Children in alternative care in the Child Guarantee National Action Plans
A summative analysis

POLICY BRIEF #2 ON FINDINGS AND RECOMMENDATIONS FROM THE DATACARE PROJECT
0.1 Introduction

Since 2000, there has been a firm commitment by the European Union (EU) and its Member States to the deinstitutionalisation of children in institutional care and support for their transition to care that is family- and community-based. The European Child Guarantee is the first dedicated EU tool for policy and funding to tackle child poverty and social exclusion by identifying the most disadvantaged groups of children and ensuring their free and effective access to essential services. For children in alternative care, the European Child Guarantee is an important opportunity to measure progress on deinstitutionalisation and the transition to community- and family-based care, and in doing so catalyse momentum for reform and meaningful improvement of the lives and prospects of one of Europe’s most disadvantaged groups of children.
There is, at present, no obligation for EU countries to collect and report data to the EU on an agreed set of comparable indicators to measure the state of play of deinstitutionalisation and the transition to family and community-based care in the EU.

Despite the lack of comparable indicators, the DataCare project, a joint initiative of Eurochild and UNICEF’s Europe and Central Asia Regional Office (ECARO), demonstrates that all surveyed countries in Europe collect data on children in alternative care. The DataCare project used the officially published data on this group of children from the surveyed countries to calculate the following indicators for each country:

1. The rate of children aged 0-17 in alternative care at a specific point in time (per 100,000).
2. The rate of children aged 0-17 in residential care at a specific point in time (per 100,000).
3. The rate of children aged 0-17 in formal family-based care at a specific point in time (per 100,000).
4. The percentage of children aged 0-17 in residential care (of the total number of children aged 0-17 in alternative care at a specific point in time).

If EU Member States follow common guidelines for data collection and reporting, and methodological work is implemented, which is required to improve data quality and international comparability, data from the national sources in EU countries on children in alternative care could be aggregated and compared regularly at EU level.

In early 2023, Eurochild conducted an analysis of the publicly available European Child Guarantee National Action Plans (NAPs). The results show that 10 EU Member States have already included some or all of the above indicators into the monitoring indicator frameworks of their NAPs. Furthermore, countries inside and outside of Europe are considering these indicators as part of the wider global and regional efforts to improve data comparability, availability, and quality with a view to arrive at common definitions and standards for data collection on children in alternative care. The work of UNICEF’s TransMonEE initiative, and the UN Economic Commission of Europe’s Conference of European Statisticians are both relevant to this effort.

These positive developments and Eurochild’s analysis of the publicly available NAPs demonstrate that there is a real momentum for change to improve the availability, quality and international comparability of data on children in alternative care across EU countries.

2 The National Action Plans can be accessed on the European Commission’s website here. For Romania, the publicly available draft National Action Plan can be accessed on the National Authority for Protection of Children’s Rights and Adoption, here.
Summary of Child Guarantee National Action Plans’ (NAPs) coverage of children in alternative care

In early 2023, and as part of the DataCare project, Eurochild conducted an analysis of 20 publicly available NAPs to examine their coverage of children in alternative care. This analysis assessed NAPs publicly available as of the 1st of March 2023 with the following criteria:

- Are children in alternative care, care leavers, and/or children ageing out of alternative care, identified as a group of children at risk of poverty and social exclusion in countries’ NAPs? Are specific measures for government action to support children in alternative care identified and included in countries’ NAPs?
- Are existing publicly available data on children in alternative care used in countries’ NAPs?
- Do countries’ NAPs include dedicated indicators to monitor progress in policy implementation for children in alternative care?
- Do countries’ NAPs specify how either EU or national financial resources will be used to fund measures to improve access of children in alternative care to services?
The key findings of Eurochild’s analysis are summarised below and are further elaborated upon in the sections that follow.

**Summary of key findings:**

- All 20 countries with NAPs available to public review identify children in alternative care as one of the most disadvantaged groups of children. 16 countries – BE, BG, HR, CY, CZ, FI, FR, EL, IT, LX, MT, PL, PT, RO, ES, and SE – include specific measures to support children in alternative care in their NAPs. However, the extent of the measures included in the NAPs varies considerably across countries. Examples of measures from countries are shared below.

- 12 countries – BE, BG, HR, CZ, EE, EL, FI, IT, LX, MT, PT, and RO – refer specifically to the situation of care leavers in their NAPs. As with children in alternative care, the extent of measures for care leavers varies. But for some countries, specific measures to support care leavers with the transition to independent living are included.

