White Paper

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The role of boarding schools for vulnerable children in the Europe and Central Asia region
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Executive summary

The first waves of child care reforms in the Europe and Central Asia (ECA) region were based on one simple, clear, and evidence-based argument: children should never be ‘warehoused’ in large institutions and are best raised in families and within communities. Institutional care is now widely understood by governments and civil society to be harmful for children.

After three decades of evidence-based advocacy and policy discussions, many governments have led reforms to close or transform large-scale residential institutions and replace them with family- and community-based alternative care services. These include family support services to prevent the unnecessary separation of children from their families and gate-keeping systems to prevent their placement in residential care institutions.

The closure of large residential institutions for children without parental care and children with disabilities, including baby homes, has led to a broader focus on the experiences of other children who do not live with their parents and who are therefore developmentally at risk. These include children who attend boarding schools or residential special schools for children with disabilities.

The UNICEF ECA Regional Office (ECARO) has commissioned this paper as a result of concerns that many vulnerable children are being left behind in large boarding schools and about the quality and appropriateness of the care and education provided by many boarding schools. The lines between the role of boarding schools as providers of education and as providers of alternative care are already blurred. They may become more so as governments look to transition from child protection systems that have depended primarily on institutional care, to child protection systems that are more supportive of families and that provide more family-based alternative care. A new and important discussion has emerged that focuses on a number of core questions, addressed in this paper:

1. Should boarding schools be classified as ‘alternative care’?
2. Are boarding schools an appropriate form of education and alternative care provision for vulnerable children?
3. If so, how should the concerns and challenges around their use be addressed?
4. If not, how is demand for such provision best reduced, and what is the best form of education and alternative care for the vulnerable children who are affected?

The paper summarises evidence on the current use and impact of boarding schools in the ECA region and draws on wider international evidence. It proposes a typology of boarding schools and considers the drivers for their use, as well as the concerns and challenges related to that use for vulnerable children, particularly children who are in vulnerable situations such as those affected by poverty, who have no parental or
family care, who are socially excluded, and those at risk of violence or abuse. While its conclusions and recommendations focus on the boarding schools of the ECA region, they may also apply to other types of boarding schools, including elite boarding schools in other parts of Europe and internationally. The evidence on the risks of violence and abuse in residential settings indicates that all children in boarding schools may be classified as ‘vulnerable’.

The paper aims to promote better decision-making among policymakers, local governments and service providers, including non-governmental organisations (NGOs), as well as child welfare and other allied practitioners.

The paper supports education as a fundamental and critical right for every child, but emphasises that this right must not be realised at the expense of a child’s right to grow up in a safe and loving family environment. State parties to the Convention on the Rights of Persons with Disabilities (CRPD) must uphold articles 19 and 23 (right to life in the family and in the community for children with disabilities) and article 24 (right to a quality inclusive education in mainstream schools alongside children without disabilities). The paper is also based on the assumption that a comprehensive childcare system should aim to provide family care to all children.
Key findings

Vulnerable children are living in a significant proportion of boarding schools in the ECA region. They include children who are temporarily or permanently deprived of parental care; children from vulnerable households at risk of poverty, social exclusion and loss of parental care; children with developmental delays, disabilities and with complex needs, including health and emotional needs (challenging behaviour); children in contact with the law, and children from rural areas with no local school. Boarding schools often exercise total parental responsibilities (guardianship) over the children ‘in their care’ or share these responsibilities with parents or guardians.

Boarding schools are perceived by some as having advantages in terms of specialist facilities, but evidence suggests that this is not always the case and their education standards can be low and of poor quality. In addition, poor care standards can lead to loss of relationships and community, the risk of exposure to violence and abuse, compromised child well-being, and longer-term negative impact on children’s development. For children with disabilities, in particular, for whom boarding schools may the only education service available, this represents a form of structural violence.

