



Ending the placement of children under three in institutions: Support nurturing families for all young children

Report from the international ministerial conference,
Sofia, 21–22 November 2012

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A woman and her daughter leave a shelter for young mothers in the city of Shumen, capital of Shumen Province.

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FOREWORD

Today the right for every child to grow up in a caring family environment is seen as a fundamental child right. It is strongly backed up by evidence that a child who is deprived of a supportive family environment cannot develop and flourish to her or his full potential. This is also acknowledged by governments in the region through their efforts to reform child care and protection systems.

But this was not the case until very recently. The institutionalization of children from poor families, children deprived of parental care and children with disabilities was the main service response to support vulnerable families in countries all over Europe. It has remained an entrenched legacy.

Concerned by the lack of progress to end this practice in Europe and Central Asia, UNICEF and the Office of the United Nations High Commissioner for Human Rights launched a Call for Action in the European Parliament in July 2011 to put an end to the placement of children under three in institutional care.

Two years later the Call for Action is creating a strong momentum for child care reform throughout the region.

Under the patronage of the President of Bulgaria Mr. Rosen Plevneliev, a gathering of high-level policy makers from Eastern Europe and Central Asia took place at a ministerial conference in Sofia. The aim was to exchange knowledge and promote mutual learning among participating countries, enabling the governments to create and implement policies providing social protection for the most vulnerable families and ending the placement of children below three years of age in residential care.

The high-level government support for this conference demonstrated clearly the extent to which this issue has gained priority, illustrating well how governments in the region are engaged as advocates for and supporters of key child protection efforts.

The conference also highlighted the new role played by UNICEF in the region, focusing on facilitating and supporting information-sharing among countries about addressing complex reforms in a time of restrictive economic and financial circumstances.

What you have in your hands is the report from this conference. Throughout it carries the message of the best interests of the child to be respected in all instances. As such, it also carries forward the voice of the most vulnerable children in Eastern Europe and Central Asia in a brave and bold way. Every child wants a loving family.

We cannot stop our work for children in this region until the right of every child to start his or her life in a caring family environment is realized.

Marie-Pierre Poirier
 UNICEF Regional Director for Central and Eastern Europe
 and the Commonwealth of Independent States



“Investments in children are not only a moral commitment for all of us, an obligation to the most vulnerable members of our society, but they are also an economic necessity. Sustainable development, social welfare, and also the political stability of our society, our future, depend on the efforts and resources that we invest today to provide the best start in life for our children.” Rosen Plevneliev, President of the Republic of Bulgaria

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We have never been so close to making it happen



President Rosen Plevneliev addressing the delegates at the conference opening.

The ministerial conference ‘Ending the placement of children under three in institutions: Support nurturing families for all young children’, which took place in Sofia (Bulgaria) on 21 and 22 November 2012, helped to articulate a strong political commitment to continuing and accelerating work in the area of child care reform, especially towards:

- reducing the number of infants abandoned at birth
- reducing the number of children below three years old deprived of parental care and placed in institutional care
- increasing the number of children with disabilities maintained within their families.

The ultimate vision is to ensure that every child below three years old grows up in a nurturing family environment, because all children need to get the best possible start in life. The vision was announced at the European Parliament in July 2011, when UNICEF and the Office of the United Nations High Commissioner for Human Rights launched a call to action to end the placement of children under three in institutions and prevent the separation of children from their families.

Held under the patronage of Rosen Plevneliev, President of the Republic of Bulgaria, the conference brought together 250 top-level governmental representatives across various sectors – social, health, education, labour, employment and family ministries – from 24 countries across Eastern Europe and Central Asia as well as high-level international experts. The issues discussed at the conference were reported by more than 150 media outlets in 22 countries.

Having the conference in Sofia was symbolic since Bulgaria has embarked on one of the most ambitious programmes of child care reform in Eastern Europe.

President Plevneliev made a very strong case for the need to invest in children, stating that sustainable development, social welfare, and also the political stability of a society, its very future, all depend on the efforts and resources invested today to provide the best start in life for our children. A child who cannot develop his/her full potential is a loss for all of us. Bulgaria’s ambitious plans to reform its child care system are supported by the European Union. Bulgaria aims to put in place legal regulation and provision of financial and human resources for a wide range of community-based child and family services; raise the capacity of the child protection system through the clarification and effective distribution of the rights and responsibilities of the child protection bodies and service providers, and by ensuring an adequate professional capacity for the effective functioning of the system; close 137 institutions within the next 15 years; and disallow the placement and upbringing of children from zero to three years old in residential care of any type following the reform.¹

Transition and globalization have introduced new risks for the most vulnerable families. These developments, combined with new professional approaches and human rights based standards, have in the last 10 years led most governments in Eastern Europe and Central Asia to initiate reforms of their child care systems. Such reforms are still ongoing, with different levels of intensity and success attained

¹ *Statement by Rosen Plevneliev, President of the Republic of Bulgaria.*

so far. Investments to prevent children under three years old from entering formal care will bring about substantial change in the life and development of these children. Such investments thus represent a major achievement of these complex reforms.

The majority of children in formal care across the region today have parents. The loss of a breadwinner, the illness of a parent and the lack of family and community support for young single mothers are common reasons why children end up in institutions. The indication is that governments must strengthen the social protection system for families and enforce key provisions of the Convention on the Rights of the Child (in particular, Articles 18,19, 20, 23, 26 and 27). Understanding – and removing – these barriers is important for the development of appropriate policies and responses to prevent family separation.²

Twenty governments from Eastern Europe and Central Asia made public statements at the conference regarding their current and future efforts in child care reform. The commitments made and the high level of representation at the conference reflect the momentum and importance that the policy objective of securing a nurturing family environment for every child has gained in the region over a number of years. For some countries, this objective is now reaching a high level of priority.



President Rosen Plevneliev and UNICEF Regional Director, Marie-Pierre Poirier, exchange a few words at the conference opening.

² Statement by Marie-Pierre Poirier, UNICEF Regional Director for Central and Eastern Europe and the Commonwealth of Independent States.

THIS IS THE TIME TO PUT KNOWLEDGE INTO PRACTICE

DID YOU KNOW? While vulnerable children in Eastern Europe and Central Asia are more likely to stay in a family environment than they were a decade ago, the region still has very high rates of child institutionalization, with 1.3 million children in formal care. Around 625,000 children are growing up in residential institutions, of whom 31,000 are below three years of age.³

The conference aimed to support governments in conducting the necessary reforms. All participants shared their experiences of challenges, successes and lessons learned in attempting to prevent and end the placement of children under three in institutions. The conference's specific objectives were to:

- ✓ take stock of governments' commitments to address the issue and progress achieved in selected countries
- ✓ reaffirm the importance of a family environment for child development and the child's right to live in a family environment
- ✓ build synergies at the highest political and technical levels between governments in the region
- ✓ share promising practices and positive steps taken in preventing both the separation of children under three from their families and their placement in residential care
- ✓ reinforce the dialogue among the different partners supporting governments in these reforms.

SOME PARADIGMS HAVE TO BE BROKEN

DID YOU KNOW? "We are now witnessing a positive dynamic of change ... every child is a subject, not an object, and should be able to enjoy all of the rights guaranteed by the Convention on the Rights of the Child, as much as he or she can, developing his or her full potential."⁴

- **"If they are to be effective and sustainable, deinstitutionalization strategies must focus more on deinstitutionalizing the system as a whole rather than simply on 'deinstitutionalizing children'.** This means that resources and efforts must be concentrated on preventive, family-strengthening and support services to avoid the real or perceived need for care placements as well as on developing a range of family-based options to provide alternative care when it is nonetheless required."⁵
- **The role of the state is to support vulnerable families in providing care to a child, in order to prevent the breakdown of families.** As an international expert⁶ highlighted during the conference, there is a need to redefine the shared responsibilities of families and state. While the primary responsibility for the care of a child rests with his or her parent(s), the state must ensure that parents have the necessary skills and resources to fulfil this role. Separating a child from a family should be applied only as the last resort and in a strictly monitored way.

³ Presentation by Jean-Claude Legrand, UNICEF Senior Regional Advisor, Child Protection, Central and Eastern Europe and the Commonwealth of Independent States.

⁴ Statement by Jan Jařab, OHCHR Regional Representative for Europe.

⁵ Presentation by Nigel Cantwell, international consultant on child protection policies.

⁶ Maria Herczog, Member of the UN Committee on the Rights of the Child and President of Eurochild.

- **It is not about one sector deciding about the placement of a child deprived of parental care but about cross-sectoral strategies to support a family to stay together.** As a child may be deprived of parental care for various reasons, preventive tools should be sufficiently diverse. The social protection sector, currently perceived as the main, if not only, sector to deal with abandonment and institutionalization, cannot alone prevent the separation of children from their families. Lessons learned from several governments applying innovative prevention practices indicate that the most positive experiences arise through collaboration between key sectors involved in child protection: health, early education and social protection.
- **Children with disabilities should be treated as the main group to guide the work since in many countries they make up the majority of children placed in institutions.** “We need a stronger commitment in terms of development of policies and services, particularly for young children with disabilities.”⁷ A system developed with children with disabilities in mind would, by default, cover the needs of all children. Participants highlighted the broad framework of the Convention on the Rights of Persons with Disabilities as a good model to protect children with disabilities because it goes beyond establishing health interventions to promote social protection and inclusion as well.
- **Placing a child in an institution is more often a sign of discrimination than protection, and it is proven to have a very damaging effect on young children’s health and development.** The main factors contributing to the placement of children under three in institutions in Eastern Europe and Central Asia are linked to poverty and other socio-economic circumstances, and are thus the outcome of discrimination rather than protection from individual abuse. This is also why, for the purposes of this document, ‘abandonment’ includes relinquishment, as most cases of abandonment are in fact cases of relinquishment.

THE FRAMEWORK FOR DRIVING CHANGE

Putting an end to the placement of children under three in institutions primarily requires activating prevention through understanding and answering the needs of families at risk. Only the system and services reformed as a whole can bring about lasting change. A clear framework of interventions arose from the conference participants’ statements, shared experience and discussions:

1. **“The causes of child abandonment still need to be further investigated,** but already known challenges like poverty, lack of housing, pressure from relatives and inadequate support from health and social services need to be addressed by developing an integrated approach to the community-based support to families, medical and social services, risk assessment, prevention of separation of the child from the family and planning alternative care, if biological parents cannot cope with their parental responsibilities.”⁸ Only with a good understanding of the country-specific root causes of child abandonment and institutionalization can appropriate policies and response mechanisms to prevent family separation be developed.

7 Presentation by Jean-Claude Legrand, UNICEF Senior Regional Advisor, Child Protection, Central and Eastern Europe and the Commonwealth of Independent States.

8 Statement by Svetlana Zhalmagambetova, Senator, Social and Cultural Development Committee, Senate of the Parliament, Kazakhstan.

2. **“Building a network of social services for children, as well as improving inter-agency coordination and cooperation with civil society”.**⁹ The cross-sectoral and cross-ministerial platform was pinpointed as an essential enabler for developing the reforms and programmes to address the issue with the ‘child in mind’.
3. **“Develop and extend new services to prevent family separation ... heading towards a healthy, family-focused social assistance model.”**¹⁰ The area of prevention of abandonment and relinquishment was identified as the first priority and the main area of focus. Well functioning prevention services should enable early identification of the families at risk and provide them with the necessary support to ensure that a child remains in a family environment. The key thing to bear in mind in the design of prevention systems is outreach; even a system built on the best intentions cannot help if it does not reach the people for whom it is intended.
4. **“Strengthen kinship care and develop formal and professional foster care with primary focus on children from zero to three years old”.**¹¹ Kinship arrangements should be considered in the first instance when a child cannot live with his/her biological parent(s). Supporting such care is an important strategy to prevent more permanent family separation. Where a kinship arrangement is impossible, formal and professional foster care is often the best option.
5. **Bring institutionalized children back to families while “transforming existing institutions into community-based care services”.**¹² Priority must be given to the development of services to support families.
6. **Ministerial commitment is crucial.** Current systems are cemented in budgets, laws and practices. Shifting these around to develop a completely new system will require a powerful drive for change and the capacity to mitigate vested interests.
7. **Careful planning and progressive change should drive forward reforms.** Closing institutions and moving children back to families or to foster care without prior preparation and appropriate support of these families can have a negative impact on children. Moving children out of institutions without preventing more children from entering them is also counterproductive.
8. **Professionalizing and supporting social workers, including by creating the right conditions for their work, is crucial for the success of reforms.** Case management by social workers is a new concept and profession in many countries. Social workers must be empowered as key statutory agents and the backbone of the child protection system.

9 *Statement by Danica Kramaric, Head of the Sector for Health Promotion and Protection in Department of Health Protection, Ministry of Health, Croatia.*

10 *Statement by Irakli Nadareishvili, Deputy Minister of Labour, Health and Social Affairs, Georgia.*

11 *Statement on behalf of Suad Numanovic, Minister of Labour and Social Welfare, Montenegro given by Remzija Ademovic, Deputy Minister of Labour and Social Welfare.*

12 *Statement by Kastriot Sulka, Deputy Minister of Labour, Social Affairs and Equal Opportunities, Albania.*

9. Localizing services will be an important strategy to ensure that the system reaches the most vulnerable groups. This should not be done at the expense of quality, however, nor without guidance, funds and accountability towards the clients of the system.

LESSONS LEARNED FROM IMPLEMENTING THE CHANGES

Conference participants brought with them a vast amount of knowledge and experience of conducting child care reforms, which could guide the interventions planned or in progress across Eastern Europe and Central Asian countries.