- 17 countries – BE, BG, HR, CY, CZ, DK, EE, EL, IE, IT, LX, MT, PL, PT, RO, ES, and SE – have used existing data on children in alternative care to inform their NAPs.

- 10 countries – BG, CZ, HR, EE, EL, ES, IT, PL, PT, and RO – have monitoring frameworks including selected indicators on children in alternative care in their NAPs.

- 3 countries – CY, RO and SE – include an action in their NAP to carry out specific research and/or surveys on children in alternative care until 2030 to better understand their needs and the actions required to adequately meet them.³

- Only 8 countries – HR, CY, CZ, EL, IT, PL, PT, and RO – specify how either EU or national financial resources will be used to fund the planned measures for children in alternative care included in the NAPs.

**What do National Action Plans (NAPs) say about children in alternative care?**

16 countries include specific measures and actions to support children in alternative care in their NAPs.

12 countries refer specifically to measures to improve the situation of care leavers in their NAPs, such as supporting the transition to independent living or continued state support to meet their needs.

At time of this analysis’ writing (10 March 2023), there were 19 NAPs available on the European Commission (EC) website.⁴ These were: BE, BG, HR, CY, CZ, DK, EE, FI, FR, EL, IE, IT, LU, MT, NL, PL, PT, ES, and SE. A draft NAP for Romania, used for

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³ Note that Ireland is also carrying out longitudinal research on children in care and adults who were in care as children, but this is not specified in their NAP.

⁴ The NAP can be accessed on the European Commission’s website [here](https://ec.europa.eu/). For Romania, the publicly available draft NAP can be accessed [here](https://example.com).
consultation with civil society and national authorities in late 2022, was also available to the public during the NAP analysis, and awaiting final approval from the Government of Romania for its submission to the EC. For the purpose of this report, all 20 NAPs that were publicly available in March 2023 were included into the analysis.

The NAPs for AT, DE, HU, LT, LV, SK, and SI are pending, as of writing. To achieve the best outcomes for the concerned children, the NAPs should be developed in close cooperation and consultation with sub-national authorities, civil society organisations and other stakeholders working with and for children in alternative care. Moreover, the lived experience and perspectives of children who grow up in alternative care and care leavers should be facilitated and used to inform the development of the NAPs. The implementation of the measures set out in the NAPs should be backed by a well-developed framework and action plan to monitor progress made, evaluate outcomes for the concerned children, and strengthen the existing alternative care information systems to ensure data availability, quality and comparability.

Children in alternative, especially institutional, care are explicitly identified among the groups of children most in need of support under the Council Recommendation establishing a European Child Guarantee (as per section 5e). Countries are recommended to take children in alternative care into account when designing and implementing their national measures as part of their NAPs. All 20 NAPs that were analysed refer to children in alternative care. However, in some of the NAPs, children in alternative care are simply identified among key groups of children in need, in line with the Council Recommendation. In others, namely 16 NAPs, concrete measures to meet the needs of this group of children are included, and funding allocations indicated.

There is a welcomed emphasis in many NAPs on specifying groups of children who are overrepresented in alternative care.

- 7 countries – BE, CY, EE, EL, MT, RO, and ES – specify the need for dedicated measures for children with disabilities, due to their disproportionate representation in alternative care placements.
- 4 Countries – CY, EL, LX, PT – identify the specific needs of children with a migrant or ethnic background, or children who are unaccompanied – within their needs assessment of their country’s alternative care system. However, in the case of Greece, data on unaccompanied children are counted separately to the official data on children in alternative care.
- 3 countries – FI, FR, and MT – identify the importance of addressing the risk of violence and/or abuse of children in alternative care settings.

It is also promising that 12 countries – BE, BG, HR, CZ, EE, EL, FI, IT, LX, MT, PT, and RO – refer specifically to the situation of care leavers in their NAPs. Some countries also specify measures in their NAPs to support care leavers with their transition to independent living. Increasingly, there is a recognition internationally that care leavers may require additional support once they reach adulthood and/or transition from alternative care settings. 

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Key findings from 16 NAPs on specific measures for children in alternative care and care leavers

16 NAPs – BE, BG, HR, CY, CZ, FI, FR, EL, IT, LX, MT, PL, PT, RO, ES, and SE – include specific measures to support children in alternative care and/or advance reforms linked to deinstitutionalisation and the transition from institutional to family- and community-based care options. Examples of measures included in countries’ NAPs are shared below:

- In **Finland and France**, measures to tackle violence and abuse perpetrated against children in alternative care settings are planned.

