romania. *The Journal of the American Medical Association* 268, 24. *See also* Mandalakas, A. M., et al.,(2007) Predictors of *Mycobacterium tuberculosis* Infection in International Adoptees, *Pediatrics*, 120: e610-e616

[33] Wolkind, S. N. (1974) The components of "affectionless psychopathy" in institutionalized children, *Journal of Child Psychology and Psychiatry*, 15, 215-220. *See also* Frank, D. A., Klass, P. E., Earls, F., & Eisenberg, L. (1996) Infants and young children in orphanages: One view from pediatrics and child psychiatry, *Pediatrics*, 47(4), 569-578.

[34] Groce, N. *Violence against Disabled Children*, UN Secretary Generals Report on Violence against Children, Thematic Group on Violence.

Recommended Actions

- ***Orphanages should be an intervention of last resort and temporary solution***.   All other options should be explored before placing a child in an orphanage.   If it is selected as a care option, it should be used only under these specific circumstances: for a limited time; based on assessment of the child and family situation; according to a appropriate international regulations and oversight; and be as family-like as possible (low child-to-caregiver ratios, integrated into the community, child-focused, and used only in appropropriate circumstances).

- Keeping in line with the belief that orphanages is an option of last resort, it is strongly advised that whenever possible a deinstitutionalization process be planned and implemented. Deinstitutionalization is the process of moving children from large care facilities (i.e., orphanages) into community-based, family care alternatives. A deinstitutionalization plan combines the following: preventative measures (prevent or at least minimize new placement of children in institutions), the development of alternative care options (kinship care, foster care, and adoption), and the development of an individualized case plan for each child who currently reside in institutional care.   ***Every effort should be made to keep children with their families, in their communities, or in a family setting.***

- Alternatives such as ***family support services, kinship care, foster care, supporting child-headed household***, and ***domestic adoption*** are the recommended care options.   These options are not only better for the child's physical and mental well-being but is also a cheaper and more sustainable solution.

- ***Governments, donors, organizations should***: reallocate resources to more effectively support alternative care options; ensure that family support services are in place; invest in alternative care options for families; ensure that institutions are in line with international standards and guidelines; and used only as a last resort and temporary measure.

Recommended Resources and Reading

- Bilson, C. & Cox, P. (2007). Caring about Poverty: Alternatives to institutional care for children in poverty. Journal of Children & Poverty, 13(1):37-55.
- Carter, R. (2005). *Family Matters: A Study of Institutional Childcare in Central and Eastern Europe and the former Soviet Union*. London: EveryChild.
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- UN Guidelines for the Appropriate Use and Conditions of Alternative Care for Children (Draft), available on BCN website, http://www.crin.org/bcn/initiatives.asp.
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