1. ROOT CAUSES OF CHILD ABANDONMENT, RELINQUISHMENT AND PLACEMENT IN INSTITUTIONS

LESSONS LEARNED: “The analysis of the needs of each one of the groups of children and/or families at risk of family separation or abandonment should be a point of departure for development of mechanisms for inter-agency cooperation among relevant sectors at national level.”¹³

Placement of children in institutions in Eastern Europe and Central Asia is preventable with adequate state support for families. While in Western Europe the reason that the vast majority of infants (69%) are placed in institutions is parental abuse or neglect, more than 70% of children placed in institutions in Eastern Europe and Central Asia are there because of:

- **Socio-economic situation of parent(s):** Real or perceived social and financial inability of parent(s) to take care of a child, such as “no proper housing, lack of required financial support, being left alone, with no support from father, relatives as well as no access to social infrastructure/alternative care” (‘Reasons of Abandonment’, EU Daphne project, 2010–2012). For example, Tajikistan¹⁴ highlighted lack of support for single parents, parents with serious health problems, pregnancy out of wedlock, labour migration, disability, and imprisonment of mothers as some of the main factors contributing to placement of children under three in baby homes.
- **Disabilities of the child** combined with the false, common, post-Soviet belief that children with disabilities will receive better care and access to rehabilitation in state run institutions. As for children in alternative care, there has been heavy reliance on institutional care, which provides limited opportunities for rehabilitation and is often associated with abuse, neglect and an absence of individualized attention. In many respects, the isolation of children with disabilities in institutions has contributed to a stigma around disability that is perpetuated in communities where there is a lack of information about the causes of disability. At the same time, professional attitudes are still to a large extent influencing the practice of isolating children with disabilities in institutional care, which contributes to a vicious circle of stigma and discrimination.

¹³ Vesna Bosnjak, Senior Expert on Child Care System Reform in Central and Eastern Europe and the Commonwealth of Independent States.

¹⁴ Statement by Rukiya Kurbonova, Deputy Prime Minister and Chair of the National Commission on Child Rights, Tajikistan.

Such broad statements hide important cultural differences, however, and there is often a mix of different types of vulnerabilities that ultimately leads to a separation. Understanding the dynamics of each country context, as well as of each child, is essential in order to develop appropriate prevention strategies. As such, governments need to strengthen the social protection system for families. Understanding the reasons for family separation, and removing them, is important for the development of appropriate policies and responses to prevent separation¹⁵.

*DID YOU KNOW? The Guidelines for the Alternative Care of Children (UN General Assembly, 2009) state clearly:*¹⁶

- *Poverty alone can never justify placement in alternative care.*
- *Always take account of children with disabilities and other special needs.*

2. CROSS-SECTORAL/CROSS-MINISTERIAL PLATFORMS CENTRED AROUND CHILDREN



There is a need for “a journey from a rescue model of state intervention to a family support partnership model”¹⁷. Breaking the paradigm and making the state a supporter rather than a replacement for family care requires a change in governmental approach to ending the placement of small children in institutions. The diversity of reasons leading parents to abandon a child and to his/her placement in an institution makes it obvious that preventing family separation requires the activation of appropriate tools, managed by various sectors and ministries, including financial support, health treatments, social coverage, education, etc.

Child care reform can no longer focus solely on what one sector can do. Instead it must define what needs to be done for each child by different sectors, always with the focus on enabling children to live in a nurturing family environment.

This requires the development of a continuum of services along with a central agency that can carry out the very important function of assessing the needs of each child and developing a plan for the support needed by the child and his/her family. Because various causes contribute to separation, there is also a need for a multifaceted, often multi-sectoral, response.

In Bulgaria and Northern Ireland, a cooperation platform was created at both the ministerial and local levels. The ministerial platform coordinates the sectors in creating policy, with the aim of developing

¹⁵ Based on the statement by Marie-Pierre Poirier, UNICEF Regional Director for Central and Eastern Europe and the Commonwealth of Independent States.

¹⁶ Presentation by Nigel Cantwell, international consultant on child protection policies.

¹⁷ Presentation by Paul Martin, former Chief Social Services, Adviser to the Northern Ireland Executive and current EU Twinning Adviser to the State Agency for Child Protection in Bulgaria.

effective and efficient prevention mechanisms. At the local level, caseworkers identify the families at risk, engage the necessary support sectors according to the specific family situation and provide information about services to families in a non-stigmatizing way.

Meanwhile, in Bosnia and Herzegovina, a number of municipalities have created Centers for Early Growth and Development of Children, in which inter-sectoral programmes are implemented at the local community level. “These inter-sectoral programmes are expected to have great impact on preventing separation.”¹⁸

Another example is Ukraine, where “Successful introduction of the state model of prevention of early social orphanhood has been made possible due to cooperation with non-governmental and international organizations, as well as the inter-agency mechanism”¹⁹.

LESSON LEARNED: Coordination of actions at different levels is essential. At the national level, where policy is defined, it is vital to ensure multi-sectoral buy-in of the reform goals, and identify and agree on the changes required in each sector to fulfill these goals. Crucial tasks to be performed at the national level include intra-ministerial coordination, monitoring and oversight of the reforms. There is also a need to ensure synergetic and coordinated action at the local level, where services are provided. The introduction of case management as an approach to ensure such coordination is a central piece in solving the puzzle so that the child and his/her individual needs are at the centre.

3. CREATING EFFECTIVE PREVENTION SYSTEMS

Some 15,000 children below three years old are separated from their families every year in Eastern Europe and Central Asia. Preventing separation from occurring should be the first priority of social welfare and protection systems in the region. It should also be the main area of focus and fund allocation.

DID YOU KNOW? “The separation of children from their families, mainly for economic reasons, is an indicator that something simply is not working.”²⁰ In a way, separation is an indicator of the malfunctioning of social protection and welfare systems, and so it should be seen and acted upon as such, rather than as a sign of protection requirements.

High separation rates suggest that vulnerable families are not being given the support they need by social protection systems. A huge challenge today for social protection and welfare systems appears to be ensuring adequate capacity to proactively identify and reach out to the most vulnerable families.

3.1 Reaching out to families at risk – across all locations and in a non-stigmatizing way

The majority of abandonments could be prevented – the most important thing is to reach families at risk before they make this often irreversible decision. An interesting example of an

18 Statement by Damir Dizdarevic, Assistant Minister for Labour, Employment and Social Protection, Ministry of Civil Affairs, Bosnia and Herzegovina.

19 Statement by Lidia Drozdova, Deputy Minister of Social Policy, Ukraine.

20 Susan Bissell, Chief of Child Protection and Associate Director of the Programme Division, UNICEF Headquarters.

effective identification and support system came from the United Kingdom of Great Britain and Northern Ireland.²¹ A new model of support services has been developed to be operational at three levels:

- **Primary prevention services.** Universal services that reach all young parents via standard health expert visits and play a significant role in positive parenting.
- **Secondary prevention services.** Targeted services that work with vulnerable families throughout the first two years of a child's life. Activated after a primary prevention service identifies a family as being in need of state support. Following identification of the family's specific needs, the necessary services are provided by respective sectors – whether the support needed is temporary housing, psychological counselling, cash benefits or therapeutic support for a child with disabilities. Coordination must take place at the local level through the creation of family hubs – local focal points of contact that provide information about services to families in a non-stigmatizing way.
- **Tertiary intervention services.** Therapeutic services to rehabilitate and repair the parent-child bond once harm has been done to a child.

In Eastern Europe and Central Asia, the lack of community-based services is often described as a key barrier to families accessing services and support. Here it will be necessary to explore the best way to organize a system of prevention, where services and support can be scaled up the greater the needs of the family and child. Such a system of prevention would also need to tackle the stigmatizing attitudes of professionals and ensure outreach and proactive support rather than reactive responses to acute problems.

IT CAN WORK! Most countries in Central and Eastern Europe run in-home visiting programmes. For instance, a family with a newborn in Belarus²² will be visited at home seven times by a nurse and twice by a paediatrician during the first month. While the visits are aimed primarily at checking the health and well-being of the child, they also represent a great opportunity to detect families at risk early on and in a non-stigmatizing way. Home visiting programmes like this are a very good starting point for a more elaborate prevention system.

The health system can also work to decrease the stigma that often surrounds vulnerable families. This requires **activating the health sector as the focal point** to lead in the identification of families at risk and involving other sectors according to the needs of each family. A number of countries have introduced changes to hospital practices and developed standards of practice for health professionals to support parents of babies born with developmental delays or disabilities as well as parents from the most vulnerable groups. Some governments are also placing more emphasis on the role of community nurses and outreach practitioners, and making their services more comprehensive. Because of these changes, parents now receive support for their parenting skills in both child health related practices and young children's overall well-being and development. This not only helps the health system to keep better records of health related issues for babies and families, but it also reduces the risks associated with baby abandonment and relinquishment and increases families' awareness of key aspects of child development.

21 Presentation by Paul Martin, former Chief Social Services Adviser to the Northern Ireland Executive and current EU Twinning Adviser to the State Agency for Child Protection in Bulgaria.

22 Presentation by Viktor Yakzhik, Deputy Minister of Education, Belarus.

Such changes must be accompanied by the further development, **professionalization and support to social workers**. Many countries have embarked on extensive reforms and training in this area. For instance, Serbia²³ talked about its focus on enhancing an individual case management approach throughout the country's network of Centers for Social Work, and Armenia²⁴ highlighted the introduction of a system of integrated social services as one of the most important reforms currently under way in the country.

The existing work and commitments to increase the reach of prevention services is encouraging. Romania, for example, expressed its commitment to "increase access to services aimed at prevention of separation of children from their families and doubling the number of children benefiting from such services by 2020."²⁵

3.2 Keeping children with disabilities at the centre of change – moving from the medical model of disability to a social one

Welfare services for families and children with very specific needs still remain underdeveloped in most countries, requiring reforms, a change of mindset and education in how to communicate and work with parents from particular risk groups. In many instances, health and social welfare professionals encourage the separation of children from their parents, particularly in the case of children with disabilities or children who are chronically ill or born to HIV-positive mothers. In fact, mothers may be deemed 'unfit' for a variety of reasons and actively encouraged to relinquish their babies at birth in hospitals and infant homes. Especially for children with disabilities, the decision to institutionalize a child is taken very quickly, with no efforts made to support and empower disadvantaged or vulnerable families, strengthen parents' skills to care for children at home or provide information on services available to help address feelings of isolation, social discrimination and disempowerment.

Improving the attitudes and communication skills of medical staff working in maternity wards with young mothers is a prerequisite for further, quality medical care and psychological support for parents of children with disabilities. Some promising practices are emerging across the region. For example, Croatia²⁶ has developed several training initiatives, including training run by the Ministry of Health on 'How to tell unwanted news'. Similar courses have been introduced into the medical academic curriculum. Serbia²⁷ has focused on working with practitioners to develop skill sets, by developing guidelines and organizing training for maternity hospital staff and home visiting nurses; by conducting capacity building activities to enable teachers in regular schools to work in inclusive classrooms; and through participatory planning processes at strategic and operational levels. Serbia has also increased financial benefits for families. Currently, 35% of its municipalities provide some funding for day care centres for children with disabilities. Among its remaining challenges, Serbia noted the need to build the capacity of practitioners to address discrimination at the community level and to strengthen coordination between the education, health and social welfare sectors on inclusion related policies at the national and local levels.

23 Based on the speech by Gordana Matkovic, Director of Social Policy Studies at the Center for Liberal-Democratic Studies, Belgrade, Serbia.

24 Statement by Artem Asatryan, Minister of Labor and Social Affairs, Armenia.

25 Statement by Denisa Oana Patrascu, Secretary of State, Ministry of Labor, Family and Social Protection, Romania.

26 Based on the speech by Danica Kramaric, Head of the Sector for Health Promotion and Protection, Department for Health Protection, Ministry of Health, Croatia.

27 Based on the speech by Gordana Matkovic, Director of Social Policy Studies at the Center for Liberal-Democratic Studies, Belgrade, Serbia.

Challenging negative attitudes towards disability at the societal level is another important element of the work needed to ensure the success of child care reform. Such attitudes can obstruct the political will for change, which is essential for successful child care reform. Work to challenge the stigma associated with disability must be coupled with a change in professional approaches to children with disabilities, moving from the medical model of disability to a social model. Several strategies have been identified for changing attitudes towards disability, including providing accurate information about its causes and highlighting the achievements of persons with disabilities. Countries like Croatia, Bulgaria and Montenegro have led the way with media campaigns that address stigma and discrimination. For example, Croatia²⁸ developed the campaign 'It's About Ability', which has already begun to fight stigma and discrimination against children with disabilities. The campaign aims to galvanize support for the inclusion in society of children with disabilities by changing the public's ingrained attitudes and practices towards these children. The campaign, led jointly by the Croatian Government and UNICEF, is supported by a broad coalition of more than 100 partners.

LESSON LEARNED: To prevent the placement of children with disabilities in institutions, Croatia drew attention to the need to: (1) foster positive attitudes and communication among professionals; (2) support engaged parenting; (3) develop community services for parents and families; (4) enhance the role of parental associations; and (5) increase public awareness of the challenges, needs and rights of children with disabilities.

Conference participants highlighted some other concerns in this area, including:

- the need to reach out to families living in rural areas
- the need to earmark funds to integrate children into the education system by, for example, supporting teacher assistants in the classroom
- the new trend of replacing large institutions with group homes for 10 to 15 children. Many experts have mixed feelings about this tendency. Although it can be considered an improvement in some limited ways, it can also be regarded as a missed opportunity to promote care for children with disabilities in a family-type environment²⁹
- the need for stronger commitments to ensure that children with disabilities and children from ethnic minorities (for example, Roma communities) are part of the reform agenda, and the need to hold states accountable for ensuring that the child care system does not perpetuate discriminatory attitudes towards certain groups of children and persons with disabilities in general.

3.3 Creating diversified support services at the local level, centred around a child in need

DID YOU KNOW? The first generation of reforms has created alternative services. The next generation of reforms is creating a more comprehensive set of services and cash benefits.³⁰

²⁸ Presentation by Danica Kramaric, Head of the Sector for Health Promotion and Protection in the Department for Health Protection, Ministry of Health, Croatia.

²⁹ Statement by Jan Jarab, OHCHR Regional Representative for Europe.

³⁰ Based on the speech by Gordana Matkovic, Director of Social Policy Studies at the Center for Liberal-Democratic Studies, Belgrade, Serbia.

Many countries in the region have developed various support tools, but their coverage and articulation with other services remains an issue. Preventing the separation of children from their families requires the diversification of services at the local level, as the reasons for potential separation differ case by case. Each case should be managed on an individual basis with targeted support provided to answer the specific family’s needs. Many countries in the region have begun in some areas to provide cash benefits for families of children with disabilities; nationwide coverage of such schemes remains a challenge. Provision of benefits must go hand in hand with the continued efforts to improve capacity for the local planning, budgeting and financing of new services; to strengthen accountability of the system towards its clients; and to monitor, evaluate and review policy in light of the overall ability of services and social protection mechanisms to prevent family separation.