- **Greece** is planning to expand and develop the capacity of national professional foster care systems, strengthen support services at the municipal and community level, and transition from closed residential care units to family- and community-based practices, such as Semi-Independent Living apartments for adolescents and young adults.

- **Italy** wants to extend its Programme of Intervention for the Prevention of Institutionalisation (PIPPI) initiative.

- For **Portugal**, the deinstitutionalisation of children and young people is identified as a stand-alone strategic objective, with a suite of interventions planned, including prevention programmes, efforts to improve Portugal’s underdeveloped foster family network, and provide additional pedagogical support to children and young people in residential care homes.
• **Spain** is planning to launch an ambitious deinstitutionalisation strategy, where increasing the number of protected children in foster care, including those with disabilities, is prioritised. By 2025, no child under the age of six should live in residential settings in Spain. By 2030, no child under the age of ten should live in residential settings; family foster care should be provided for 70% of children in alternative care; no centre will house more than 30 children (except first reception); and the system as a whole shall adopt an intervention model built on evidence-based and person-centred care practices.

• **Poland** indicated that the country will develop a central registry of children placed in foster care and educational institutions (residential care) as part of their NAP. Data system strengthening planned as part of the Child Guarantee is welcomed; earlier research carried out by the DataCare project identified that many countries are carrying out similar efforts.  

• Measures to strengthen the provision of continued care to care leavers are included in the NAPs for **Bulgaria** (developing working habits, social skills, housing assistance, and family planning), **Croatia** (housing allowance and social mentor), **Czechia** (strengthening general supports), **Estonia** (provision of preparation for, and continued care for care leavers), **Finland** (reforming aftercare supports), **Greece** (transfer of adolescents and young adults from institutions to semi-independent living apartments), **Malta** (aftercare plan to transition to independent living), and **Romania** (supporting the transition to independent living).

Do countries’ NAPs make use of the available data on children in alternative care and include indicators to measure progress and outcomes?

As highlighted, there is a range of measures for children in alternative care included in the NAPs, which have been published to date. Have these been informed by evidence? And how will progress in implementing the measures be monitored and outcomes for the concerned children measured?

Effective child rights policy making requires evidence and monitoring is an essential part of child rights policy implementation. There is a growing international evidence and knowledge base on children in alternative care including analysis, guidance and tools, which can inform this work at national level.

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7 Austria, Belgium (Wallonia-Brussels), Bulgaria, Czechia, Denmark, Finland, Greece, Hungary, Ireland, Italy, Lithuania, Malta, Netherlands, Poland, Romania, Slovakia, Spain. Source: Eurochild and UNICEF (2021): Better Data for Better Child Protection Systems in Europe.

8 In line with the General comment no. 5 (2003), General measures of implementation of the Convention on the Rights of the Child, General comment no. 5 (2003), General measures of implementation of the Convention on the Rights of the Child (un.org).

9 Specifically, the work of Eurochild and UNICEF ECARO in the DataCare project: the ongoing work to improve data availability, quality and comparability within UNICEF ECARO’s TransMonEE network; the work of the Task Force of the Conference of European Statisticians on improving Statistics on Children including follow up actions; global actions by the Transforming Children’s Care Global Collaborative Platform, and UNICEF’s protocol and tools for a national census and survey on children in residential care and its Administrative Data Maturity Model (ADaMM). See also UNICEF ECARO (forthcoming) At home or in a home, revisited—Taking stock of the situation of children in alternative care in Europe and Central Asia: Developments in alternative care data systems.
17 countries are using existing data to describe the situation of children in alternative care in their NAPs.

The results of the DataCare research showed that all EU countries produce statistics on children in alternative care, though there are differences, e.g., in the indicators they use, in the data they collect and their methods for data collection. 17 countries – BE, BG, HR, CY, CZ, DK, EE, EL, IE, IT, LX, MT, PL, PT, RO, ES and SE – have included data on children in alternative care into their NAPs.

While disaggregation of data on children in alternative care in the NAPs is not standardised across countries, commonly used disaggregation variables are age, sex, and disability status.

10 countries have monitoring frameworks including selected indicators on children in alternative care in their NAPs.

Considering the lack of reporting requirements at EU-level on children in alternative care, the EC could consider using available data from national sources on children in alternative care to fill in the gaps in EU-level data collection in this area and invest in the methodological work and guidance required to improve comparability and data quality, and to close data gaps.

