

Romania

Country Profile on the European Semester and COVID-19 crisis from a children's rights perspective

Contributor:
**Hope and Homes for
Children (HHC) Romania**

35.8%

Children at risk of poverty or social exclusion (AROPE) in 2019

Children in Alternative Care - CiAC

	Total number of institutions/SGHs	Number of children
Institutional care (in total) in 2019	170	5,206
Institutions for children with disabilities	74	2,401
Institutions for children 0-3	N/A	N/A
Small group homes (SGHs) in 2019	696	6,892
Number of children in family-based/foster care in 2019		34,562
Number of children in kinship care		16,519
Number of adoptions		1,251
Number of unaccompanied minors in 2019		N/A

Alternative Country Specific Recommendations for 2021

- **Support further deinstitutionalisation (DI) of children in care:** All institutions for children should be eligible for closure and DI should be supported through a wide range of services and actions, such as prevention, reintegration of children in their families, developing family-based care, developing integrated networks of community-based care services, and support for young care-leavers.
- **Provide access to non-segregated and inclusive education, including digital learning, for all children:** Support children to attend non-segregated and inclusive schools and achieve better educational outcomes, as a prerequisite for better professional careers and successful integration in their communities. This can be done through specific support measures such as books, transportation, and other school supplies' provision.
- **Increase access to social housing.** This should include increasing the number of available social housing, but also simplifying the procedures for people in vulnerable situations. It is particularly important to pay attention to care leavers.
- **Develop accessible infrastructure and transport:** For children with disabilities and their families, it is essential to ensure the accessibility of buildings, accessible transport, and community-based services.
- **Increase access to primary health services and prevention at community level for groups in vulnerable situations.** Health and access to health services is especially important for groups in vulnerable situations from disadvantaged communities. There should be a clear separation between health-related infrastructure investments and investment related to social services for groups in extremely vulnerable situations and those at risk of social exclusion in particular. Otherwise, the investments in health-related infrastructure could absorb most of the funds available.



Summary of Ratings

Government's support for families and children during the COVID-19 pandemic:



Positive EU impact on more child-centred legislation at national level:



2020 Country-Specific Recommendations:



Government's efforts to provide sufficient resources and services for families and children:



Government's protection of children's right to participate:



Impact of the COVID-19 crisis

The first restrictive measure imposed by the government in Romania was to close down schools in March 2020. They remained closed until June 2020, with only a few exceptions¹. This unprecedented situation and the launching of online education has posed several challenges such as making online education accessible to all children, especially those at risk or in poverty and preparing for the implementation of a mix of online and face-to-face education starting from September.

The Ministry of Education decided to provide all children in need with basic technological equipment and access to the internet. However, neither the Ministry nor the School Inspectorates (at county levels) have proper information on which children need this support. Regarding the second measure, the legislative process has introduced a mix of online and face-to-face education. The support of the government was thus rather limited.

It is estimated that out of approximately 3 million children attending school, 32% do not have access to any kind of online education. This means that over 1 million children could have a gap of half a year of education, due to the fact that they did not attend online classes between March-June 2020.²

A phone line was launched for the children and adults who needed information on COVID-19 (by the government) and another one was launched by a charity in Baia Mare and the Ministry of Labour (as part of an EU-funded project). There is no data, for now, on how successful these initiatives were.

Regarding the children in care, a quarantine was placed on all state-managed services in terms of visits and the staff needed to spend two weeks in isolation before being in touch with the children at work.³ The quarantine and ban on visiting has not been lifted yet, only the measures for the staff were lifted.

There were three main challenges for children living in institutions:

- The confinement, which was even more difficult in the institutional environment. The fact that the children were not allowed to leave the institutions, not even for their daily routine outside (going to school, going out and meeting friends, going for walks etc.) had a negative impact on them and their reaction was often frustration which translated in higher predisposition for aggressive or self-harming behaviour.
- The ban on visits meant the absence of face-to-face contact between children and their biological parents, relatives or friends and had a detrimental effect on the children and their mental health.
- As schools closed, the children in institutions were supposed to start online education. Most did not have access to

¹ These exceptions included children in the 8th and 12th forms, for two weeks, starting from 2 June 2020, in order to help them prepare for their final exams.