The menu of prevention tools shared by conference participants covers the great majority of identified root causes of child separation from the family and placement in an institution. Many services have been introduced, but moving from pilot schemes to fully integrating the services within the system has been a challenge in several countries. Participants highlighted the importance of planning and diversifying services at the local level as well as the role of municipalities in the reform process.

ROOT COUSES OF CHILD SEPARATION	EXAMPLES OF TOOLS PREVENTING SEPARATION
Lack of required financial support due to unemployment or no support from father/relatives	Cash benefits, product vouchers, outreach social work, health coverage for a child of unemployed parent(s)
Lack of proper housing	Temporary shelters for single expectant mothers until the baby is 18 months of age Support to access social housing as part of broader social protection schemes
Lack of access to social infrastructure/alternative care	Day care, support, community groups/network
Lack of community-based rehabilitation	Home and out-of-home rehabilitation services and different forms of therapeutic interventions, day care centres, community networking centres, home visits by nurses
Feelings of being left alone, disempowerment, social discrimination and isolation (especially relevant in cases of children with disabilities or ill health as well as single immature mothers)	Counselling, independent legal representation, community networking centres, state supported creation of parents groups

As confirmed by Romania³¹, the development of community-based services was one of the key tools used to prevent the separation of children from their families. Among the main advantages of these services is: 1) their availability close to the clients, thus eliminating the need to travel for long distances to access them; 2) the promotion of community participation and engagement; 3) the provision of fast, straightforward and low cost solutions using community resources; and 4) the capacity to ensure multidisciplinary intervention and cooperation horizontally (between municipality, school, dispensary, police, church, family, etc.) and vertically (between specialized authorities and service providers at the national and county level).

31 Based on the speech by Denisa Oana Patrascu, Secretary of State, Ministry of Labor, Family and Social Protection, Romania.

IT CAN WORK! Extensive cross-sectoral work conducted in Bulgaria shows very promising success rates across prevention work: 34% of baby abandonment prevention cases and 66% of reintegration with family cases were completed successfully in 2011.³²



Iurie and Rodica Gandrabura hold the hands of their two-year-old foster daughter, Christina, in the doorway of their home, near the northern city of Donduseni, Republic of Moldova.

Kyrgyzstan³³ highlighted significant results in preventing abandonment through its establishment of hotlines, family resource centres, mother and baby homes, and training courses on abandonment prevention in maternity hospitals. The government representative also drew attention to work on transforming infant homes into centres of temporary care and to the creation of a foster care network. Kyrgyzstan aims to transform all infant homes into centres of temporary care by 2016.

Azerbaijan³⁴ shared information on its work with the Heydar Aliyev Foundation on a state run programme that aims to support biological or family substitute care (guardian or foster) to raise children and to develop a network of social services to prevent family separation and placement of children in residential care.

paediatric development and increased use of the 'patronage' system in order to expand health and social services to families, mothers and children."³⁵ Turkmenistan has been creating parental education centres, making use of the pre-school institutions and schools infrastructure, that provide consultation and guidance on the upbringing and education of children, and teach parenting skills. The Government of Turkmenistan has also opened its first Center for Early Child Development for children with special needs and their parents.

Turkmenistan developed the 'National Programme of Turkmenistan on early child development and preparation for school in 2011-2015' ... A part of this programme is to begin work on the implementation of measures for early intervention,

Conference participants from various countries identified some bottlenecks at the local level requiring government attention³⁶:

³² Based on the presentation by Darinka Yankova, Deputy Chairperson of the State Agency for Child Protection, Bulgaria.

³³ Statement by Kamila Talieva, Vice Prime Minister of the Kyrgyz Republic.

³⁴ Statement by Sadagat Gakhramanova, Deputy Chairperson of the State Committee on Family, Women and Children's Affairs, Azerbaijan.

³⁵ Based on the statement by Geldimamet Geldimamedov, Deputy Minister of Education, Turkmenistan.

³⁶ Points a) and b) based on a 2012 assessment of the child care system in Romania; points c) and d) based on the presentation by Valentina Buliga, Minister of Labour, Social Protection and Family, Republic of Moldova; point e) based on the presentation by Irakli Nadareishvili, Deputy Minister of Labour, Health and Social Affairs, Georgia.

- a) budgetary constraints at the local level, resulting in an insufficient quantity of services for children with disabilities across the country
- b) a high level of tolerance of various forms of violence and a low level of awareness of social problems
- c) the barrier to efficiently preventing the placement of young children in institutions that stems from the lack of an early detection and intervention mechanism
- d) the barrier to the expansion of foster care to include children under three and children with disabilities that arises because of existing payment scales
- e) the lack of services for children with disabilities across the country.

3.4 Legislation

The legislative framework varies across the countries and provides different protective environments for supporting most-at-risk families. For example, Serbia³⁷ introduced in 2011 a legal ban on the placement of children below three years of age in residential care. This law also emphasizes the prevention of child/parent separation when this is in the best interests of a child.

The former Yugoslav Republic of Macedonia has established legislation to protect infants from being legally neglected by parents in the initial months of life. “According to legislation, parents who have decided to leave their child cannot give their consent for adoption in the first six weeks of the child’s birth. Within this period, staff from the centres for social work provide support to the parents to strengthen their parenting capacities to keep the child in its biological family. Simultaneously, material support can be provided to the parent until the child turns three years of age, as well as health protection for both the parent and the child.”³⁸

In some countries, however, there are legal obstacles to allowing all children under three deprived of parental care to benefit from foster care: if a child does not have the legal status ‘deprived of parental care’, he/she cannot be placed in foster care.

The representative from Uzbekistan stressed the importance of the early childhood phase and stated that the law On the Guarantees of the Rights of the Child provides a good framework to implement “measures to address the conditions that impede the child remaining in the family and – in cases where a child has been separated from the family – early return to the family.”³⁹

4. ALTERNATIVE CARE

Placement of children under three in residential facilities should be allowed only i) to prevent the separation of siblings; ii) to provide emergency care; or iii) for predetermined periods of very limited duration where family reintegration or another appropriate long-term solution is the planned outcome,

37 Statement by Brankica Jankovic, State Secretary, Ministry of Labour, Employment and Social Policy, Serbia.

38 Statement by Spiro Ristovski, Minister of Labour and Social Policy, the former Yugoslav Republic of Macedonia.

39 Statement by Aliya Tuygunovna Yunusova, Member of Parliament, Uzbekistan.

according to the international Guidelines for the Alternative Care of Children (UN General Assembly, 2009). The Guidelines address not only governments but also international bodies and organizations, civil society, professionals, voluntary organizations and the private sector to the extent that they are directly or indirectly involved with organizing, providing or monitoring out-of-home care for children.



A girl with Down's Syndrome attends a physical therapy session at the Voinicel Centre in Chisinau, Republic of Moldova.

Some countries in the region are becoming models for Europe of the systematic requirement to provide foster care for children under three in need of alternative care.

These countries currently include Croatia, Serbia, Romania and Turkey. In the near future, Bulgaria, Georgia and the Republic of Moldova will be added to this list. The representative

from Montenegro⁴⁰ spoke of the country's legal framework, which defines fostering as the main alternative child care option, strengthens the state's responsibility to provide financial benefits to families and introduces the licensing of foster families. From 2008 to 2011, Montenegro increased the number of children in family-based care by 38%. But at least six countries in the South Caucasus and Central Asia remain without any system of foster care for children below three years old.⁴¹

Participants emphasized that ensuring foster parents can continue to do their work properly requires training and ongoing support as well as supervision. While some participants underlined that work to build foster care systems is progressing too slowly, others warned of the dangers of closing institutions and moving children to foster care too quickly without proper planning and provision of adequate support to foster parents.

LESSON LEARNED: Institutionalization of children under three can be effectively prevented through a cross-sectoral mechanism only when family support and/or family-type alternatives are available.⁴²

While foster care is gaining ground as an alternative to institutions, foster care for children with disabilities below three years is so underdeveloped in the region that it is not even reflected in statistics.

⁴⁰ Statement by Remzija Ademovic, Deputy Minister of Labour and Social Welfare, Montenegro.

⁴¹ Presentation by Jean-Claude Legrand, UNICEF Senior Regional Advisor, Child Protection, Central and Eastern Europe and the Commonwealth of Independent States.

⁴² Statement by Valentina Buliga, Minister of Labour, Social Protection and Family, Republic of Moldova.

5. REINTEGRATE CHILDREN IN FAMILY SETTINGS

Reintegration of children placed in institutional care is a process that requires multi-sectoral involvement and the establishment of community services focused both on prevention and on the support and networking of caregivers, be they family members or foster parents. The key principle is to centre the reintegration plan around a child and work out the plan within a cross-sectoral partnership.

Examples from across the region portray successfully conducted reintegrations of children from institutions. In Bulgaria⁴³, much attention has been given to the planning and development of a regional network to support multi-sectoral services in communities with a high number of children under three in residential care. As part of the government's process of piloting the deinstitutionalization of infant homes, Bulgaria developed 'A Family for Every Child', a project launched in 2010 to close down the infant home in Shumen. This project is based on a partnership between UNICEF, the Ministry of Health, the Ministry of Labour and Social Policy, the State Agency for Child Protection, the Agency for Social Assistance, the Regional Governor of Shumen and Shumen Municipality. To close the infant home in Shumen, a range of services to support parents and families of young children under three was first established. These services include a network of foster parents for newborns and babies; services to prevent abandonment in communities and in maternity wards; and the creation of a Maternal and Child Health Centre that will offer in-home visiting services by nurses and midwives to all children under three and to pregnant women with no health insurance. Bulgaria drew attention to its first closure of an infant home (in Teteven) on 1 January 2011 and to the restructuring of the home as a Community Support Centre, which currently provides social services to children from the community and their families.

Turkey's 'Back to Family and Support within the Family' campaign provides a positive example of how targeted benefits and support services for families of children in need can bring concrete results for children. By September 2012, 8,637 children in care had been returned to their families as a result of this project.⁴⁴

FINANCING THE SERVICES TO SUPPORT FAMILIES

"The economic crisis is taking its toll on everyone today ... The impact of the crisis has hit the most vulnerable the hardest: single parents, young and low-skilled workers, persons with disabilities, and children."⁴⁵

The global economic crisis has had a severe impact on countries in Eastern Europe and Central Asia. UNICEF⁴⁶ highlighted at the conference how falling incomes have affected many families. These families are often unable to cope with economic hardships, rising unemployment, social pressures and the crumbling of established social safety nets. As a result, the crisis has reduced the capacity of many families to protect and care for their children. In this context, it is important to prevent the economic crisis from leading to an

43 Statement by Desislava Atanassova, Minister of Health, Bulgaria.

44 Statement by Askin Asan, Deputy Minister of Family and Social Policies, Turkey.

45 Statement by Janina Arsenjeva (Policy Director, Eurochild) from Eurochild's 9th Annual Conference, 'Promoting the rights of children in alternative care in Europe', 24–26 October 2012.

46 Marie-Pierre Poirier, UNICEF Regional Director for Central and Eastern Europe and the Commonwealth of Independent States.

increase in the number of children under three being deprived of parental care, as this is typically the age at which the irreversible decision of abandonment is taken. To prevent this from happening we must ensure that there are enough resources to support families in need.

Investing in children and families is not only a moral imperative, but also an obligation derived from states' international commitments. The Convention on the Rights of the Child requires states to use the maximum resources available to implement the Convention. This includes human resources – investing in professionals – as well as financial resources. The Committee on the Rights of the Child has interpreted this to mean that, even in a crisis situation, states must try to avoid reducing budgets affecting the most vulnerable group – children.⁴⁷

All of the above arguments point to the need for countries to ensure that they allocate sufficient resources to support families in need. Participants pointed to the ongoing European Union negotiations on the new multi-annual budget as a good opportunity to strengthen the EU commitment to support countries in the region in their reform efforts. Participants also highlighted the need to ensure that countries in Central and Eastern Europe and Central Asia in receipt of EU financial support, whether through the Structural Funds or other instruments, allocate these funds to support a wide range of community-based services rather than to reinforce the existing institutional care system. Some participants also highlighted the need to attract corporate funding in order to implement the necessary reforms.

ROAD MAP TOWARDS CHANGE

Over the last 10 years, governments in Eastern Europe and Central Asia have invested tremendous efforts in reforming their child care and social protection systems. Many countries in the region have achieved some progress in reducing the number of infants abandoned at birth and the number of children under three deprived of parental care who are placed in institutional care. Some countries have also seen an increase in the number of children with disabilities maintained within their families. Conference participants agree that this initial progress must now be consolidated and accelerated. To achieve this, it is imperative to ensure the engagement of every country. Attendance of the conference in Bulgaria by so many delegates and senior officials indicates the widespread commitment to child care reform that already exists in the region.

Based on both the government interventions and the issues addressed during plenary sessions, the following **priority actions** emerged from the conference:

➤ **The most vulnerable groups of children, including children under three years old and children with disabilities, are now being given priority in reforms and in access to services.**

Two special challenges must be addressed in this regard: ensuring nationwide coverage so that no families of children with disabilities are left out of such support schemes; and making certain that effective access to information, benefits and services allows families to make the most appropriate decision in the best interests of their children.

⁴⁷ Thomas Hammarberg, former Council of Europe Commissioner for Human Rights.