Children are often placed in boarding schools far away from their families and communities of origin and usually for long periods of time. In some countries children of pre-school age continue to be placed in boarding schools. Some children placed in boarding schools lose contact with their parents, siblings and wider family members, leaving them more vulnerable to abuse and to the problems associated with a loss of attachments, including the lack of relationship-based care and wider family relationships. The impact of the lack of these close relationships is often exacerbated by the absence of personal relationships within the boarding school and the fact that some children in these schools may not return to their communities and families on a regular basis. Such institutional care exposes children to abuse and violence and does not comply with children’s rights under the United Nations Convention on the Rights of the Child (CRC) or the United Nations Convention on the Rights of Persons with Disabilities (CRPD).

Many of these children are reunited with their families and communities only upon graduating from their boarding school, with little support for the family or for the individual young adult. They often leave these schools with only limited educational achievements, which hampers their prospects for continued education or integration into the labour market. Others are transferred to social care homes for adults with disabilities, which perpetuates congregate care models and impedes their transitions to models of adult independent living.

Stigma and discrimination against children with disabilities and children from marginalised communities contribute to the continued use of boarding schools, together with social factors, rural depopulation, poverty and prevailing forms of service organisation, as well as a lack of coordination among stakeholders and services. Residential special schools for children with disabilities in the ECA region share many of
the characteristics of children’s homes, where children may be extremely vulnerable to violence and abuse and this represents a form of structural violence.

A lack of data on children in boarding schools in some countries around the world hinders definitive conclusions on their benefits, their outcomes, their effectiveness in providing care and education, or on the way they are defined, organised and used.

The evidence in the ECA region suggests, however, that the characteristics of boarding schools and segregated, specialised residential education for children with disabilities do not meet children’s needs or fulfil their rights and may expose them to greater risks of violence and abuse, including sexual violence.

A lack of collaborative partnerships hinders effective implementation. A joint approach between child protection, social care, education, health and other sectors at all levels of government is needed to plan wider system reform processes to ensure that all children live in families and communities and access quality, inclusive, mainstream education, health care, and inclusive social protection. Collaborative partnerships are also crucial to ensure that safeguarding becomes everyone’s responsibility.

Specialised boarding schools for children with disabilities or for children from minority communities or linguistic minorities represent a form of segregated education that compounds segregation, with the potentially harmful separation of children from their families. Their use exposes children to the dangers of institutionalisation, and ‘boarding-school syndrome’. So-called general boarding schools are not included in programmes to promote inclusive education.

In some circumstances, boarding schools can be used to meet the education needs of some older children, while family and community support and inclusive education are still being developed. The quality of children’s experiences in the absence of alternatives to boarding schools can be improved by better gatekeeping; by tracking and increasing the visibility of individual children; the development of quality standards for the care element of boarding; and increased accountability for, and inspection of, the provision and admissions process. It is crucial that family relationships are maintained, and that the placement is time limited, with a clear plan for family reintegration or placement in family-based care, as well as the inclusion of children into mainstream, community-based education.

It is crucial to have a clear framework of standards and governance that is rigorously enforced by legislation and inspection. Without such frameworks and standards, placement in any institution puts all children at a high risk of human rights abuses. In particular, it denies children with disabilities their inherent right to life in a family and community, and their right to quality inclusive education in mainstream schools alongside children without disabilities.

Experience in the region indicates that boarding schools can be closed and replaced with inclusive education, family support services and family-based alternative care when these are included in strategies for the deinstitutionalization of alternative
care and are equipped to prevent admissions as part of inclusive education policies and strategies.

Recommendations for governments in the Europe and Central Asia region

Boarding schools should be regulated as providers of both care and education. The provision of care in boarding schools is a major part of their mandate, and their classification and regulation as providers of care and education would help to ensure the quality of their services in both areas. At the national level this means that boarding schools must be part of the continuum of child care services alongside other forms of residential care and, as such, be included in national deinstitutionalisation strategies and plans. Broadening the deinstitutionalisation agenda would release much-needed resources (financial and human) that could be invested in the strengthening of family and community support and inclusive education for all children. A coordinated, cross-government approach is required to ensure that reforms, budget allocations and attitude change span all levels and sectors of government.

Boarding schools should be recognised as a form of alternative care and, therefore, as being subject to the UN Guidelines on Alternative Care for Children in relation to the necessity and suitability principles and the imperative for the inclusion of boarding schools in deinstitutionalisation policies, strategies and programmes.