² IRES: 32% dintre elevii nu au acces la echipament electronic. Doar jumătate dintre copiii au avut contact cu profesorii la toate materiile.

³ Noi măsuri de protecție socială, aprobate de Guvern.

computers/laptops or tablets in order to pursue online education. The situation was even worse for children who need special education with one-to-one tutorials. Overall, the continuation of education was not ensured, which was also due to overstretched and/or incompetent staff.

Lack of PPE and other hygiene materials was a general problem. Only a limited number of institutions managed to secure these materials which according to Hope and Homes for Children (HHC) Romania posed a real threat to the health of the children and the staff.

Small Group Homes (SGH) were subjected to the same restrictions as the larger institutions in terms of visits, staff quarantine and lockdown. Similarly, they suffered the same lack of cleaning and hygiene materials, however, as there are only 10-12 children in these homes, the staff/children ratio is better and the children's needs were better met by the staff including attending an online education.

The challenges for children in foster families were mainly linked to their mental-health. The children and their foster carers struggled with the prolonged confinement and from not being able to see their friends or to go out. There was potentially an additional problem if one member of the foster family became infected, there were no protocols to address and resolve it. However, as far as HHC Romania is aware, no such cases have so far occurred.

National civil society organisations have recorded a reduction in funding sources, due to the fact that many businesses and donors experienced a decline in their operations. At the same time NGOs were requested to provide more services or in a different way that required more finances.

Preventing the unnecessary entry of children in alternative care

Almost 35.8% of Romania's children are at risk of social exclusion and poverty and with 1 million work contracts terminated or on hold during the pandemic⁴. HHC Romania assumes that the number of children entering alternative care will grow in the upcoming months. As observed before there are two main triggers for the institutionalisation of children: poverty and a lack of alternative services (as well as prevention networks).⁵

There have been certain measures taken, but no special gatekeeping mechanisms were set up. The local authorities maintained their gatekeeping role, but unfortunately, as the needs became greater and more diverse, the support was not adequate. Food and hygiene packages, while a good initiative, were not sufficient and there is no official data regarding whether

this support has reached their beneficiaries and how efficient it was.

Progress on child protection and care reform

The crisis delayed the reforms in the area of child protection as the Ministry of Labour focused more on the relief measures for the COVID-19 crisis and not so much on the DI process. A new law 272 - regulating child protection in Romania was adopted in June 2020. HHC notes that while this does not specifically help to accelerate the deinstitutionalisation process, it has provisions regarding children in care, and in particular young care-leavers who have reached the age when they must move from care into independent living.

Care leavers

HHC Romania observed that the situation of care leavers became very difficult during the pandemic and there were no special services to

⁴ Situația contractelor individuale de muncă suspendate/încetate, la data de 28 mai 2020.

⁵ Studiu de fundamentare pentru Strategia națională privind incluziunea socială și reducerea sărăciei, 2015-2020.

support them. First, those who were about to leave state care remained in care due to the pandemic and confinement. For some it was an undesired prolongation of dependence. Others who could leave struggled to find accommodation as due to the stigma nobody wanted to rent places to young care leavers.

Moreover, many care leavers lost their jobs, finding themselves with no financial resources and even when the state secured the unemployment allowance, until the money came, they were left with no financial resources at all.

Children in migration

There were 2,140 asylum requests received in 2018 in Romania, but it does not indicate how many of them were for children. The main reception places for unaccompanied and separated migrant children are the services of the child protection system in Romania. The alternative services (SGHs) are used, depending

on availability, but institutional settings are mostly the norm.

EU funds

During the pandemic, the government diverted EU funds – with the approval of the European Commission – to support persons in vulnerable situations (not only children, but also adults) in order to provide them with hygiene supplies, disinfectants and other materials. More than 1.2 million people were targeted for this type of support and the total amount spent was RON 141.2 million. Another batch of supplies in the form of food packages was provided in April 2020 which amounted to a total of RON 1 billion.⁶

A significant amount of EU funds has been allocated for families in vulnerable situations and children in care in the 2014-2020 period. The specific prioritisation of de-institutionalisation (DI) in the Partnership Agreement⁷ constituted a great commitment from both

Romania and the European Commission to the implementation of DI reform. It led to a specific allocation from the European Regional Development Fund (ERDF) and the European Social Fund (ESF) for de-institutionalisation in the corresponding operational programmes, namely the Regional Operational Programme (ROP) and the Human Capital Operational Programme (HCOP).