- **Several countries are developing a comprehensive approach to preventing family separation though the creation of policies of social protection for the most vulnerable families.** This is done through a diversified set of supportive legislation, social transfers, health and social insurance, the development of social services, the prevention of abandonment in hospitals and maternity wards, and the integration of responses for child protection within broader social protection and welfare strategies.
- **Many countries recognize the important role of the health system in the prevention of child abandonment.** These countries have introduced changes to hospital practices and developed standards for health professionals to support parents of babies born with a disability and parents from the most vulnerable groups. Many countries still need to ensure a shift away from strictly medical approaches to more social approaches. The goal is to train health professionals who can improve parenting skills and prevent baby abandonment.
- **Professionalization of social work is recognized as a key component of the strategy to be put into place and should be combined with stronger control of gatekeeping and the development of individual case management.**
- **New forms of alternative family-based care such as foster care are emerging in the region, with public financing enabling it to become a sustainable service.** In many countries, foster care is becoming increasingly diversified and professionalized, making this form of care better prepared and more responsive to the diverse needs of children deprived of parental care. Training, selection, support and supervision of care placements have begun but must acquire greater importance in future strategies.
- **Many countries have created national bodies or intra-ministerial coordination mechanisms to oversee reforms and the implementation of new policy priorities.** In some cases, these need to be strengthened to enable them to ensure true inter-sectoral coordination. In other cases, they still need to be established.
- **Local authorities are assuming greater responsibility for developing and expanding new forms of services. Some governments have developed mechanisms for ensuring greater equity in access to services between poorer and richer municipalities.** Diversification of health, early childhood and child welfare services targeting in particular families of children with disabilities is considered a key component of child care reform.

“Experience shows that technical solutions are important but will only work if they are backed up by strong and determined political will and commitment.”⁴⁸

48 Marie-Pierre Poirier, UNICEF Regional Director for Central and Eastern Europe and the Commonwealth of Independent States.



Borivoje Vrcin plays with his two-year-old foster son, Petar, outside their home in Belgrade, Serbia.

FOLLOW-UP MONITORING BOARD

March 2013 Edition

This monitoring board provides an overview of the scope of the commitments made by governments at the Sofia conference held in November 2012. The intention is to update the board on a quarterly basis, both to enable monitoring of progress and to engage UNICEF country offices in discussion about additional/new contexts as well as opportunities and threats in realising the commitments made.

COUNTRY/ REPRESENTATIVE	COMMITMENTS MADE		MONITORING OF COMMITMENTS STATUS
	ACTION	TIME	
Bulgaria <i>Desislava Atanassova,</i> <i>Minister of Health</i>	<ul style="list-style-type: none"> • VISION: No children below three in institutions by 2015, to be achieved via an holistic strategy incorporating the reintegration into family-based care of the children currently in institutional care, greater prevalence of foster care and prevention of separation. • BASELINE: 1,647 children in infant homes at the end of 2012 (Ministry of Health). Alternative care data unknown. 		
	<p>Finalize closure of 13 infant homes while providing top quality family-type care to the children. Specifically, the <i>pilot closure of eight infant homes</i> in Gabrovo, Montana, Pazardzhik, Pernik, Plovdiv, Targovishte, Ruse, Sofia.</p>	2012–2014	<p>The Ministry of Health (MOH), in partnership with the State Agency for Child Protection (SACP) and the Agency for Social Assistance (ASA), is implementing the 'DIRECTION: Family' project. A project management team formed at national level (in the MOH) is supported by national consultants in three different fields: deinstitutionalization and change management; early childhood development; and neonatology. At municipal level, MOH has appointed a local coordinator in each of the eight pilot municipalities.</p> <p>Since December 2012, the teams have been updating the assessments of the needs of each child placed in the pilot infant homes as well as the assessments of the families of the children. By 1 February 2013, a clear plan was in place for each child, including a proposal of the best family environment for him/her – the biological family, a foster family or an adoptive one. In a few cases the best option proposed for the child is to live in a small group home.</p> <p>The local multidisciplinary teams had produced by the end of March 2013:</p> <ul style="list-style-type: none"> • an analysis of the reasons for placing children in the institution • an analysis of existing health and social services in the region • an analysis of the resources of the institution. <p>Future project activities include:</p> <ul style="list-style-type: none"> • planning of new integrated services in each pilot region • development of methodologies for innovative services • provision of training to staff of the pilot institutions and the new services.

COUNTRY/ REPRESENTATIVE	COMMITMENTS MADE		MONITORING OF COMMITMENTS STATUS
	ACTION	TIME	
	- <i>Closure of infant home in Shumen – ‘A Family For Every Child’</i> project aimed at building services and measures to support families of children under three. Opening of a Maternal and Child Health Centre that will provide health visits by nurses to all children under three and to expectant mothers without health insurance.	2013	<p>The inter-sectoral project ‘A Family for Every Child’ launched in October 2010. It aims to establish a regional network of family support services and thus enable the closure of the region’s infant home. The project is supported by a national campaign on the effects of the institutionalization of young children and the importance of a family environment. The majority of funds were collected following a national TV show. As part of the project, assessments were made of the children placed in the infant home and their families. Key results achieved so far:</p> <ul style="list-style-type: none"> • reduction in the number of children placed in the infant home – from 107 to 21 • reduction in new entries – from 60 entries in 2010 to three entries in 2012. <p>The closure of the home is expected at the end of 2013, once all children have been placed in a family environment.</p>
	- <i>Closure of all homes for children and infant homes in the Varna and Dobrich regions</i> (memorandum of understanding between Lumos, MOH, Ministry of Labour and Social Policy, Ministry of Education, Youth and Science, SACP and ASA) to replace them with social services.	2012–2015	<p>In these regions, Lumos is building a network for the prevention of the placement of children in institutions (especially in infant homes) based on increasing the capacity of both local service providers (through training) and protection bodies. Lumos has also developed a protocol for the involvement of the service providers and protection bodies in cases of reintegration of children from the infant homes.</p>
	- <i>Closure of the infant home in Shiroka Laka</i> (Hope and Homes for Children and International Social Service) and putting in its place services for the rehabilitation and social integration of children and disadvantaged people from the area.	June 2013	<p>On 19 December 2012, the Council of Ministers announced the official closure of the institution. In 2012, there were 15 children in the institution – two were reintegrated in their families, four were placed in foster care, five were adopted and four were placed in small group homes.</p> <p>MOH is currently managing the liquidation of the institution, a process expected to be complete by the end of June 2013. The financial resources used for the home can be transferred to the new service for the rehabilitation and social integration of children and disadvantaged people.</p>

COUNTRY/ REPRESENTATIVE	COMMITMENTS MADE		MONITORING OF COMMITMENTS STATUS
	ACTION	TIME	
	<p>- <i>Closing infant home in Pleven</i>. The specific goals are to: i) improve care for children; ii) plan for each of the children in the home the most suitable alternative (living in a family or closest to the family); iii) develop a network of services at the district level to support families at risk, thereby creating the necessary conditions to prevent children under three being placed in residential care; and to iv) support strengthening the capacity of local authorities and the system of child protection to ensure the best interests of the child.</p>	2015	<ul style="list-style-type: none"> • A plan for the deinstitutionalization of the infant home, launched in June 2012, is being implemented under the management of MOH. • In September 2012, a special inter-institutional working group (IWG) for coordination and decision-making on the implementation of this plan was set up, with a chairperson from MOH. To monitor the overall process, the IWG visited DMSGD (Home for Medico-Social Care for Children), Pleven at the end of 2012 and evaluated progress. Planned action to be taken: <ul style="list-style-type: none"> • Assessments of resources. A financial analysis of the budget and a quick analysis of the region's needs for services are to be prepared in 2013. • A coordination mechanism for the implementation of all planned activities at regional and local level to be established. • The Pleven Child Protection Department (CPD) is working for prevention of abandonment at maternity hospital level. • Foster parents for infants and young children are being recruited and foster care for children with disabilities is being promoted in Pleven district (under the implementation of the 'I Have a Family Too' project).
	<ul style="list-style-type: none"> • Regional Development Programme to provide funds for the infrastructure for the services in the eight restructured homes. 	2013	<p>The reconstruction and renovation works in seven of the institutions began in February 2013. The procurement procedures for equipment and furniture opened at the end of March 2013.</p>
	<ul style="list-style-type: none"> • Human Resource Development Programme (Component 2 of the 'Chance for a Happy Future' grant scheme) to provide funds for the soft measures in the eight pilot districts. 	2013	<p>The scheme opened at the end of March 2013. The eight pilot municipalities can apply for and obtain funding for provision of the new services planned in Component 1 (the 'DIRECTION: Family' project).</p>

COUNTRY/ REPRESENTATIVE	COMMITMENTS MADE		MONITORING OF COMMITMENTS STATUS
	ACTION	TIME	
	<ul style="list-style-type: none"> • Develop the model of integrated social-health services ('Chance for a Happy Future') to guide the reintegration in families of children in institutional care, the prevention of baby abandonment and relinquishment, and the design of alternative family care. 	2013	On 1 March 2013, MOH approved the terms of reference for a new service to be piloted under Shumen district 'A Family for Every Child' project – home visits for children below three years of age.
	<ul style="list-style-type: none"> • Further development of foster care as the main alternative to the placement of children in institutional care. 	Until 2025	<p>A national project to develop foster care across the country was launched at the end of 2011. Financed by the EU Structural Funds, the project supports the establishment of foster care teams in 83 municipalities. Foster care continues to be provided by previously established services. According to most recent data available (December 2012) there are currently 1,425 foster parents caring for 1,144 children.</p> <p>Foster care for children under three has seen significant progress. More than 150 children were placed in foster care as of February 2013 in the 83 pilot municipalities alone.</p>
Albania <i>Kastriot Sulka,</i> <i>Deputy Minister</i> <i>of Labour, Social</i> <i>Affairs and Equal</i> <i>Opportunities</i>	<ul style="list-style-type: none"> • VISION: No children below three in institutions by 2015, via transforming institutions into community-based services. • BASELINE: 154 children under three years in public and non-public institutions (State Social Service, March 2012). 80 children below three in family-based care (data April 2012 from NGO pilot programme). 		
	<ul style="list-style-type: none"> • Advance the implementation of social care services reform. Review of financial regulations and financial information systems of the Government of Albania for the management of social protection services. 	By Sept. 2013	Consultant to be hired and begin the work.
	<ul style="list-style-type: none"> • <i>Formative analysis of the institutional set-up of regional structures (Needs Assessment Commissions)</i> responsible for the planning and budgeting of social care services. 	By Sept. 2013	Company hired and work begun.

COUNTRY/ REPRESENTATIVE	COMMITMENTS MADE		MONITORING OF COMMITMENTS STATUS
	ACTION	TIME	
	<ul style="list-style-type: none"> • <i>Capacity assessment and development of tools for case management in social work.</i> 	By Sept. 2013	Company hired and work begun.
	<ul style="list-style-type: none"> • <i>Reform the social worker job – including statutory definition of a social worker, introduction of licensing and code of ethics for social work, recruitment and training of social workers (especially on case management and in rural areas) and gradual introduction of supervision and assessment.</i> 	By Sept. 2013	Company hired and work begun.
	<ul style="list-style-type: none"> • <i>Institutional analysis of state social services to review role, duties and responsibilities in the context of social care services reform.</i> 	By Sept. 2013	Company hired and work begun.
	<ul style="list-style-type: none"> • <i>Create a 'road map' for the development and implementation of the deinstitutionalization process (transforming residential institutions into community-based services and establishing preventive services to avoid the separation of children from their families).</i> 	By Sept. 2013	This will begin by the second half of 2013, once the financial regulations have been clarified.
	<ul style="list-style-type: none"> • <i>Update/upgrade the national social services database.</i> 	By Sept. 2013	Consultant hired and work begun.

COUNTRY/ REPRESENTATIVE	COMMITMENTS MADE		MONITORING OF COMMITMENTS STATUS
	ACTION	TIME	
	<ul style="list-style-type: none"> • <i>Conducting assessments:</i> <ul style="list-style-type: none"> - street children situation assessment - children with disabilities situation analysis - foster care project assessment - assessment of service providers' capacity to address the developmental needs of young children (under three, including children in institutional care). 	By Sept. 2013	<ul style="list-style-type: none"> • Consultants/companies hired and work begun for: street children situation assessment, and assessment of service providers' capacity to address developmental needs of young children. • Terms of reference prepared and a call for applications for children with disabilities situation analysis and foster care project assessment published in March 2013.
	<ul style="list-style-type: none"> • <i>Overall quality assurance and expert guidance on social care services reform</i> action planning and implementation (by international experts who designed the entire social care services reform document). 	By Sept. 2013	Consultant hired and work begun.
	<ul style="list-style-type: none"> • <i>Support models of integrated social services.</i> 	2013	Non-governmental organizations (NGOs) are supported to provide specialized services.
	<ul style="list-style-type: none"> • Implement the 'Returning Children Back to Families' project with a focus on transforming two public residential institutions in Tirana and one in Durres into community-based services and to work with two development centres (in Shkodra and Durres) to place children (under three) in foster care services. 	2014	Awaiting approval of the project.

COUNTRY/ REPRESENTATIVE	COMMITMENTS MADE		MONITORING OF COMMITMENTS STATUS
	ACTION	TIME	
Armenia Artem Asatryan, Minister of Labor and Social Affairs	VISION: Ensure children are brought up in a family environment , via deinstitutionalization and the development of alternative care and new prevention systems.		
	BASELINE: 105 children under three in state and charity run institutions (February 2013) 20 children under three in family-based care (December 2011)		
	<ul style="list-style-type: none"> • Develop the social protection system and implement targeted programmes – to increase the efficiency and reach of the family benefits system among socially vulnerable families. 	2014	No developments yet. The Ministry of Labor and Social Affairs has plans to increase the efficiency of the family benefits system by dividing it into two sub-groups for families with children (to be called 'family benefit') and for others (to be called 'poverty benefit') but no specific actions have been initiated yet. A draft government decree has been circulated among the other ministries; it is expected to be adopted in May 2013 and to enter into force in January 2014.
	<ul style="list-style-type: none"> • Introduction of integrated social services system providing a new quality of services and new methods and mechanisms to improve the social condition of the clients, including: <ul style="list-style-type: none"> - establishment of 52 integrated service centres - training of social workers. 	2015–2016	The Government's decree on the introduction of integrated social services was adopted in 2012. Before June 2013, 15 integrated social centres will be opened (one has already opened in the Ararat pilot region) and training of social workers from all 15 centres will be completed before June. Depending on the results of the pilot project, it is expected that integrated social services will be fully functioning in all regions as of 2015–2016.
Azerbaijan Sadagat Gakhramanova, Deputy Chairperson of the State Committee for Family, Women and Children's Affairs	VISION: Prevent baby abandonment, relinquishment and placement in institutional care.		
	BASELINE: 55 children under three in institutional care (2011). No foster care exists for children below three years old.		
	<ul style="list-style-type: none"> • Improve the social condition of families to prevent the separation of children from their families. <i>Regional Office's proposal of measures: amount of social allowances for newborn babies is increased; number of families at risk of separation is identified and new social services for such families to prevent separation are introduced.</i> 		Although no official statement has been made, the Ministry of Labour and Social Protection, with UNICEF assistance, is planning to recommend steps and measures on the continuous increase of social allowances to make them at least equal to the minimum living wage. Beginning this year, the Government is planning to <i>undertake needs assessment</i> to inform the establishment of new social services throughout the country under the Law on Social Services.