Of the 20 NAPs available at time of analysis, 12 countries have included monitoring and evaluation frameworks to measure progress in implementation of measures and outcomes for the concerned children. 10 countries – BG, HR, CZ, EE, EL, ES, IT, PL, PT, and RO – have included indicators on children in alternative care into their NAP monitoring and evaluation framework.

Malta included measures with targets identified, and occasionally finances attached, but the NAP is lacking a comprehensive monitoring framework. Ireland and Finland both state that comprehensive monitoring and evaluation frameworks will be developed for their NAPs in the coming period. In the case of Ireland and France, both countries are either using or planning to use indicators on children in alternative care for monitoring other national policy initiatives, but those are not reflected in their Child Guarantee NAPs.

11 Bulgaria, Croatia, Cyprus, Czechia, Estonia, Greece, Italy, Poland, Portugal, Romania, Spain, and Sweden.
3 countries include an action in their NAP to carry out specific research and/or surveys to better understand the needs and actions required to support children in alternative care.

Three countries – CY, RO, and SE – identify actions in their monitoring and evaluation frameworks to carry out specific research and/or surveys to improve their understanding and policy response to the needs of children in alternative care.

• **In Cyprus**, a study on the comprehensive reform of its child protection system, including structures and programmes is planned as part of the Council of Ministers’ Ad Hoc Ministerial Committee.

• **In Romania**, the National Authority for the Protection of Children’s Rights and Adoption, who is leading the Child Guarantee’s implementation as it relates to children in alternative care, will commission a study on the causes of long-term placement in alternative care.

• **In Sweden**, an inquiry into children and young people in the care of society is due to be carried out in 2023.

While not referenced in the country’s NAP, **Ireland** also aims to generate new knowledge about the lives, experiences and outcomes of children and young people in care and beyond, and the factors influencing those experiences, through a combination of primary research and strengthened administrative data collection and analysis. ¹²

Only 8 countries specify how EU and/or national financial resources will be used to fund measures to reduce the risk of poverty and increase the social inclusion of children in alternative care.

It is important that the ambitious measures countries intend to implement under the Child Guarantee are appropriately resourced both by the EU funding attached to this initiative (bound by the 2021 Common Provisions Regulation to prioritise deinstitutionalisation¹³), but also from national budgets to ensure a sustained approach to the transition to family- and community-based care for children.

Of the countries that have published their NAP monitoring and evaluation frameworks, eight countries – **HR, CY, CZ, EL, IT, PL, PT, and RO** – specify how EU and/or national financial resources will be used to fund measures for children in alternative care.

The findings of the DataCare project show that countries like Cyprus, Malta and Ireland use data to develop policies and budgeting for improved outcomes for children in alternative care. Adequate resourcing is one of the key components to provide appropriate and high-quality alternative care. ¹⁴

¹² Department of Children, Equality, Disability, Integration and Youth’s press release announcing: Research and data project on children in care and adults who were in care as children (May 2022).

¹³ The Common Provisions Regulation, adopted in 2021, states that EU funds need to “be implemented in a way that promotes the transition from institutional to family-based and community-based care.” Additionally, “The Funds should not support actions that contribute to any form of segregation or exclusion, and, when financing infrastructure, should ensure the accessibility for persons with disabilities.”

Conclusions and recommendations
Children growing up in alternative care have very often experienced significant trauma before, during and after being placed in care. Particularly residential care is known to expose them to additional risks. The 2020 UNICEF White Paper on small-scale residential care concludes that even when alternative care is provided in a smaller residential care facility, children are still deprived of their fundamental right to a family environment and to permanent relationships with life-long caregivers. This type of care can only ever be an option, if it “…represents the least detrimental alternative, is clearly in the best interests of the child, offers high-quality short-term care solutions and lasts only until the moment when appropriate support services are in place that enable birth, alternative or adoptive families to meet the needs of the child.” Consequently, it is critical to measure progress made in policy implementation covering children in alternative care and the outcomes for this group of children.

The DataCare project identified data that is regularly collected and published on children in alternative care in countries in Europe and demonstrates that this data can be used to calculate some basic indicators for measuring progress in deinstitutionalisation and transition to community- and family-based care across countries while acknowledging the need for methodological work to improve data comparability and quality.

In addition to monitoring progress made in such child protection reforms, there is a need for countries to better understand:

1. the profile of the children who are at risk of being placed in care and of the children in alternative care;
2. the necessity\(^2\) of alternative care placements including the effectiveness of prevention and family support measures;
3. the suitability and quality of alternative care provision;
4. the success of reunification and reintegration efforts;
5. the safe transitioning of children in care to adulthood and independent living; and
6. the outcomes of policy implementation for the concerned children.