For instance, from 2016-2018, the project “The elaboration of the plan to de-institutionalise children from institutions and to ensure their transition to community care” (SIPOCA 2) was implemented. It was followed up by the call for ROP OS 8.3 – social services, children in vulnerable situations. Moreover, a number of ESF calls were launched in 2018 to address the development of social and socio-professional services at community level for children and young people and reduce the number of children and young people placed in institutions by consolidating the foster network.

There was also an ESF call for proposals to consolidate the foster network. This was particularly important because the foster care networks are facing a number of challenges: the current foster carers are handing in their certifications for several reasons, including the fact that they have better jobs or have reached retirement age. Most recently, in November 2019, an ESF call under the HCOP was launched: “My First Room” – innovative tools for the social and professional reintegration of young care-leavers.

In the context of the COVID-19 pandemic HHC Romania suggests a greater flexibility in funds allocation is needed, especially the re-directing of funds in case of need. In this way, vulnerable families and children will benefit more from these projects, allowing them to overcome risk and crisis situations. Furthermore, future investments, both through the national budget and EU funds (REACT-EU, and the 2021-2027 Multiannual Financial Framework - MFF) should be used to⁸ fulfil

⁶ 1,18 milioane de români primesc pachete de igienă distribuite de Ministerul Fondurilor Europene.

⁷ Partnership Agreement Romania 2014RQ16M8PA0Q1.1.2, page 52

⁸ See also the European Expert Group on the transition from institutional to community-based care with Hope and Homes for Children (2019) - Checklist to ensure EU-funded measures contribute to independent living by developing and ensuring access to family-based and community-based services.

the alternative country specific recommendations proposed by HHC Romania.

Testimonies

“The pandemic triggered emotions such as stress and uncertainty for me and my colleagues of all ages. Schools were closed and we needed to stay away from friends. The educators were calm and supported us and so did the people from HHC and they provided us with advice and made time for us so we could talk.”

John, aged 12

“We were encouraged to say if we did not feel well and if we were worried about the virus. This is why, whenever we felt that something was not right, we always went to the staff or to the people from HHC and talked to them. And they always had an answer for us and a good word.”

Michaela, aged 10

“This so-called social distancing brought us closer, I learnt how to appreciate my colleagues and how to listen to them. I became more patient with others and with myself. The team spirit amongst the staff, the kindness of the social workers and psychologists at HHC – this all restored my faith that things will be OK in the end.”

Marius, aged 16

“We were assigned different tasks and we were told, again and again, the basic hygiene rules. They are very important anytime, but especially now. In our daily programme we had special time slots for being reminded of hygiene rules and their importance and we were encouraged to come forward and talk to staff members any time we felt something was wrong.”

Adrian, aged 9

One of the young adults who had left the institution and was made redundant when the pandemic appeared became so desperate that he asked to be re-institutionalised, as he had basically no money at all. Sharing an apartment with a friend, none of them could pay the rent and, while the owner agreed to a reduction of the rent, he still stated that rent needed to be paid, putting the young adults at risk of being evicted.

We intervened by providing food stamps for the period of the pandemic, which provided basic living resources until the unemployment allowance was provided by the state. Also, we covered the remaining rent costs, to avoid eviction, because he would have been in a very difficult situation had he been evicted. As he put it in June: “I was desperate because there was nothing that I could do, I could not control the situation. I really wanted to work and earn money, but there was nowhere to work and, therefore, no way to earn money. I felt so helpless and lost...I believe it was the first time I felt this way for a long time. I mean, in the institution I managed to build some sort of protection system for myself and things were rather predictable. I knew it was going to be difficult once I left, but I figured that if I work hard, thing will be OK. Well...I could not work, that is the problem. And everything was downhill from there on.”

Marius, aged 22

For more information, please consult the [2020 Eurochild Report](#) or contact Enrico.Tormen@eurochild.org and Zuzana.Konradova@eurochild.org