COUNTRY/ REPRESENTATIVE	COMMITMENTS MADE		MONITORING OF COMMITMENTS STATUS
	ACTION	TIME	
	<ul style="list-style-type: none"> • Create effective alternative care, including foster care. <i>Regional Office's proposal of measures: regulation on foster care is adopted; number of potential foster families is identified; foster families are trained.</i> 		It is expected that the Government will adopt the standards on foster care and allocate budgetary funds to establish foster care as a new service. UNICEF will continue its advocacy in raising the importance of prioritizing children under three within the process, but chiefly after the aforementioned decisions have been made.
	<ul style="list-style-type: none"> • Reintegration of children in institutional care into family-based environment. <i>Regional Office's proposal of measures: number of children below three are given to foster families; number of children below three are adopted.</i> 		Specific discussions with the Ministry of Health on transforming institutions for children under three are ongoing.
	<ul style="list-style-type: none"> • Enhance awareness of the population on the subject. <i>Regional Office's proposal of measures: awareness-raising campaigns are launched; number of families sensitized.</i> 		UNICEF Country Office has insufficient funds to launch a public awareness campaign on this specific topic. At the same time, the Government is working on a draft communication strategy on 'reintegration of children currently in institutional care. This process is supported by UNICEF, which will suggest that children under three are prioritized.
Belarus Viktor Yakzhik, Deputy Minister of Education	VISION: Prevent the placement of children below three in institutional care, including children with disabilities , via stimulating the development of foster care and community-based support services aimed at preventing separation.		
	BASELINE: 1,110 children below three in institutional care (September 2011). 358 children below three in family-based care (September 2011).		
	<ul style="list-style-type: none"> • Strengthen inter-agency cooperation for emergency response in cases where children below three are at risk of institutionalization; provide community-based support services for young families at risk with children below three. 		Child protection standards were developed and are under final consideration before their official formalization. This is an inter-agency set of documents regulating different stages of the work with families and children, including social investigation into child abuse and neglect cases (including children below three), rehabilitation and closure of institutions.

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	ACTION	TIME	
	<ul style="list-style-type: none"> • Identify the key reasons for children’s placement in infant homes and remove barriers to family-type placement of young children. 		The initial determinant analysis was conducted. The strategy of bottlenecks and barriers removal is under discussion by the Government, Ministry of Education, Ministry of Health and Ministry of Labour and Social Protection.
	<ul style="list-style-type: none"> • Support foster families raising children below three and children with disabilities via: <ul style="list-style-type: none"> • - financial incentives • - training and support (psychological, pedagogical, legal, etc.). 		The strategy is under discussion by the Government and leading NGOs within the umbrella project on the prevention of the placement of children under three in institutional care and the provision of a family environment for these children.
	<ul style="list-style-type: none"> • Creation of mother and child support centres to provide shelter to mothers of infants in a crisis situation. 		The strategy is under discussion by the Government and leading NGOs.
	<ul style="list-style-type: none"> • Provide respite care services to families raising children with disabilities. 		A set of documents regulating respite care services for families raising children with disabilities was developed and is under approbation by two NGOs and two state institutions (education and social protection). The next step will be to adapt the respite care services model to families with children under three with special needs.
	<ul style="list-style-type: none"> • Raising public awareness of the rights of the child, the adverse effects of institutionalization on the child’s development (especially at a very young age) and the role of the family for the child. 		The strategy is under discussion by the Government and leading NGOs.

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	ACTION	TIME	
	<ul style="list-style-type: none"> Working out action plans for the transformation of institutional care into health care institutions to provide palliative care for children with severe and multiple disorders requiring 24-hour health care as well as for medical and social follow-up of the families rearing children with disabilities. 		A series of meetings was held to discuss the concept of the gradual transformation of institutions into non-institutional settings. The strategy is under discussion by the Government and leading NGOs.
Bosnia and Herzegovina <i>Damir Dizdarevic,</i> <i>Assistant Minister for Labour, Employment and Social Protection,</i> <i>Ministry of Civil Affairs</i>	VISION: Develop within a few years the system protecting children under three from abandonment, relinquishment and placement in institutional care. As no such legislation exists today, children are placed in institutions.		
	BASELINE: 77 children below three in infant homes (2011). Number of children in alternative care is unknown.		
	<ul style="list-style-type: none"> Develop action plan for protecting children without parental care, with corresponding action for implementation and legislation in Bosnia and Herzegovina aimed at creating conditions for improvement so children below three are not placed in institutions. 	Next few years	The action plan has been developed and approved by the Federal Assembly. Implementation will begin in 2013.
	<ul style="list-style-type: none"> Incorporate into the regulations and practices of social protection all of the standards defined by NGOs (especially Save the Children) that cover social care for children without parental care, families at risk, institutional and alternative care, etc.). 		An assessment of all existing and previously produced standards and protocols is ongoing in 2013, and this will identify where major efforts are to be concentrated. Preliminary results indicate that one of the missing elements seems to be a well-structured and institutionalized case management system.

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Croatia <i>Danica Kramaric, Head of the Sector for Health Promotion and Protection, Department of Health Protection, Ministry of Health</i>	VISION: Increase family-based care among all children deprived of parental care from 66% today to 80% by 2016 , via the prevention of baby abandonment, relinquishment and placement in institutional care.		
	BASELINE: 111 children below three in state and non-state institutions (Ministry of Social Policy and Youth data, 2011). Number of children below three in alternative care is unknown.		
	<ul style="list-style-type: none"> • Complete the development of an early intervention system for children with developmental risks or difficulties to prevent baby abandonment and relinquishment. 		<ul style="list-style-type: none"> • No substantial progress.
	<ul style="list-style-type: none"> • Implement the 'Plan for deinstitutionalization and transformation of welfare homes and other legal entities engaged in social welfare activities in the Republic of Croatia from year 2011 to 2016'. Key priorities include: <ul style="list-style-type: none"> - improving legislation - transforming children's homes and reintegrating into families children in institutional care - improving non-institutional services for children and building their networks - improving inter-agency coordination and cooperation with civil society. 	By 2016	The new Social Welfare Act is currently in the process of being modified, and modifications to the Foster Care Act will follow. A new national strategy for the rights and interests of children is also in development. The Ministry of Social Policy and Youth is in the process of implementing an IPA (Instrument for Pre-Accession Assistance) project regarding the transformation of residential institutions.

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	<ul style="list-style-type: none"> • Transform children's homes into Centres for Children that are tasked with developing support services for biological, foster and adoptive families in local communities. 		<p>UNICEF will provide support to the Ministry regarding capacity development of social welfare professionals in those residential institutions that are to be transformed into Centres for Children. UNICEF will also support the Ministry's efforts to improve non-institutional services, especially expert interventions that focus on supporting biological families and thus contribute to the prevention of separation of children from their families.</p> <p>Joint activities are planned in support of further improvements of foster care.</p>
Georgia <i>Irakli Nadareishvili,</i> <i>Deputy Minister of</i> <i>Labour, Health and</i> <i>Social Affairs</i>	VISION: Minimize the number of children in large institutions, via transformation of the child care system in order to provide a family-based environment and small group homes, and the prevention of separation.		
	BASELINE: 46 children under three in state-run institutions (2012). 134 children under three in family-based care (2012).		
	<ul style="list-style-type: none"> • Act upon the acknowledgement of the need to address the substitution of institutions for children with disabilities. 		<p>43% reduction in the number of children under three in institutional care since November 2012 achieved. Children with and without disabilities (more so) needing formal care are mostly placed in specialized, emergency or regular foster families.</p>
	<ul style="list-style-type: none"> • Develop and extend new services to prevent family separation. 		<p>According to the Child Care State Plan from 2013:</p> <ol style="list-style-type: none"> 1) Early intervention services for children with special needs will be covered for children below seven (versus below three previously). 2) State budget for food vouchers for children aged 0 to 18 months at risk of abandonment and relinquishment will increase.
	<ul style="list-style-type: none"> • Close the last infant home, in Tbilisi (80 infants). 		<p>12% reduction in number of children under three in institutional care since November 2012. Number of children without special needs decreased substantially in March/April 2013 due to legislative changes. The need for more specialized services for children with disabilities is delaying closure, although the Ministry for Labour, Health and Social Affairs is still committed to closing Tbilisi Infant Home. The need and opportunities to strengthen specialized foster and palliative care for children with severe disabilities are under discussion by the Government of Georgia, partner NGOs and donors.</p>

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Kazakhstan <i>Svetlana Dzhalmagambetova, Senator, Social and Cultural Development Committee, Senate of the Parliament</i>	VISION: By 2020, prevent the institutionalization of children below three, including children with disabilities , by stimulating community-based support services with a strong gatekeeping, multi-sectoral mechanism and through the development of foster care.		
	BASELINE: 1,621 children below three in institutional care (Child Rights Protection Committee, January 2013). 168 children in family-based care (Ministry of Health, February 2013).		
	<ul style="list-style-type: none"> • Give more attention to families with challenged well-being - single mothers, families with many children and vulnerable families. 		The law on social protection adopted on 4 February 2013 included maternity leave for parents adopting children.
	<ul style="list-style-type: none"> • Develop an integrated approach to community-based support to families, medical and social services, risk assessment and prevention of separation. 		<p>The draft case management and referral protocols are being tested in three locations to ensure gatekeeping, comprehensive assessment of child needs and individual care plans.</p> <p>The Ministry of Health introduced 1,157 social workers to support vulnerable families at primary health care level and began to introduce lawyers, social workers and psychologists into infant homes and maternity homes.</p>
	<ul style="list-style-type: none"> • Investigate the causes of baby abandonment and relinquishment. 		<p>Two studies on the causes of baby abandonment and relinquishment have been conducted with the support of UNICEF. Further advocacy activities will be organized to convey these messages in a more systematic way. The documented clinical review of the causes of baby abandonment and relinquishment and prevention models will be presented by the end of 2013.</p> <p>In 2012, the Ministry of Health began analysing the data on children under three in infant homes and their entry into the system.</p>
	<ul style="list-style-type: none"> • Include the statement “prevention of the placement of children below three under institutional care” in the job description of social workers. 		Done. The prevention of baby abandonment and relinquishment was included in the terms of reference of social workers at primary health care level.

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	<ul style="list-style-type: none"> • Complete the development of a model programme on the prevention of baby abandonment and relinquishment, focusing on delivering support services to families and assisting families with a child with disabilities. Programme is led by UNICEF and three regions of Kazakhstan. 		<p>Two programmes on the prevention of baby abandonment and relinquishment have been tested in the Karaganda, Astana and East Kazakhstan regions. The models will be evaluated in 2014.</p>
	<ul style="list-style-type: none"> • Normative changes and reforms focused on: <ul style="list-style-type: none"> - legislative changes - tightening gatekeeping - adopting one inter-ministerial strategic document outlining effective measures for the prevention of baby abandonment and relinquishment as well as family separation - prioritizing resource allocation for the development of local integrated community-based services supporting families - allowing the introduction of alternative forms of child care, including for children with disabilities - building the capacity of maternity wards and health care organizations to identify early on children at risk of abandonment and relinquishment or children with disabilities, and prevent their separation. 		<p>See above.</p> <p>The decision was made to model foster care for children under three in four regions of Kazakhstan and introduce the policy changes. The cost-benefit analysis of institutions vis-à-vis alternative care was made upon the request of parliament and presented for public discussion during the Civic Forum on child care reform in February 2013. The Ministry of Health updated the format of the individual care plans for children in infant homes by making it more family-oriented with the introduction of cross-sectoral components. A training module on baby abandonment and relinquishment for social workers at maternity wards and at primary health care level was tested and is being finalized.</p>

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Kosovo under UNSCR 1244 <i>(not present at the conference)</i>	VISION: to be defined.		
	BASELINE: 23 children below three in institutional care (Ministry of Labour and Social Welfare, 2012) 38 children below three in family-based foster care (Ministry of Labour and Social Welfare, 2012.)		
	<ul style="list-style-type: none"> • Support further development of the family-based foster care services as the main alternative to institutionalization, leading to the successful preparation of children for reunification with biological parents or for adoption. 	2015	As part of the reform process, support will be provided to further develop the family-based foster care services through revision of the relevant legislation framework and development of the appropriate services, and by raising public awareness of the benefits of foster care.
	<ul style="list-style-type: none"> • Develop and strengthen the existing services at local level for the prevention of family separation. 	2016	To follow up the new phase of the child protection reform programme, support will be provided to strengthen existing services and develop new ones that will include prevention mechanisms for children below three years old.
	<ul style="list-style-type: none"> • Increase public awareness of the importance of foster care, with the aim of increasing the number of potential families to foster children with disabilities. 	2015	Supporting agencies are contributing on an annual basis to various awareness-raising activities targeting families, parents, youngsters and the social, health and education sectors. Different programmes will support further visibility campaigns targeting the placement in foster care of children under three with disabilities.
	<ul style="list-style-type: none"> • Institutionalize the individual case management model of centres for social work to strengthen the early identification and referral mechanisms targeting children and families at risk through effective cross-sectoral coordination. 	2016	Case management and referral mechanisms are currently functional in six municipalities of Kosovo. These mechanisms will be expanded to other municipalities of Kosovo as part of the deinstitutionalization process to take place over next three years.
	<ul style="list-style-type: none"> • Strengthen the capacities of the local authorities in the planning, budgeting and implementation of family-based care services. 	2016	The decentralization of social services has negatively affected the quality of social services at the community and municipal levels. As part of the child protection reform processes, support will be provided to the municipalities to plan, budget for and implement appropriate child protection related services and to improve coordination between multiple local stakeholders

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	<ul style="list-style-type: none"> • Ensure the appropriate revision of the legal framework and its effective implementation – Family Law, Law on Family and Social Services – by 2016. 	2016	The Kosovo legislation on children is very segmented, comprising multiple laws and strategies relating to children’s rights in general but which are not in harmony and do not complement one another. Provisions are scattered and are not specifically aimed at children. The comprehensive review and gap analysis of the relevant legal framework will cover a review of the child protection legislation and benchmarked versus relevant UN, EU and international conventions and directives. Guidelines for improvements in this respect will be made on completion of the review.
Kyrgyzstan <i>Kamila Talieva, Vice Prime Minister</i>	VISION: No placement of children below three in institutional care in the near future , via the creation of foster care and the strengthening of support for families at risk.		
	BASELINE: 206 children below three in institutional care (Ministry of Health, 2011). Number of children in alternative care is unknown.		
	<ul style="list-style-type: none"> • Government to sign inter-agency plan on optimizing the management and financing of the residential institutions. Including reform of child care system to gradually transform infant homes into centres of temporary care. 	Dec. 2012	Inter-agency plan on optimizing the management and financing of the residential institutions was signed by the Government on 7 December 2012. The plan includes the transformation of infant homes into centres of temporary care.
	<ul style="list-style-type: none"> • Create enabling environment for strengthened substitute families, especially those taking care of abandoned children below three years old. 	2013	<ul style="list-style-type: none"> • With UNICEF, case management procedures including the identification of children and families in difficult life situations in the place of their residence have been tested in 18 municipalities. Results of a one-year pilot have been presented to multi-agency working group and are being used as the basis for the development of regulations on case management. Identification, registration and referral of children in difficult life situations are totally new functions of local self-governance bodies stipulated in the new version of the Children’s Code. • Regulations about compensation for mothers taking care of children with disabilities are in development. • Decree of the Ministry of Social Development concerning the training of foster families is in development. • New regulations about guardianship and trusteeship have been developed and are currently in circulation among ministries for approval.

