1. The impact of the pandemic on children in alternative care

The pandemic has exacerbated existing inequalities in our society, and children have been among those hardest hit. The negative impact on children can have lifelong consequences. All children have faced some disruption to their lives, but Eurochild believes that children in alternative care have been disproportionately affected by this pandemic.

Children’s experiences during the pandemic were collated by Eurochild in late 2020 and published in the “Growing up in lockdown: Europe’s children in the age of COVID-19” report. This report provides a unique in-depth, country-by-country assessment of the situation of children’s rights and conditions, and measures some of the concrete effects of the coronavirus pandemic on children across Europe. The report compiles information from 25 countries gathered between March and September 2020 during the first wave of lockdowns. Eurochild members provided much of the information in these reports. They are also identified throughout this report. Since then, second and third waves of lockdowns have potentially amplified the impact of the pandemic on causing further negative impact on the lives of children in European countries.

Out of 25 country profiles, 20 also looked at the situation of children in alternative care. The impact of the COVID-19 crisis was felt just as acutely, if not more so, by children in out-of-home care. The children were at times denied outside contact during lockdown. This included access to school and their school friends, sports and other outside facilities, and worse still their own families. Being confined to their residential setting created strains for both children and staff, with disputes breaking out and the mental health of many individuals suffered during that time.

Residential care

The reports from Belgium, Bulgaria, Croatia, Czech Republic, Denmark, Estonia and France were among those to highlight the stress the situation caused children in alternative care.

In Belgium, children in residential facilities were not able to receive visitors during the lockdown and were not able to visit home, which was report as very difficult for them. The report by the Children’s Rights Commissioner for Flanders\(^1\) stressed that this forced additional separation from the family, deeply affected both the parents and children, and could not be justified. Children were not allowed to go outside of the buildings and this was observed to have a heavy impact to their mental well-being. Even after some measures were lifted, these young people still had to stay inside and were not allowed to walk or cycle like many of their peers living at home.

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\(^1\) Kinderen en jongeren worden nog altijd geleefd door strenge coronaregels | VRT NWS: nieuws
In Croatia, the main challenges for children living in institutions was the complete isolation from their biological families, friends and their wider social network. Children experienced mental health problems and there was inadequate support. Residential settings were not equipped to contain the virus because they lacked the necessary PPE as well as the extra space needed for isolating infected children. Moreover, after the March 2020 earthquake in Zagreb, the alternative care institutions were closed down and a significant number of children were returned to their biological families without the necessary preparation and ongoing support, who could not provide suitable living conditions and support. In the chaos caused by the virus and underdeveloped support for families and children at risk, institutions provided at least a minimum standard of safety and security, following strict government protocols on COVID-19.

The Czechia report sums up the problems faced: “All children had to stay in the facility for the whole time which meant an enormous increase in work for the professionals in these institutions. The need for extra staff was not met by the authorities so other organisations had to provide support. Education had to be provided online which staff were not always equipped to deal with. ...Two months of social isolation led to many conflicts.” There was very limited or no capacity to provide mental-health services to children who needed this support.

In Greece Research Roots Centre explained how children living in residential settings became “invisible” during the corona virus crisis. In other countries, there was no information about what should happen if any child became ill, e.g. how to proceed, whether they should be tested, or if there should be any communication with their birth family, members from Bulgaria and Poland highlighted.

In Portugal, children who were placed in alternative care had to enter the institution alone and could not be accompanied and helped by their case manager. The child had to take the COVID-19 test and even with a negative result, it was compulsory for them to isolate for 14 days. After an intervention by civil society organisations this measure was abolished.

**Online education**

The COVID-19 crisis also made it very clear that the school plays a big role in the lives of children. Just as parents in family homes struggled with home schooling, this was the experience of many staff in residential facilities, who did not necessarily have the teaching skills, digital skills or equipment needed to support the on-line education of the children in their care.

Our Czech member reported that supporting educational progress in all residential settings was a large challenge. Social workers helped children to attend online education. In some cases, there was only one social worker who had to assist five to eight children of different ages without adequate technological equipment.

