States Parties shall ensure that the institutions, services and facilities responsible for the care or protection of children shall conform with the standards established by competent authorities, particularly in the areas of safety, health, in the number and suitability of their staff, as well as competent supervision.’

[UN Convention on the Rights of the Child (paragraph 3.3)]
INTRODUCTION

The United Nations Convention on the Rights of the Child (UN CRC) acknowledges that the family is the natural environment for the development and well-being of children; that parents have the primary responsibility for the upbringing of their children; and that children have, as far as possible, the right to know and to be cared for by their parents.

However, the Convention foresees the appropriate use of substitute care for cases where children are deprived of their family environment, or for some children who in their best interests, cannot be allowed to remain in their natural family environment. In such situations, the CRC anticipates recourse to foster care and adoption, within a structured and well regulated framework, whether run by state or private entities and, as a measure of last resort, institutional placement.

The Convention also requires States to ensure that the rights of children are effectively safeguarded in cases of alternative care. This is a particularly important factor for us to note in our sub-region whether we are speaking of children in adoption, foster care or those in institutions.

Cognizant of these and other principles enshrined in the UN CRC, as well as other regional and international commitments, made by governments of the Eastern Caribbean Area, UNICEF facilitated the Legal Aid and Counselling Clinic, Grenada in collaboration with the Organisation of Eastern Caribbean States, and to bring together key stakeholders, including CARICOM, to dialogue and agreed on minimum guidelines and standards that services for children in alternative care in the region should meet.

SITUATIONAL ANALYSIS

The vexing problem of children in need of alternative care in the Eastern Caribbean Area has challenged governments, policy makers, social work agencies, practitioners and the international community at large, for decades.

Historically, children throughout the region have suffered homelessness, neglect and deprivation through a variety of causes. Common among these are broken homes; lack of financial and other resources on the part of their families; physical and sexual abuse, and the age-old tradition of migrating parents in search of a better life, leaving them in the care of grandparents, siblings, friends or others, who often eventually find themselves unable, or unwilling, to provide the long term care and attention required.

Despite considerable efforts on the part of governments and civil society actors, the challenge of child abuse, neglect and other forms of maltreatment is a very present Caribbean reality and, unfortunately, many children who cannot be left in their home environment are placed in alternative care settings, including institutional care.

However, many countries need to reflect on how many children are in residential care and foster care respectively, and assess the shift, if any, from residential to foster care provision. or even return to families who have been helped to improve their situation. Countries also need to examine disaggregated data according to gender and disability status, in order to assess whether boys and girls, and children with disabilities (boys and girls) are more likely to be in which form of care.
Preliminary results gleaned from questionnaires submitted from participating countries in the UNICEF Global Count of Children in Alternative Care, 2012 and 2013 indicate that at present there are some twelve hundred and sixty eight (1268) children in residential care facilities, six hundred and forty nine of them boys and six hundred and nineteen girls in the Eastern Caribbean. Three hundred and sixty six (366) of these children have a disability. In comparison, some two hundred and sixty (260) children are in formal foster care. So far, boys outnumber girls in residential care. This picture is largely skewed by the figures out of Barbados and Trinidad where the number of children in residential care facilities significantly outstrip numbers of children in formal foster care arrangements. For all the OECS countries that responded, the situation was reversed. While many countries are tardy in sharing their information, it is clear that residential institutions play a large role in the care of Caribbean children who cannot enjoy the safety and comfort of their biological families, or who are deemed in need of care and protection.

Given this reality, it is increasingly important that states put in place proper mechanisms to monitor the operations of such institutions, in order to safeguard residents from abuse and violations of their rights.

This is already a growing problem, as noted by the United Nations Committee for the Rights of the Child, after examining the initial and periodic reports of several Eastern Caribbean countries. In fact, the Committee, in its concluding observations, points to several examples where children’s rights are not respected in alternative care settings.