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	<ul style="list-style-type: none"> • Develop tools in maternity homes to prevent baby abandonment and relinquishment, led by Ministries of Health and Social Development. 	2013	<ul style="list-style-type: none"> • An analysis of the reasons for abandonment in maternity wards and infant homes and an analysis of future placements of abandoned children are being conducted with UNICEF support. Future interventions will be planned based on the results of the analyses. • Third and fourth rounds of training on abandonment prevention are being conducted. The course has been developed and incorporated in the curricula of the Ministry of Health Training Institute with UNICEF support.
Montenegro <i>Remzija Ademovic,</i> <i>Deputy Minister of Labour and Social Welfare</i>	<p>VISION: By 2017, Montenegro will strive to decrease the number of all institutionalized children by 30% (baseline is 316 institutionalized Montenegrin children in total, so targeted number is 221 or fewer children) and children below three will be the priority (baseline is 19 children and the targeted number 13 or fewer children, although Montenegro will strive to achieve zero).</p> <p>BASE LINE: 19 children below three in institutional care (December 2012). Number of children in alternative care is unknown.</p>		
	<ul style="list-style-type: none"> • Finalize development of an inter-sectoral protocol for the prevention of the placement of children in institutional care, with the emphasis on children below three, aiming to: <ul style="list-style-type: none"> - <i>create the necessary preconditions for better family support</i> - <i>prevent the placement of children in institutional care</i> - <i>speed up the process of reintegration into families of the children currently in institutional care.</i> 	End of 2013	<ul style="list-style-type: none"> • UNICEF received letter of support for the initiative 'Ending placement of children below three in institutions' from the Prime Minister's Cabinet. • Process of organizing a parliamentary session on ending the placement of children below three in institutions has been ongoing. • Process of development of inter-sectoral protocol for the prevention of the institutionalization of children with the emphasis on children below three has been initiated.

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	<ul style="list-style-type: none"> • Finalize plan for the transformation of the children's home in Bijela, the only institution in Montenegro for the placement of children without parental care. The aim is to diminish the pressure on the institution and return children to their families or place them in alternative forms of care, i.e., foster families or other community-based services. 	By March 2014	Ministry of Labour and Social Welfare (MLSW) has established a working group for the transformation of the Bijela institution. A transformation plan has been drafted. UNICEF to provide technical expertise to review the plan and align it with international standards. The transformation plan is to be finalized and signed during the first quarter of 2014.
	<ul style="list-style-type: none"> • Priority challenges are to: <ul style="list-style-type: none"> - strengthen biological families, provide greater support to mother and child, and create conditions for their social and financial security - further strengthen kinship foster care and develop professional foster care with the primary focus on children below three - ensure all necessary preconditions for the full implementation of the new legislative and strategic framework - continue to further strengthen all relevant sectors with the aim of preventing the placement of children in institutional care. 	By end of 2013	<ul style="list-style-type: none"> • The comments on the draft Law on Social and Child Protection on the prevention of institutionalization through the introduction of a package of social welfare services and social work measures/ interventions (including financial) were prepared and provided to the MLSW working group (February 2013). • Through the EU-supported initiative 'Child Care System Reform' (IPA, 2010), which is being implemented by MLSW with the technical assistance of UNICEF, the National Strategy on Fostering was developed and adopted by the Government of Montenegro in March 2012. Following this, training in fostering is being provided (July 2012 to November 2013).

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	<ul style="list-style-type: none"> • Coming next: <ul style="list-style-type: none"> - continue inter-sectoral education for health and social workers on preventing the placement of small children in institutions - adopt inter-sectoral protocol on preventing the placement of children in institutional care, with a special focus on children below three - adopt standards that help to define foster care services - organize mass awareness-raising campaign on the importance of family to child development as well as on the benefits and importance of foster care - continue the education of social workers to improve the quality of the service. 	By end of 2013	<ul style="list-style-type: none"> • Process of development of an inter-sectoral protocol for the prevention of the institutionalization of children with emphasis on children below three has been initiated – to be signed by the end of 2013. • MLSW has established a working group for the development of Standards on Fostering; UNICEF technical expertise is being provided. Standards on Fostering to be finalized in 2013 and translated into a by-law. • Process of development of a by-law on the reorganization of work and adoption of new methods of work (case management) by local centres for social welfare is ongoing. By-law to be finalized in 2013. • Awareness-raising campaign on the right of the child to live in a family environment will be organized in order to support the prevention of institutionalization and the development and implementation of foster care – as of the second quarter of 2013. It will be combined with recruitment of the first foster families (in accordance with the Action Plan of the National Strategy on Fostering covering 2012–2016).
	<ul style="list-style-type: none"> • Open day care centres for children with disabilities in 80% of municipalities (e.g., 16 versus the 6 present today). 	By 2017	In December 2012, an additional day care centre was established in Ulcinj municipality. Six day care centres are currently operational in Montenegro; a further day care centre will be established in Cetinje in Spring 2013.

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Republic of Moldova <i>Valentina Buliga, Minister of Labour, Social Protection and Family</i>	VISION: End the placement of children under three in institutions , via the prevention of institutional care, and more effective and efficient social care services.		
	BASELINE: 173 children under three in institutional care (Sofia statement, November 2012). 24 children under three in family-based care (National Bureau of Statistics, 2011)		
	<ul style="list-style-type: none"> • Strengthen family planning services and promote life skills education to prevent unwanted pregnancies. 	Time frame for actions to be set in an Action Plan.	Ending placement of children below three is formulated as a specific objective in the draft Child and Family Protection Strategy for 2013–2020 currently being promoted by MLSPF. Once the Strategy is adopted by Parliament, appropriate action plans will be developed for its implementation. It is expected that these action plans will include the activities mentioned in the commitments.
	<ul style="list-style-type: none"> • Strengthen inter-sectoral early identification and referral mechanisms targeting children and families at risk. 		A new law for the special protection of children at risk and children separated from their parents, which has been through the first hearings in Parliament, has a provision relating to this mechanism. This mechanism was developed and piloted in two districts. The results of the pilot are currently being assessed and will inform the finalization of the mechanism in view of its promotion through a government decision. The Government's ownership is there, a number of vital policy initiatives, including inter-sectoral ones, are already in the pipeline, and consultations on actions to be taken towards the goal are ongoing.
	<ul style="list-style-type: none"> • Professionalization and accreditation of social services targeting pregnant women and families with small children. 		No progress yet. Development of services will feature in the action plan(s) mentioned above.
	<ul style="list-style-type: none"> • Develop outreach services targeting women and families who avoid contact with services. 		No progress yet. Development of services will feature in the action plan(s) mentioned above.
	<ul style="list-style-type: none"> • Develop family support services and linkages to cash transfers. 		MLSPF has developed regulations on family support services that include provisions on monetary support and social assistance services. The goal of stopping the placement of small children in institutional care is articulated in the draft national strategy; approval of this strategy will pave the way for approaching the issue of children under three, including those with disabilities, in a systemic and inter-sectoral manner.

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	<ul style="list-style-type: none"> • Strengthen early detection and intervention mechanisms for children with disabilities. 		<p>This mechanism is currently being promoted by the Ministry of Health.</p>
	<ul style="list-style-type: none"> • Expand existing foster care services to include children under three and children with disabilities by: <ul style="list-style-type: none"> - <i>developing a specific payment scale</i> that enables foster parents to stay at home and to provide adequate care according to a child's age and specific needs - <i>continuing broad public awareness campaigns</i> - <i>developing new recruitment strategies and profiles for caregivers</i> to increase access for children with disabilities and children below three - <i>increasing budget allocations and linking foster families to other social services</i>, especially in the case of children with disabilities. 		<p>An external assessment of foster care services has been conducted.</p> <p>The report was presented by the author (international expert) to an inter-sectoral technical working group in March 2013. The expected outcome for this exercise is the development of a response plan for the implementation of the expert's recommendations.</p> <p>The ownership of the Ministry of Social Protection, Family and Child is noteworthy.</p>

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Romania <i>Denisa Oana Patrascu, Secretary of State, Ministry of Labor, Family and Social Protection</i> <i>New Secretary of State of the Ministry of Labor, Family, Social Protection and Elderly People, Codrin Scutaru sustains commitments made at Sofia ministerial conference</i>	VISION: No children below three in institutions in the near future , via the enhancement of reform efforts.		
	BASELINE: 715 children under three in institutional care (national statistics, 2012). 2,723 children under three in family-based care (Ministry of Labour, Family, Social Protection and Elderly/ Direction for Child Protection, December 2012).		
	<ul style="list-style-type: none"> • Increase the age for the prohibition of infant placement in institutional care from two to three years old. 	By 2020	<ul style="list-style-type: none"> • Revised National Strategy and Operational Plan for the Promotion and Protection of Children's Rights (2014–2020) and the planned revision by the Ministry of Labor, Family and Social Protection (MLFSP) of Law 272/2004 (expected between June and December 2013), are expected to increase the age for the prohibition of institutionalization to three years.
	<ul style="list-style-type: none"> • Double the number of children benefiting from services preventing separation, by broadening the reach of the services. 		<ul style="list-style-type: none"> • Draft secondary legislation for the new provision mentioned above – as well as for increasing the quality of alternative services for children under three – is included in the MLFSP plan to be developed by the end of 2013.
	<ul style="list-style-type: none"> • Enhance the quality of maternal assistance and family placement services with a special focus on children under three and children with disabilities. 		<ul style="list-style-type: none"> • Continued partnership between MLFSP/Directorate of Child Protection, General Directorate for Social Assistance and Child Protection at county level and NGOs (i.e., Hope and Homes for Children and SERA Foundation) is focusing on the continued closure of old-type institutions and the ongoing development of new, family-type care. This activity is currently particularly hindered by austerity measures taken by the Government since mid-2009 and that suspend the hiring of new professionals within public administration.
	<ul style="list-style-type: none"> • Continue the transformation of institutional care into family-type care, sustaining progress in the reintegration of children currently in institutions. 		

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	<ul style="list-style-type: none"> • Continue to address remaining bottlenecks and enable the protective environment for families and their children, including by promoting social norms conducive to nurturing families for all children. 		<ul style="list-style-type: none"> • MLFSP efforts to address social norms relating to violence against children were acknowledged by the implementation of an awareness-raising campaign at the close of 2012 and approval of the National Strategy for Combating and Preventing Violence against Children through Governmental Decision HG 1156/2012 in December 2012. • Moreover, a recent situation analysis of the abuse and neglect of children performed in partnership with Save the Children Romania offers a good baseline for monitoring progress of the National Strategy. • Development of a unique instrument for reporting violence against children by multi-sectoral institutions is planned to begin mid-2013 in cooperation with UNICEF.
Serbia <i>Brankica Jankovic, State Secretary, Ministry of Labour, Employment and Social Policy</i>	VISION: End the placement of children under three in institutional care and significantly reduce unnecessary parent-child separation, including baby abandonment and relinquishment, by 2015.		
	<ul style="list-style-type: none"> • Strengthen family support services aimed at preventing the separation of a young child from his/her family. 		<ul style="list-style-type: none"> • The Ministry of Labour, Employment and Social Policy (MOLESP) is developing a new family preservation service and is committed to making it an integral part of the transformation of homes for children without parental care. The service is defined as flexible family support providing hands-on parenting skills-building, practical counselling (problem-solving) to families; assistance in accessing financial transfers to which families are entitled; and advocacy for access to services for children and parents (e.g., nursery for child, mental health and substance abuse treatment for parents, support in upgrading home environment). MOLESP expects to fully define the services in the first half of 2013 – relying on the experience of other countries of ‘family preservation services’. The pilot of this service is expected to be up and running in four cities by September 2013. • There are 52 services for families of children with a disability – including day centre, respite and home help – that have been financed through EU accession funds. More than 90% of municipalities have budgeted for the continuation of these services in the second half of 2013, following the end of the funding period. The Republican and Vojvodina Institutes for Social Protection are issuing handbooks for managing the above listed services.