For Estonia, challenges included limited resources for adequate home schooling (competency of social workers, lack of computers, insufficient internet connection etc.). Staff were overstretched and at were classes as high risk of becoming severely ill due to the pandemic as most social workers are older people. Similarly, online education was a major challenge for foster families.
The need to step up deinstitutionalisation (DI) reforms for children in the care system was mentioned in many of the reports, but rarely in a positive light.

In response to COVID-19 in Poland, re-institutionalisation and significant delays to further transition from institutional to community- and family-based care was recorded. The limit for the number of children per institution (which was set at 14) was suspended.

In Bulgaria, the Permanent Expert Working Group on deinstitutionalisation set up to monitor the government’s action plan on DI had no access to information about the current developments. In a few instances, the recommendations given by the group were not passed to the government, and as a result, no feedback was received or action taken. The crisis made it even harder for the group to function in a meaningful way, as all requests from members of for online meetings were declined.

The report focusing on Hungary deplores that there is no deinstitutionalisation reform in the country. Social workers and professionals, including civil society organisation staff, lack supervision and better organisation since they are responsible for many child protection cases. The system has become more bureaucratic and the best interests of each child is not taken into account. Civil society organisations protecting children and families are often left out of consultations and decision-making processes. For example, a report from a home for children with challenging behaviour in Kalocsa, revealed abuse of children by caregivers, and it was reported that prostitution and drug abuse was being carried out between children themselves.

Children in migration

In Greece, which faces many migrant arrivals, there is no centralised service to tackle the issues related to unaccompanied children. In Bulgaria unaccompanied children are guaranteed 24-hour care, provided by the International Organisation for Migration (IOM). However, there is no central standard for the legal representation of unaccompanied minors, which remains largely a formality. The opening of the Safe Zone2 is a positive development in ensuring the safety and care of unaccompanied children. However, the number of children who have left before being fully processed and for whom there is no information about their location, still remains very high.

In Poland, according to the national law, unaccompanied minors seeking asylum are to be placed in institutional care facilities or in a professional foster family. In practice asylum seeking children are rarely placed in a professional foster family. During the pandemic, access to asylum procedures has been significantly restricted.

In Spain there has been overcrowding in reception centres and a disruption of evaluation and referral processes. During the lockdown the administrative procedures were paralysed or slowed down. This led to unaccompanied minors who were studying losing their opportunity to participate in educational activities.

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2 Opening of a Safety Zone for unaccompanied asylum-seeking children | International Organization for Migration (iom.bg)
Preventing the unnecessary entry of children in alternative care

In Bulgaria, the prolonged isolation, along with the economic consequences for families (such as loss of employment and income) has given rise to other types of family crises - increased cases of domestic violence, neglect, online bullying, deteriorating mental health, or psychological problems for families and children. These risk factors required the intervention of highly qualified specialists to identify and undertake the necessary measures. However, these needs have been met only partially, therefore it is necessary to invest in increasing the capacity of specialists in the child protection system, with a view to build a better professional early warning system for the early identification of risk factors.

In Croatia, there were no gatekeeping mechanisms available to help families in vulnerable situations during the pandemic. FICE Croatia, a NGO working to end institutionalisation and supporting care leavers in Croatia, outlines that these mechanisms are not systematically provided by the social welfare sectors even in “normal” times. More attention needs to be given to developing adequate policies and systematic monitoring of the reasons for separating children and young people from their families.

In Hungary, 35% of children enter alternative care due to poverty and social exclusion. Local community-based services for families at risk are missing or are very limited. The Family, Child and Youth Association estimates that approximately 150,000 children will enter the child protection system in the upcoming period as a consequence of the pandemic.

Almost 36% of Romania’s children are at risk of social exclusion and poverty and with 1 million work contracts terminated or on hold during the pandemic this number is likely to increase. Hope and Homes for Children Romania, an organisation focused on reforming the childcare system by closing down old state institutions for children and by developing a range of family-based childcare services, assesses that the number of children entering alternative care will grow in the upcoming months. There are three main triggers for the institutionalisation of children observed: poverty and a lack of alternative services as well as prevention networks.