For example, the Concluding Observations of this international Committee in relation to alternative care for children noted that Code of Standards was required for the operation of childcare homes and that training programmes should be made available for social and welfare workers. The Committee also noted that foster care and adoption programmes are not being prioritized and that there were no independent complaint mechanisms for children in alternative care. In the case of detention centres in the Caribbean, which for some smaller islands also double as residential facilities for children who have been abused or abandoned, they note the very outdated physical conditions in which children are often kept.

This over-reliance on institutional care placement, as opposed to foster care and adoption programmes, is worrisome. Not only does institutional care tend to isolate children from biological family members, institutions can create the conditions for neglect, abuse and other violations. The risks are especially high when children are very young, and/ or are disabled.
The situation of children in alternative care is often exacerbated by a number of challenges and deficiencies, among them:

- Over reliance on institutional care, as opposed to family care
- Antiquated and weak legislative frameworks to support alternative care
- The absence of proper regulations
- Under-developed policies
- Lack of clear guidance to direct practice
- Inadequate financial resources, on the part of governments, civil society actors and private enterprise, to provide adequate facilities and services
- An un-coordinated approach to service provision
- Inadequate or inconsistent monitoring of child care facilities, to ensure adherence to minimum standards
- Lack of quality assurance, caused by the absence of a mechanism for the external oversight of care and protection homes
- Lack of enhanced data collection systems
- Compromised human resource capacity
- The noticeable absence of Operational Manuals and the development of other procedural systems
- Lack of, or inadequate, training to support capacity building for all key stakeholders, including Child Protection Officers, Home Managers of the Homes and general workers
- Lack of written Plans of Care for every child deemed in need of care and protection
- Protracted placements in institutional care without sufficient ongoing review
- Inadequate access to biological parents and families
- The infrequent use of adoptions as an alternative care option
- The absence of formal complaint mechanisms
- Inconsistent inspections of the facilities for licence renewal purposes.
Children and other respondents, have themselves spoken of the difficulties that they experience once children are removed from their community settings and placed in alternative care environments that separate them from family. In a study conducted in St. Kitts on foster care, as well as a case study on alternative care in Grenada, the voices of the children and other key stakeholders resonated loud and clear on this issue.

These challenges and deficiencies point to a pressing need for new and corrective measures to be put in place to ensure that children who are placed in residential care, and protective care, are in fact provided with adequate care and protection measures that are consistent with their needs, age and stage of development and challenges.

**THE WAY FORWARD**

As a first step in addressing some of the identified challenges, in 2012 UNICEF contracted a regional expert to develop Draft Minimum Standards to guide the operation of alternative care services for children, whether in residential setting, adoption or foster care. The consultant developed the Standards, which were reviewed by regional professionals, technical experts, and social work practitioners from across the region. Over forty-five (45) persons from ten countries, as well as representatives from UNICEF, PAHO, OECS and CARICOM, CROSQO provided valuable feedback on the document, which has been adopted as the OECS Sub-regional Minimum Guidelines and Standards for Children in Alternative Care for the Eastern Caribbean Area.

Beyond the adoption of these sub-regional standards, governments, civil society organisations and private investors have to undertake a series of deliberate actions to ensure not only that the standards are implemented and adhered to, but that all other necessary changes are made in order to create the enabling environment critical for success.

With a view to exploring recommendations that addressed the Caribbean context, a case study of children in institutional care was conducted in Grenada in 2012-2013. This study assessed the degree to which current legislation, governance, policy, programmes and practices are in compliance with international human rights law and guidelines. The resulting report presented an analysis of the situation of boys, girls, and adolescents in institutions, noting good practices as well as shortcomings and providing recommendations for closing the gaps.
The following recommendations, extracted from this report, though drawn from the Grenada situation, are surely representative of the realities of most countries in the OECS, and are offered as a first step to addressing some of the identified issues:

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<th>Recommendation</th>
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<td>A centralized data collection system ought to be developed which ensures that the legally mandated child protection agency, namely, the Child Protection Authority (CPA) serves as the focal point for all reports of child abuse. The entry points such as law enforcement and the medical sector must report all cases of abuse to the CPA so as to facilitate this objective.</td>
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<td>The staff of the CPA cannot adequately meet its full mandate and will need to be increased accordingly. This speaks to the broader need for ensuring the human resource capacity to generally meet the national child protection mandate, and specifically to meet the requirements of ensuring the safety of children in alternative care.</td>
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<td>There is currently no procedural manual in place that can guide the placement and supervision of children in residential care. This should be developed on an urgent basis. The Manual should address the initial placement of children, including admission procedures at the Home, ongoing procedures and discharge procedures.</td>
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<td>Training at all levels of service provision is sadly lacking and a concerted effort should be made to create and deliver appropriate training programs. Training manuals and other resource material should be produced to support all training initiatives.</td>
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<td>Placement of children in institutional care should be an option of last resort and yet it appears to be the most utilized of alternative care arrangements. Other options like community based care, kinship care or foster care must be more vigorously pursued as the preferred placement opportunity for children in need of care and protection.</td>
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<td>Written plans of care are sadly lacking for most of the children in residential homes. Children enter facilities or other alternative care environments with no guidance offered to the Staff on the short, medium or long term plans for the child's care, including family contact and therapeutic needs. Written Plans of Care should be routinely developed and provided upon entry to all care environments.</td>
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<td>Institutional support, by its very nature, is designed to be a temporary placement for children and yet most of the placements in Grenada have been for lengthy timeframes. This ought to be reviewed with the objective of ensuring that family reunification is preserved as the ultimate objective of child protection interventions.</td>
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<td>The research revealed a system that does not sufficiently promote ongoing access between foster children and their biological families. A policy shift needs to be made to facilitate more access to the natural families of children brought into the care of the State.</td>
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<td>Adoption of children who have been placed in institutional care is important. Concerted systemic efforts must be made and incentives perhaps given, to encourage the adoption of children where this is in the child's best interest.</td>
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<td>Children residing in residential care settings have no formal channels for making complaints about mistreatment in the Home. It is currently expected that they will report these managers to the House Manager. The creation of a complaints mechanism is critical to the safety of children and to the preservation of their rights. Such a system should be carefully developed and implemented.</td>
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<td>Despite the 3 year requirement for inspection purposes in order for licence renewal purposes, Homes have gone without inspection for longer periods of time. Extensions on licences have been granted in the absence of follow up inspections. Licensing inspections ought to be routinely and systemically executed in compliance with any legal or policy directives.</td>
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<td>The model Subregional Guidelines and Standards are far more comprehensive than the current local standards in many countries, where they exist, and urgent policy and administrative steps should be taken to adopt them at national level.</td>
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To the extent that dependent children are seen as essentially normal children who require surrogate parents, and not patients or delinquents who require treatment, data strongly suggest that institutions are the least adequate form of substitute care.”
Bush, M – American Journal of Orthopsychiatry.

“Group care is expensive and restrictive and should be used only when there is clear and convincing evidence that the outcomes will be superior to those of foster care and other community-based services.”
Barth, R – Institutions versus Foster Homes (2002).

“In the long term, institutionalization in early childhood increases the likelihood that impoverished children will grow into psychiatrically impaired and economically unproductive adults.”
Frank, D et al – Infants and Young Children in Orphanages.

“Recourse to alternative care should only be made when necessary, and in the forms appropriate to promote the child’s well-being, aiming to find a stable and safe long term response, including, where possible, reuniting the child with their family. Evidence shows that the quality of alternative care is critical to child well-being. Children in long term residential care are at risk of impaired cognitive, social and emotional development (particularly for those below the age of three).”
Guidelines for the Alternative Care of Children, adopted by the UN General Assembly in 2009.

Finally, the Caribbean is urged to join the regional goal adopted by CARICOM Governments in July 2014 and end the institutional care of children under three years.

Let’s achieve this together.