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	ACTION	TIME	
	<ul style="list-style-type: none"> • Enhance individual case management methods of work throughout the network of Centers for Social Work (CSWs). 		<ul style="list-style-type: none"> • The Republican Institute for Social Protection, mandated to invest in social welfare system development, is prioritizing case management capacity-building of CSWs in 2013. The plan is to ensure that all case managers working in CSWs have completed an accredited training programme. • Additionally, the Republican Institute for Social Protection has recognized the need for a separate training programme for supervisors concerning the assessment of parental capacities. This training will be developed and piloted with the aim of having it accredited by mid-2013.
	<ul style="list-style-type: none"> • Strengthen the capacity of the health care system for the early identification of and support to families at risk – both before and after birth, and by improving cooperation with social welfare. • Develop emergency foster care services and increase access to fostering for children with disabilities. 		<ul style="list-style-type: none"> • The Ministry of Health organized a round table discussion at the end of April 2013 to clarify the role of the health sector in early risk identification. The round table also covered themes relevant to social welfare and education such as the development of family-strengthening services and access to nurseries for families at risk. Instruments for identifying families at risk of separation for use by health sector professionals (patronage, paediatricians) to be developed in 2013 and piloted in 2014. • Emergency fostering and fostering of children with disabilities has been inserted into the revised rulebook on fostering. Its adoption has been blocked, however, due to the fact that the rulebook has not been harmonized with the Family Law (only with the Social Welfare Law adopted at a later date). • Ten families prepared for emergency fostering in Belgrade, where the largest number of children aged zero to three years old enter institutions through 'emergency placements'. • Regarding the fostering of children from large-scale institutions, the numbers are still relatively low. It is a positive sign, however, that this practice has been modeled and is now part of the system. In total, since autumn 2012, 10 children have been placed in foster families from the large-scale institutions or directly from a specialized infant hospital (Institute of Neonatology, Belgrade). These outcomes were supported through project funds, however, and it is unclear whether the fostering of children with more complex disabilities will continue in same manner without external support. Identifying for children with disabilities foster families that live in communities with access to the necessary services has proved difficult.

COUNTRY/ REPRESENTATIVE	COMMITMENTS MADE		MONITORING OF COMMITMENTS STATUS
	ACTION	TIME	
Tajikistan <i>Rukiya Kurbanova,</i> <i>Deputy Prime</i> <i>Minister and Chair</i> <i>of the National</i> <i>Commission on</i> <i>Child Rights</i>	VISION: Address the main factors contributing to the placement of children in baby homes.		
	BASELINE: 268 children under three in baby homes (Ministry of Health, February 2013). Number of children in alternative care is unknown.		
	<ul style="list-style-type: none"> • Decide if locally developed model of foster care ('Sarchashma' project, Northern Tajikistan) can be introduced nationally as a foster care model for children under three. 		In progress. UNICEF, together with HealthProm, Sarchashma and EveryChild, is working with national partners to address this issue.
	<ul style="list-style-type: none"> • Develop foster care. 		Negotiations are ongoing. Currently only guardianship and adoption mechanisms are in place. At the close of 2011, 519 children were under guardianship (TransMonEE, 2011).
	<ul style="list-style-type: none"> • Put in place family support mechanisms for the most vulnerable families and establish family-friendly policies and services, including emergency shelters for single mothers, community-based day care centres to prevent the placement of children below three in institutional care. 		One day-type centre ('Kishti') functioning in Dushanbe city is funded by the Ministry of Labour and Social Protection to work with parents and prevent children from being placed in institutional care. Dushanbe local authority is in the process of opening an emergency shelter for women with young children who are victims of domestic violence.
	<ul style="list-style-type: none"> • Improve the adoption process and guardianship through legislative reforms and structural changes to the agencies providing services to children. 		Follow-up meeting was held with Tajikistan's Parliament, the Ministry of Labour and Social Protection and the Ombudsperson's Office to discuss the necessary changes, specifically to draft a law on child protection that stipulates that the placement of children in institutional care is to be used only as a last resort. The terms of reference were developed for the rapid assessment of children in institutions and the assessment of the capacity of Child Rights Commissions/Child Rights Units to serve as a gatekeeping mechanism. The intention is to conduct these assessments in 2013 to provide recommendations for consideration in the drafting of the new law.

COUNTRY/ REPRESENTATIVE	COMMITMENTS MADE		MONITORING OF COMMITMENTS STATUS
	ACTION	TIME	
	<ul style="list-style-type: none"> • Run national information campaigns to challenge traditional perceptions, to promote prevention of the placement of babies in institutions and to deliver the message through local media that 'family is the best place for a child'. 		An orientation session was carried out with the participation of staff of the maternity homes of Dushanbe and Direct Rule Districts, including chief doctors, to discuss ending the placement of children under three in institutional care and the role of the doctors in consulting with parents to keep the child in the family. The Ministry of Health initiated this event.
The former Yugoslav Republic of Macedonia <i>Spiro Ristovski,</i> <i>Minister of Labour and Social Policy</i>	VISION: Ensure every child gains his/her right to a family.		
	BASELINE: 74 children below three in institutional care (Sofia statement, November 2012). Number of children in alternative care is unknown.		
	<ul style="list-style-type: none"> • Continue to develop and strengthen the foster family network. 	2015	<ul style="list-style-type: none"> • Implementation of the revised rulebook on criteria defining who can become a foster parent. In 2013, the Ministry of Labour and Social Policy introduced the criterion that only a person who has received specialized training can become a foster parent. • Adoption and implementation of the new standard for the provision of foster care related services by the Centre for Social Work (CSW). • Adoption and implementation of a new procedure accommodating children without parental care (including in foster care) provided by CSW. • Monitoring the quality of services provided by foster families through Institute for Social Activities (ISA) field visits and the electronic CSW data system established within ISA.
	<ul style="list-style-type: none"> • Continue deinstitutionalization reforms. 	2013 As of Jan. 2014	Under the umbrella of the National Strategy on Deinstitutionalization endorsed in 2007, the following is planned: <ul style="list-style-type: none"> • Planning phase – assessment of children and staff in institutions; assessment of available local resources to support the deinstitutionalization process (TBC). • Implementation phase – transformation and/or closure of institutions, reinforcement of existing services and creation of new services (TBC). • There are eight institutions in total (including one SOS Children's Village). Priority will be given to the institution for infants below three and to the institution for children without parents or deprived of parental care (three to 18 years old). • Adoption and implementation of a new standard and procedure for CSW to include case management and handling adoption cases. • Monitoring the quality of services provided by CSW in terms of deinstitutionalization through ISA field visits and the electronic CSW data system established within ISA.

COUNTRY/ REPRESENTATIVE	COMMITMENTS MADE		MONITORING OF COMMITMENTS STATUS
	ACTION	TIME	
Turkey <i>Askin Asan, Deputy Minister of Family and Social Policies</i>	VISION: No child under three will be placed in institutional care, but rather in family oriented care, except in 'reasonable situations'.		
	BASELINE: 708 children under three in institutional care (April 2013). 118 children under three in family-based care (March 2013).		
	<ul style="list-style-type: none"> • Continue the 'Back to Family and Support within the Family' project aimed at giving socio-economic support to children in poor economic conditions, to prevent separation or to enable their return to biological parents or relatives. 	2012–2013	<ul style="list-style-type: none"> • In order to protect family integrity, economic support services are provided to parents who cannot take care of their children due to economic hardships. In this way, the number of children in residential care because of economic hardship should be radically reduced. • Within this scope, the 'Back to Family and Support within the Family' project was initiated in 2005. During the period from 2005 to 2012, 8,861 children who were in residential care were supported to return to their own families or relatives. As of March 2013, 3,570 children in need of protection are being supported within their own family by means of social and economic support. • In 2012, 8,237 children of preschool age were supported within their own family environment. As of January 2013, 6,213 children of preschool age are being supported by means of economic and social support.
	<ul style="list-style-type: none"> • Increase prevalence of foster care and minimize institutional care. Accelerate family-based care through access to family-oriented services. 		<ul style="list-style-type: none"> • Amendments to foster care regulations have been adopted in order to adapt the foster care system to new policy directions. The amendments made are as follows: Classification of Foster Care Services, Foster Care Services by Relatives and Acquaintances, Temporary Foster Care Service, Permanent Foster Care Service, Specialized Foster Care Service. • Financial payments to be made for the placement, care and education of fostered children are being upgraded. Payments include an adequate monthly payment, optional insurance for foster parents, pocket money for children, transportation fees, course fees and health expenses not covered by basic social security insurance.
	<ul style="list-style-type: none"> • Children under three shall no longer be taken to institutions (later extended to include all children below six years of age). 	2012–2013	Following the enactment of amendments on the regulation of 'temporary foster care service', children between the ages of zero to three, except in certain cases, shall not be taken into institutional care; instead such children shall be cared for by selected and trained foster parents until a final decision is made about their case.

COUNTRY/ REPRESENTATIVE	COMMITMENTS MADE		MONITORING OF COMMITMENTS STATUS
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	<ul style="list-style-type: none"> Children who do not have the chance to live with their own families or relatives should benefit from professional foster care or adoption services rather than placement in traditional institutions. 	2012–2013	Within the scope of supporting the professional foster care system, training programmes for foster families were created and new training modules developed to support foster families and to encourage families to be foster families. All of these training modules have been developed in collaboration with UNICEF. As of 2012, 613 children were adopted.
	<ul style="list-style-type: none"> Provide support to family within the family environment and establish a social services consultant system that can reach every family. 		N/A. (See above section on support within the family.)
Turkmenistan <i>Geldimamet Geldimamedov, Deputy Minister of Education</i>	VISION: Progressively decrease the number of children under three in institutions and introduce family-based care.		
	BASELINE: 163 children under three in baby homes (December 2012). Number of children in alternative care is unknown.		
	<ul style="list-style-type: none"> Implement the plan to expand health and social services to families that is contained within the National Programme on Early Childhood Development and School Readiness for 2011-2015, including: <ul style="list-style-type: none"> - <i>early intervention</i> - <i>paediatric development</i> - <i>increase patronage system.</i> 	2015	
	<ul style="list-style-type: none"> Provide social services and benefits to support a child to stay close to her/his mother, by implementing the Code On Social Protection of the Population, effective as of 1 January 2013. 	2013	<p>A number of instruments have been introduced since 2007 and strengthened through the new Code:</p> <ul style="list-style-type: none"> Universal child allowances for children under three. Amount increase 10% as of January 2013, to around 40 USD per child. Child birth grants (one-time, increases with the number of children) Income tax breaks for families with children Other subsidies that have an indirect effect on the social welfare of families, i.e., housing, utilities and some essential food items.

COUNTRY/ REPRESENTATIVE	COMMITMENTS MADE		MONITORING OF COMMITMENTS STATUS
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	<ul style="list-style-type: none"> • Reintegrate into families the children currently in institutions. 	2015	Under discussion. Currently, almost 50% of the children under three in institutions are adopted in-country. No mechanism for outside adoption has been introduced as yet. The Hague Convention is not ratified but is under consideration by the Government of Turkmenistan.
Ukraine <i>Lidia Drozdova,</i> <i>Deputy Minister of</i> <i>Social Policy</i>	VISION: Reduce by 25% the number of children in institutions by 2016 , via social service reforms that prevent family separation and enable children under state care to reintegrate into communities and, if possible, reunite with their own families or join new families.		
	BASELINE: 3,507 children under three in institutional care (2011). Number of children in alternative care is unknown.		
	<ul style="list-style-type: none"> • Develop an institution of specialized social workers and integrate 12,000 new social workers. These new social workers will be located at the community level to reach families with children who need support at earlier stages and to enhance service access for those in remote and rural areas. 		<ul style="list-style-type: none"> • Approximately 11,000 social workers were fully implemented in the regions by the first quarter of 2013. Central funding for 2013 has been provided. Need to build the capacity of these specialists to enable effective intervention. • In March 2013, the Action Plan for the Strategy to Prevent Social Orphanhood proposing steps to enhance social work responses was put forward for endorsement. • In December 2012, UNICEF in conjunction with the Ministry of Health and the Presidential Commissioner for Children's Rights held a video conference with regional administrations and baby home directors to discuss the Ministry's existing pilots on the transformation of baby homes (Order no. 70). The follow-up suggests that it will be possible to revise this order and allow for a dialogue around changing the baby homes' institutional care to day care service provision, including services such as early intervention. • Recent dialogue on early intervention services has evolved among government partners, enhancing support for this intervention.

COUNTRY/ REPRESENTATIVE	COMMITMENTS MADE		MONITORING OF COMMITMENTS STATUS
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	<ul style="list-style-type: none"> • Move from financing institutions to financing social services based on the needs of families and children and with standards in place for these services. This also includes modernization of the existing social services infrastructure and creation of a competitive social services market, where civil society organizations can become active partners in service delivery. 		<ul style="list-style-type: none"> • Draft law of social commissioning, enabling the budgeting of resources to support service delivery by NGOs and the private sector, has been created. It was included in the Cabinet of Ministers' Resolution No 324 of 29 April 2013 "On Approving the Procedure of Implementing Social Commissioning from Budget Funds". UNICEF has entered into partnership with the Ministry of Social Policy, the Ministry of Finance and the Academy of Financial Management to develop a financial model that will change the way social services are funded. This mechanism will be tested among specific child groups and then reviewed prior to implementation. Model to be developed, tested and assessed by the end of 2014. • Social services standards are in the process of being developed to better ensure service quality and monitoring. Content for two standards has been developed by UNICEF and is currently being piloted. Around four or five other social services standards have been initiated. This process will continue over the next three to four years. UNICEF will likely assist in the development of further standards that support civil society organizations' participation in service delivery.

COUNTRY/ REPRESENTATIVE	COMMITMENTS MADE		MONITORING OF COMMITMENTS STATUS
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Uzbekistan <i>Yunusova Aliya</i> <i>Tuygunovna,</i> <i>Member</i> <i>of Parliament</i>	VISION: Prevent the need for alternative care.		
	BASELINE: 727 children under three in baby-homes (Ministry of Health, January 2013). Number of children in alternative care is unknown.		
	<ul style="list-style-type: none"> • Continue implementing public policy for the protection of children's rights and the provision of support to families. 	Unspecified	<ul style="list-style-type: none"> • The Uzbek Parliament was debriefed on the Sofia conference in January 2013. It was a further step in a long awareness-raising 'campaign'. • The Government officially set up a working group to develop a national deinstitutionalization programme that would 'kick off' the child care reform planned for 2013 to 2015. The draft version of the programme is very general and does not focus on a particular group of children with which to begin the reform. UNICEF is constantly advocating for the reform to commence with a focus on children under three. • UNICEF conducted a series of advocacy/lobbying meetings with key stakeholders involving the international expert Peter Evans to gain extra support and share specialist know-how. • UNICEF, together with its partners, is launching within the rolling work plan 2012–2013 a study centred around a cost-benefit analysis of deinstitutionalization in regard to children under three. The aim is to demonstrate the economic benefits of keeping children in their families and to identify what services and alternatives are needed to prevent the placement of children under three in baby homes. The study will also provide a model pilot for the closure of baby homes in the country. This idea seemed to be well received by the partners who are now considering narrowing the focus of the state programme primarily to children under three.
<ul style="list-style-type: none"> • Improve the system of maternal and child health by combining the complementary capabilities of the state and civil society, including non-governmental and civil organizations and the media, to prevent the need for alternative care. 		No progress mentioned.	