The inclusive education programmes and policies of UNICEF and governments should aim, explicitly, to prevent the entry of children with disabilities into residential special schools. They should also support children's reintegration from such schools, to ensure that they return to their families and receive a community-based education. Inclusive education reforms and efforts should be closely tied to boarding school outcomes and children's transitions to vocational training or further education. Deliberate linkages must be made to ensure that education reforms target boarding schools, including residential special schools. A strong multidisciplinary approach to systemic reform is needed to promote inclusive education, with the allocation of funding and other resources playing a critical role in future progress on reforms.

Boarding schools for younger children under 14 years of age should not be permitted, given the wealth of scientific evidence confirming the damage caused by institutional care for children's development in early childhood, their personal development, and for their family relationships. Any placement into a boarding school should be determined by a multi-disciplinary gatekeeping panel as being the most appropriate option for each individual child in terms of both their education and care, considering every aspect of the child's individual development, best interests, and family circumstances. In all cases, other alternatives should be considered first, including family-based alternative care, community-based inclusive education and family support services. The grounds for placement should never be family dysfunction or poverty.

Boarding schools should only ever be chosen to meet the educational needs of vulnerable children as part of a plan to meet a child's wider developmental needs. This plan should demonstrate identified educational goals that will, in the short
to medium term, increase the capacity of families to care for their children in a home environment, supported by appropriate educational provision in the local community. All options should be considered to prevent the unnecessary placement of children into any form of residential care. These options include temporary family-based alternative care to ensure that a child’s needs for care and education can be met without their placement in a boarding facility.

**Discriminatory views and practices must be challenged, and parental involvement, child participation, and e-learning must be improved as they are crucial for the provision of cost-effective education and care alternatives for vulnerable groups of children.**

**Dependence on boarding schools should be reduced for children with disabilities, those in need of healthcare and rehabilitation, children with challenging behaviour, and those in correctional schools for children in conflict with the law.** This can be achieved by developing comprehensive family support and reintegration services that address social factors within the family, as well as family- and community-based alternative care for children without parental care, and by strengthening inclusive education and community support services that are underpinned by the need for safeguarding to become the responsibility of all agencies that touch the lives of children. In addition, rigorous assessment processes and effective gatekeeping measures should be in place to regularly monitor and review access to boarding schools, as well as opportunities for family reintegration and inclusion into community-based schools.

**Governments should assess the boarding school system** as part of their deinstitutionalisation and inclusive education programmes. They should prioritise the closure of all facilities that provide sub-minimum quality of care and education and invest resources in prevention, care and protection services at the community level, as well as in inclusive education. In doing so, governments should:

- Design and adopt a joint approach that spans care, education, health and other sectors to plan wider system reform processes that will ensure that all children live in families and communities and access mainstream education, health care and social protection.
- Establish task forces or inter-agency platforms for the strategic planning of the transformation of the boarding school system.
- Review and revise policies, and establish standards and inspection frameworks aligned with inclusive principles, family-based care and safeguarding.
- Allocate resources for family support, inclusive education and health care.
- Develop a well-trained workforce and fund research on inclusive education and care practices.
- Develop inter-agency gatekeeping mechanisms, common assessment frameworks and case management practices.
Stop placing young children in boarding schools, and consider community-based inclusive education and care alternatives before placing any children in boarding schools.

Conduct public awareness campaigns and continuously monitor and evaluate inclusive practices, conduct further research, and commission international research on children’s experiences.

Involve parents and children’s groups in decision-making processes and continue to develop family support and family-based care services, community support and inclusive education.

Each country in the ECA region is at a different stage of deinstitutionalisation and the development of inclusive education. While common themes emerge from this review that require a collaborative approach – such as agreeing on data usage, classifications, standards, and the establishment of safeguards for boarding schools – it is crucial to form country-specific strategic coordination platforms to advance the reform agenda.