This requires that countries progressively build the evidence base on children in alternative care to inform their policymaking, planning, programming, and evaluations covering this group of children. **Countries in Europe are encouraged to develop comprehensive monitoring and evaluation frameworks for children in alternative care and strengthen their alternative care information systems to close data gaps and improve data quality and comparability over time.** As highlighted, children themselves have a critical role to play in these processes, and there are international guidance and tools available to support alternative care data system reforms. Some EU countries, such as Luxembourg, are using, for instance, the EU Technical Support Instrument to strengthen stakeholder and child participation and their national monitoring systems for implementing their children’s rights strategy and their NAP.

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The Council Recommendation on establishing a European Child Guarantee constitutes a unique opportunity for meeting the needs of the estimated 760,000 children in alternative care in EU countries until 2030, for monitoring progress and outcomes of policy implementation, and for closing identified data gaps. Thanks to the linkage to the European Social Fund plus and national funding, this can become a reality. As demonstrated by the analysis of the 20 NAPs, there is already a commitment by 16 EU Member States within the European Child Guarantee to improve the lives of children prior to, during and after they are placed in alternative care. It is hoped that other countries will follow suit.

With this in mind, this analysis concludes with the following recommendations:

1. For the European Commission and in particular the Social Protection Committee – Indicator Sub-Group to:
   - Develop guidance on monitoring progress in EU child policy implementation and evaluating outcomes for children – engaging also civil society and children in this process;
   - Use the available data from national sources on children in alternative care to fill in the gaps in EU-level data collection in this area;
   - Invest in the methodological work required to allow more comparable results.

2. For Eurostat and National Statistical Offices in the EU to actively engage in the operationalisation of the Guidance on Statistics on Children endorsed by the 70th plenary session of the Conference of European Statisticians in 2022.

3. For the European Commission to continue supporting Member States through the Technical Support Instrument in the implementation and monitoring of their national strategies and action plans on children’s rights and the European Child Guarantee.

4. For Governments to seize the available policy instruments and support mechanisms and work with National Statistical Offices on assessing the quality of their data systems on children in alternative care, and develop and implement data improvement plans – engaging also civil society and children in these processes.

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Annex 1.
Child Guarantee National Action Plans – what do they say about children in alternative care (CiAC)?
<table>
<thead>
<tr>
<th>Country</th>
<th>Are CiAC identified in the NAP?</th>
<th>Are care leavers identified?</th>
<th>Are existing data on CiAC used?</th>
<th>Are indicators included to monitor CiAC in the monitoring framework?</th>
<th>Are there clear measures to support CiAC?</th>
<th>Are financial resources for measures for CiAC identified?</th>
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Information key:

X = Included in the NAP   TBC – to be confirmed upon final analysis.
– = Not included   n/a = not available as NAP not published (in AT, DE, HU, LV, LT, SK & SI).
(t) = based on rough translation, as no English version or language the analysis team possesses.

* Cyprus: Funding is specified, but mostly from 2020/2021 budgets, and not for the duration of the European Child Guarantee 2021-2030. However, government commissioned research into child protection reform is to be drawn from the 2021-2027 co-financed EU/national budget, hence it is included in the analysis above.

** Finland: “Relevant metrics for children & young people in foster care will be chosen,” but not as of Feb 2023.

*** Luxembourg: A project funded by the European Union through the Technical Support Instrument (TSI) and implemented in Luxembourg by UNICEF ECARO, in cooperation with the European Commission’s Directorate-General for Structural Reform Support (DG REFORM), aims to support Luxembourg to promote and improve children’s rights policies through better child rights monitoring and effective participation of children and other relevant stakeholders.

**** Romania: Based on draft NAP published in November 2022 on the National Authority for the Protection of Children’s Rights and Adoption, available here & pending final submission to the European Commission.
Annex 2.
What indicators for children in alternative care are included in Child Guarantee National Action Plans (NAPs)?
At the time of writing (1 March 2023), the following indicators have been included in 10 of the 20 analysed NAPs.