Ending the placement of **children under three** in institutions: **Support nurturing families** for all young children

Спиране настаняването на **деца до три години** в институции: **подкрепа на семействата** в отглеждането на малки деца



Republic of Bulgaria



Ministerial Conference

Ending the placement of children under three in institutions:
Support nurturing families for all young children

Hilton Sofia Hotel, Sofia, Republic of Bulgaria
21-22 November, 2012

Agenda

Wednesday 21 November 2012

PURPOSE DAY 1 – SEEKING HIGH-LEVEL COMMITMENT FOR PREVENTING BABY ABANDONMENT, ENDING THE PLACEMENT OF CHILDREN UNDER THREE IN INSTITUTIONS AND NURTURING FAMILIES WITH YOUNG CHILDREN	
08.00 – 09.00	Registration of participants
09.00 – 11.10	Session 1 - OFFICIAL OPENING OF THE CONFERENCE
Chair:	Ms. Tanja Radocaj, UNICEF Representative to the Republic of Bulgaria
09.00 – 10.00	OFFICIAL OPENING OF THE CONFERENCE Mr. Rosen Plevneliev, President of the Republic of Bulgaria Ms. Marie-Pierre Poirier, UNICEF Regional Director, Central and Eastern Europe and the Commonwealth of Independent States Mr. Jan Jarab, OHCHR Regional Representative for Europe Ms. Janina Arsenjeva, Policy Director, Eurochild: Statement from October Conference on 'Promoting the rights of children in alternative care in Europe'
10.00 – 10.30	The Call for Action – Vision for the reform in Central and Eastern Europe and the Commonwealth of Independent States Mr. Jean-Claude Legrand, UNICEF Senior Regional Advisor on Child Protection, Central and Eastern Europe and the Commonwealth of Independent States
10.30 – 11.10	Coffee break (and press opportunity for journalists)
11.10 – 13.00	Session 2 - CHILD CARE IN EUROPE: PROGRESS IN TRANSFORMING CHILDREN'S SERVICES IN THE REGION

Chair:	Ms. Maria Herczog, Member of the UN Committee on the Rights of the Child and President of Eurochild
11.10 – 11.40	Statements from the Republic of Bulgaria (Ms. Desislva Atanassova – Minister of Health), Ukraine (Mr. Serhii Tihpko, Vice Prime Minister and Minister of Social Policy), and the Kyrgyz Republic (Ms. Kamila Talieva, Vice Prime-Minister)
11.40 – 12.00	International Guidelines for the Alternative Care of Children Mr. Nigel Cantwell, Independent Expert to the drafting committee of the International Guidelines for the Alternative Care of Children
12.00 – 12.20	The Daphne study in ten European countries Mr. Kevin Browne, Professor of Forensic Psychology and Child Health, Head of Institute of Work, Health and Organisations, University of Nottingham, UK
12.20– 12.50	Plenary discussion
12.50 – 13.00	Expert commentary and Conclusions Ms. Maria Herczog, Member of the UN Committee on the Rights of the Child and President of Eurochild
13.00 – 14.30	Lunch
14.30 - 16.20	Session 3 - CHANGING MINDS: FIGHTING THE DISCRIMINATION AGAINST THE MOST VULNERABLE CHILDREN
Chair:	Mr. Dainius Puras, Professor and Head of the Centre of Child Psychiatry and Social Paediatrics at Vilnius University, Republic of Lithuania. Former member of the UN Committee on the Rights of the Child
14.30 – 14.50	Statements from the Republic of Tajikistan (Ms. Rukiya Kurbanova, Deputy Prime Minister and Chairperson of the Commission on Child Rights), the Republic of Turkey (Ms. Askin Asan, Deputy Minister of Family and Social Affairs) and the Republic of Moldova (Ms. Valentina Buliga, Minister of Labour, Family and Social Protection)
14.50 – 15.10	Republic of Serbia: From de-institutionalization towards an inclusive society for all: outcomes achieved and challenges remaining regarding the rights of children with intellectual disabilities Ms. Brankica Jankovic, State Secretary, Ministry of Labour, Employment and Social Policy, Republic of Serbia
15.10– 15.30	Film: “It’s about Ability” – Campaign to fight discrimination against children with disabilities in Croatia Ms. Danica Kramaric, Head of the Sector for Health Promotion and Protection in the Department for Health Protection, Ministry of Health, Republic of Croatia
15.30 – 15.50	Plenary Discussion
15.50 – 16.00	Expert Commentary and Conclusions Mr. Dainius Puras, Professor and Head of the Centre of Child Psychiatry and Social Paediatrics at Vilnius University, Republic of Lithuania. Former member of the UN Committee on the Rights of the Child
16.00 – 16.20	Coffee Break
16.20 – 18.00	Session 4 - ROAD MAP FOR FUTURE REFORM – COMMITMENTS AND NEXT STEPS
Chair:	Mr. Thomas Hammarberg, Former Commissioner for Human Rights of Council of Europe
16.20 – 16.35	Presentation of commitments and next steps identified by the governments in the region for preventing baby abandonment, ending the placement of children under three in institutions and nurturing families with young children Mr. Jean-Claude Legrand, UNICEF Senior Regional Advisor on Child Protection,

	Central and Eastern Europe and the Commonwealth of Independent States
16.35 – 17.00	Expert commentary and Conclusions: Reforms of child care in Europe and Central Asia, A human rights perspective Mr. Thomas Hammarberg, Former Commissioner for Human Rights of Council of Europe
17.00 – 17.30	Plenary discussion
17.30 – 18.00	Closing Statements Ms. Susan Bissell, Chief Child Protection, Associate Director, Program Division, UNICEF Head Quarters Mr. Kalin Kamenov, Chairperson of the State Agency for Child Protection
19:00 - 21:00	RECEPTION Hosted by the Government of Bulgaria Welcoming speech – Mr. Nickolay Mladenov, Minister of Foreign Affairs of the Republic of Bulgaria

Thursday 22 November 2012

PURPOSE DAY 2 – EXCHANGING INTERESTING EMERGING GOOD PRACTICES TO PREVENT BABY ABANDONMENT AND THE PLACEMENT OF CHILDREN BELOW THE AGE OF THREE IN INSTITUTIONS

09.00 – 11.15	Session 5—PREVENTING FAMILY SEPARATION
Chair :	Ms.Gordana Matkovic, Director of Social Policy Studies at the Centre for Liberal Democratic Studies, Belgrade, Republic of Serbia, former Minister of Social Welfare in the Republic of Serbia 2000-2004
09.00 – 09.30	Statements from Georgia (Mr. Irakli Nadareishvili, Deputy Minister of Labour, Health and Social Affairs), the Republic of Serbia (Ms. Brankica Jankovic, State Secretary, Ministry of Labour, Employment and Social Policy, the Republic of Croatia (Ms. Danica Kramaric, Head of the Sector for Health Promotion and Protection in the Department for Health Protection, Ministry of Health)
09.30 – 09.50	Republic of Turkey: Impact of socio-economic support to families for preventing placement of children in institutions and support to parents with children in institutions to reintegrate them. Mr. Abdulkadir Kaya, Child Services Director General, Ministry of Family and Social Affairs
09.50 – 10.10	United Kingdom of Great Britain and Northern Ireland: Early Intervention: From Theory to Practice, a Social Care Perspective. Mr. Paul Martin, former Chief Social Services Adviser to the North Ireland Government - EU Twinning Adviser to the State Agency for Child Protection in Bulgaria
10.10 – 10.40	Plenary Discussion
10.40 – 10.55	Expert Commentary and Conclusions Ms. Gordana Matkovic, Director of Social Policy Studies at the Centre for Liberal Democratic Studies, Belgrade, Republic of Serbia, former Minister of Social Welfare in the Republic of Serbia 2000-2004

10.55–11.15	Coffee break
11.15 – 13.10	Session 6 – PROGRESS AND LESSONS LEARNED FROM CHILD PROTECTION SYSTEM
Chair :	Ms. Georgette Mulheir, Chief Executive, Lumos
11.15 – 11.45	Statements from the Republic of Kazakhstan (Ms. Svetlana Dzhalmagambetova, Senator, Social and Cultural Development Committee, Senate of the Parliament), Republic of Belarus (Mr. Viktor Yakzhik, Deputy Minister of Education), Bosnia and Herzegovina (Mr. Damir Dizdarevic, Assistant Minister for Labour, Employment and Social Protection, Ministry of Civil Affairs) and the Republic of Uzbekistan
11.45 – 12.05	Republic of Moldova: Cooperation between health and social protection ministries in preventing child mortality and preventing institutionalization of children Ms. Valentina Buliga, Minister of Labour, Family and Social Protection of the Republic of Moldova
12.05 – 12.25	Republic of Bulgaria: Planning and developing of a regional network of child and family to support multi-agency services in communities with high rate of institutionalization of children below three years. Ms. Darinka Yankova, Deputy Chairperson of the State Agency for Child Protection, Republic of Bulgaria
12.25 – 12.45	Georgia: Progress of de-institutionalization and lessons learned for wider social policies Mr. Irakli Nadareishvili, Deputy Minister of Labour, Health and Social Affairs of Georgia
12.45 – 13.00	Plenary discussion
13.00 – 13.10	Expert commentary and Conclusions Ms. Georgette Mulheir, Chief Executive, Lumos
13.10– 14.10	Lunch
14.10 – 16.00	Session 7 - PROGRESS AND LESSONS LEARNED FROM CHANGES OF PRACTICE WITHIN THE HEALTH AND EARLY EDUCATION SECTORS
Chair :	Ms. Ilgi Ertem, Professor of Paediatrics, Ankara University, Republic of Turkey
14.10 – 14.30	Statements from the Republic of Armenia (Mr. Artem Asatryan, Minister of Labour and Social Issues), The former Yugoslav Republic of Macedonia (Mr. Spiro Ristovski, Minister of Labour and Social Policy), and Montenegro (Ms. Remzija Ademovic, Deputy Minister of Labour and Social Welfare)
14.30 – 14.50	Republic of Kazakhstan: «Kuan Sabi» Programme - Reinforcing the role of PHC workers and parents in care for young children Ms. Azhar Tulegalieva, Head of Medical Assistance Department, Ministry of Health of the Republic of Kazakhstan
14.50– 15.10	Republic of Belarus: Belarus system of detection, intervention, care and rehabilitation of children under three with special needs to prevent their abandonment and institutionalization Ms. Elena Bogdan, Chief of the Department of Rendering Medical Care to Mothers and Children, Ministry of Health of the Republic of Belarus
15.10– 15.35	United Kingdom: Lessons learned from health visiting services in the United Kingdom Ms. Pauline Watts, Professional officer for health visiting of the UK Department of Health

15.35 – 15.45	Expert Commentary and Conclusions Ms. Ilgi Ertem, Professor of Paediatrics, Ankara University, Republic of Turkey
15.45 – 16.00	Coffee break
16.00 – 17.30	Session 8 - DIVERSIFYING SERVICES AT LOCAL LEVEL
Chair :	Ms. Vesna Bosnjak, Senior Expert on Child Care System Reform for UNICEF in Central and Eastern Europe and the Commonwealth of Independent States
16.00 – 16.30	Statements from Romania (Ms. Denisa Oana Patrascu, Secretary of State, Ministry of Labour, Family and Social Protection), the Republic of Azerbaijan (Ms. Sadagat Gakhramanova, Deputy Chairperson of the State Committee on Family, Women and Children's Affairs), the Republic of Albania (Mr. Kastriot Sulka, Deputy Minister of Labour, Social Affairs and Equal Opportunities) and Turkmenistan (Mr. Geldimamet Geldimamedov, Deputy Minister of Education)
16.30 – 16.50	Romania: Roles and accountabilities at local level: Planning services for prevention of separation of children from families Ms. Denisa Oana Patrascu, Secretary of State, Ministry of Labour, Family and Social Protection, Romania
16.50 – 17.10	Ukraine: Preventing Baby Abandonment: Establishment of Social Mother and Child Centres Mr. Ruslan Kolbasa, Director of the Department of Children and Families, Ministry of Social Policy, Ukraine
17.10 – 17.20	Plenary Discussion
17.20 – 17.30	Expert Commentary and Conclusions Ms. Vesna Bosnjak, Senior Expert on Child Care System Reform for UNICEF in Central and Eastern Europe and the Commonwealth of Independent States
17.30–18.00	Session 9 - CONCLUDING REMARKS
17.30-18.00	Mr. Totyu Mladenov, Minister of Labour and Social Policy of the Republic of Bulgaria Ms. Marie-Pierre Poirier, UNICEF Regional Director, Central and Eastern Europe and the Commonwealth of Independent States



Ending the placement of children under three in institutions: Support nurturing families for all young children

Спиране настаняването на деца до три години в институции: подкрепа на семействата в отглеждането на малки деца



Republic of Bulgaria



Ministerial Conference

Ending the placement of children under three in institutions: Support nurturing families for all young children

Sofia, Republic of Bulgaria, 21-22 November, 2012

FINAL LIST OF PARTICIPANTS

CEECIS GOVERNMENT AND PARLIAMENTARY DELEGATIONS

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President of the Republic of Bulgaria

Ms Desislava ATANASSOVA
Mr. Nickolay MLADENOV
Mr. Totyu MLADENOV

Minister of Health
Minister of Foreign Affairs
Minister of Labour and Social Policy

Ministry of Health
Ministry of Foreign Affairs
Ministry of Labour and Social Policy

Ms Desislava DIMITROVA
Mr Ivan NAYDENOV
Ms Valentina SIMEONOVA

Deputy Minister
Deputy Minister
Deputy Minister

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