Following the findings from Eurochild members, it is estimated that the number of children entering alternative care will grow, in some countries such as Greece, Hungary, Romania and Slovakia this is likely to be as much as 30%.

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3 Erőforrásokat a megelőzésre és az alapellátásra - az ombudsman a gyermek családból való, elsődlegesen anyagi okból történő kiemelések gyakorlatáról - Közlemények - AJBH
2. Policy recommendations - Maintain, strengthen and expand investments in deinstitutionalisation reforms

- Child protection reforms need to be supported through a wide range of services and actions, such as prevention and integrated networks of community and family-based care services. Appropriate protection for unaccompanied migrant children and a halt to detentions for migrant children needs equal attention.

For children in alternative care, the need for deinstitutionalisation is repeatedly emphasised by Eurochild members. The need for harmonised systems is stressed in the Eurochild Growing-up in lockdown report: Europe’s children in the age of COVID-19⁴ report, as well as a call for support for young care leavers.

- Capacity building of civil society organisations working in this field – as service providers, as advocates – is crucial. They need a space for sharing good practices & mutual learning. Good practice on supporting education for children in care is much needed.

Civil society organisations play an important role in delivering for children in alternative care. They also come with innovative solutions and advocate to better address the needs of families at risk, children in care and care leavers. They represent a wide range of organisations. These include: parents’ associations, care leavers associations, service providers registered as NGOs and advocacy and policy organisations. In many cases one organisation has different functions.

- Technical assistance, such that provided by Eurochild to civil society organisations in Greece, Croatia and Poland and beyond, can help to increase specific skills to better address needs of vulnerable families and children.

Eurochild, a member-driven organisation, has developed a range of activities to support Eurochild’s Children in Alternative Care thematic group members via webinars / peer learning sessions responding to identified needs. This included: preventing children from entering the care system, developing standards for quality foster care, education for children in alternative care, empowering children and young people in care and those who are leaving care.

⁴ 2020-Eurochild-Semester-Report.pdf
In cooperation with the Martin James Foundation, Eurochild provided three organisations in Greece, Croatia and Poland with technical assistance that included re-granting and tailored capacity building, to develop national child protection reforms. This approach has proved to be an effective tool to place children in alternative care in the spotlight by raising awareness about their needs (including children with disabilities), involving stakeholders who make decisions about children’s placements or provide care services (including residential facilities) and funding (including municipalities), and by participating in national legislative processes related to deinstitutionalisation strategies and action plans.

- More effort, support and obligations to enable children in care to express their views and influence the decisions that affect them

In line with the newly adopted EU Strategy on the Rights of the Child to promote and improve children’s inclusive and systemic participation at the local, national and EU levels, special attention should be given to enabling the involvement of children in alternative care in all decisions that affect them.

This is essential for children staying in residential settings or institutional care. There should be guidelines that enable children’s participation. This area is not sufficiently mapped. If there are good practices, it is very important to share these, raising awareness about the importance of children expressing their opinions in out-of-home care.

During the pandemic’s lockdowns children in alternative care felt this deficit even more as documented by an example here:

“In the #jongerenovercorona survey conducted by the Children’s Commissioner in Flanders, more than half of the young people in a residential facility said that they were not allowed to participate in co-designing the rules. Albeit the period of lockdown and related restrictions were unreasonably difficult for children and young people, the findings revealed that they are not seen and heard enough. Their perspective is insufficiently weighed against other interests. In particular, children and young people who are less visible, in a facility or with a disability still feel the daily impact of the strict rules.” (Belgium country profile, Eurochild’s 2020 Growing-up in lockdown report: Europe’s children in the age of COVID-19)

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5 Flemish Child Rights Commissioner’s online survey #jongerenovercorona: children called corona stupid, boring, exhausting, annoying and a “life waster”.

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