<table>
<thead>
<tr>
<th>Country</th>
<th>Indicators for children in alternative care in NAPs</th>
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<tbody>
<tr>
<td>Bulgaria</td>
<td>• Number of children placed in residential care services.</td>
</tr>
<tr>
<td>Croatia</td>
<td>• Number of children in residential care. • Proportion of children in residential alternative care per 100,000. • Proportion of children in family alternative care (foster care and organised housing with occasional support) out of the total number of children in all forms of alternative care.</td>
</tr>
<tr>
<td>Czechia</td>
<td>• Percentage of children transitioning from institutional care to quality family care. • Capacity of preventive, community and specialist services for children and families at risk (including services for young adults leaving foster family care). • Establishment of a coordinated collaborative process among all stakeholders as young adults leave the foster family care to ensure their continued support. • (Average) number of children in family groups/households. • Number (and scale) of projects supporting young adults leaving foster care.</td>
</tr>
<tr>
<td>Estonia</td>
<td>• Percentage of children placed in non – institutional alternative care out of all children placed in alternative care. • Percentage of children separated from the family among children aged 0–17.</td>
</tr>
<tr>
<td>Greece</td>
<td>• Number of children in residential care out of the total number of children in alternative care (foster care, SIL) at a specific point in time (per 100,000), by sex, age, disability status, migration status. • Number of children in alternative care per type of care (foster care, residential care, SIL) by sex, age, migration status, disability status. • Number of children exiting residential care, by reason. • Number of children entering residential care, by reason. • Number of children removed from their biological family care. • Share of children with disabilities exiting residential care and placed in a family environment, by sex, age, migration status. • Number of unaccompanied children per type of accommodation, by sex, age, migration status. • Number of adolescents (15-18 years old) who were living in institutions and were transferred to semi-autonomous living structures, by year, location. • Number of direct hosting and short-stay shelters in operation for children to be in foster care, by year, by location. • Number of children with disabilities above 67% and / or severe mental illness placed in the care of professional foster carers. • Share of foster cares receiving foster care benefit. • Number of Semi-Autonomous Adolescent Living structures in operation, by year, by location • Number of structures and emergency accommodation places for unaccompanied minors.</td>
</tr>
<tr>
<td>Country</td>
<td>Indicators for children in alternative care in NAPs</td>
</tr>
<tr>
<td>-----------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| Italy     | • Number / Prevalence of children in alternative care – Institutional care, by age; gender; family composition; migrant background; condition of children; school attended; disability and type; parents’ educational qualifications; employment status of the parents.  
  • Number / Prevalence of children in alternative care – Foster care, by age; gender; family composition; migrant background; condition of children; school attended; disability and type; parents’ educational qualifications; employment status of the parents.  
  • Note: data is unlikely to be available for these indicators before 2026.                                                                                   |
| Poland    | • The percentage of children covered by family forms of alternative care in the total number of children in alternative care.                                                                                                                       |
| Portugal  | • Number of children and young people in danger with promotion and protection measures in natural life environment.                                                                                                                   
  • Number of children and young people with Tutelary Educational Measures.                                                                                     
  • Rate of children 0-17 years old in alternative care at a given moment.                                                                                       
  • Rate of children aged 0-17 years in residential care at any given time (per 100,000).                                                                            
  • Rate of children 0-17 years old in formal family-type care in moment (per 100,000).                                                                                
  • Percentage of children aged 0-17 in residential care (of the total number of children aged 0-17 in care at any given time).                                      |
| Romania   | • Number of children in placement centers, data disaggregated by age, gender, disability.                                                                                                                                                  
  • Number of children under 7 in residential institutions, data disaggregated by age, gender, disability.                                                          
  • The percentage of children in family-type services in the total number of children in the special protection system, data disaggregated by age, gender, disability.   
  • A study on the causes of long-term placement retention.                                                                                                         
  • Number of young people who are about to leave or have left the system benefiting from support.                                                                   |
| Spain     | • Number of boys, girls, and adolescents in residential care (by age groups and disability).                                                                                                                                             
  • Children under 3 years in residential care.                                                                                                                        
  • Boys and girls from 4 to 6 years old in residential care.                                                                                                          
  • Centres with more than 30 places.                                                                                                                                  
  • Centres with more than 15 places and less than 30.                                                                                                               |
UNICEF works in the world’s toughest places to reach the most disadvantaged children and adolescents — and to protect the rights of every child, everywhere. Across 190 countries and territories, we do whatever it takes to help children survive, thrive and fulfill their potential, from early childhood through adolescence. And we never give up.

Eurochild advocates for children’s rights and well-being to be at the heart of policymaking. We are a network of organisations working with and for children throughout Europe, striving for a society that respects the rights of children. We influence policies, build internal capacities, facilitate mutual learning and exchange practice and research. The United Nations Convention on the Rights of the Child is the foundation of all our work.

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