Establishing an inter-country reference group would allow for economies of scale and provide valuable insights for the conduct of research and for lesson learning from both successful and unsuccessful practices. This would foster cooperation among multiple countries and enhance both an overall understanding of and progress in addressing the issues surrounding boarding schools for vulnerable children.
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This version was authored primarily by Helen Jones. The wider community of practitioners and researchers were deeply saddened by Helen’s passing. The paper was finalized by Fran Fonseca, Joanna Rogers and Stela Grigoras.

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1. Introduction and context

1.1 Background and rationale

Most governments of Europe and Central Asia (ECA) have come to recognise that institutional care is harmful to children and have put in place deinstitutionalisation strategies to replace large-scale residential care institutions with family and community-based care services. The main aim is to prevent unnecessary family separation and where this is not possible, to provide suitable family-based alternative care for children. Data from the TransMonEE initiative, which gathers child-related data on the ECA region, indicate that the number and rate of children in residential care fell considerably between 2010 and 2021 in many countries across the region, particularly those that have introduced deinstitutionalisation policies and programmes.1

The United Nations Guidelines for the Alternative Care of Children define children without parental care as those who are outside of the care of their parents for 24 hours ‘for whatever reason and under whatever circumstances’. All children in the care of boarding schools fit this definition. The Guidelines, in article 31, do not state whether boarding schools fall within their scope, even though they encourage competent authorities to ‘make use of the present Guidelines, as applicable’ in relation to boarding schools, centres for children with disabilities, hospitals and ‘other places which may be responsible for the care of children’.2 This creates, in effect, a grey area where boarding schools, which provide care to children who are not in the care of their parents, may be excluded from deinstitutionalisation strategies and other measures that governments should take to ensure the provision of suitable alternative care for such children.

This White Paper aims to examine this grey area and clarify whether and how boarding facilities might fit into the continuum of alternative residential care, particularly in relation to children with disabilities who may spend considerable amounts of time every year in the care of boarding schools for the purpose of accessing specialised, segregated education.

The fine line between a child in institutional care and a child in the care of a boarding school is illustrated by the Government of the United Kingdom (UK), which requires boarding schools or special residential schools that provide care for children for more than 295 days per year to register as ‘children’s homes’ which are providers of formal alternative care for children without parental care.3

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Furthermore, an independent, statutory inquiry into child sexual abuse in the UK found that features of the boarding school environment leave pupils more vulnerable to both sexual abuse by adults working at such schools and harmful sexual behaviour from other children.\(^4\) The same inquiry also found that pupils with disabilities in residential special schools are even more vulnerable because of their complex needs and their distance from home. The inquiry concluded that these children have more in common with children in the alternative care provided by children's homes than children in mainstream boarding schools.\(^5\) Another UK government inquiry into children with disabilities in special residential schools registered as children's homes identified egregious abuses and recommended immediate measures to protect children from harm.\(^6\)

This White Paper has been commissioned by the UNICEF ECA Regional Office (ECARO) as a result of the following concerns:

- that the lines between boarding schools as providers of education or providers of alternative care may be blurred and may be becoming more so as governments look to transition from child protection systems that depended primarily on institutional care to child protection systems rooted in family support and family-based alternative care in the community,
- about the lack of data on the numbers of vulnerable children in boarding schools in the ECA region, and about the possible lack of quality of and appropriateness of the care and education provided by many boarding schools.

The Paper draws on interviews with representatives from the 22 country offices in UNICEF’s ECA region, which covers countries primarily in Eastern Europe and Central Asia.\(^7\) The scope of this paper also extends to evidence from other countries in the wider geographical region including the UK and countries in the European Union (EU), and also references research on the use of boarding schools in Australia and North America. Boarding schools serve as a form of educational provision for children in many countries and there are widespread concerns about whether boarding schools are, in fact, providing alternative care and separating children from families and communities unnecessarily. In some countries, boarding schools are regulated both as education providers and social care or residential care providers.\(^8\)

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5 Ibid.


1.2 Methodology

This paper is based on data gathered through a desk review, key informant interviews and follow-up in-depth interviews.

1. The desk review, as a critical part of the data collection process, compiled existing secondary data (including data derived from research, evaluations, government regulations and care standards). Secondary sources of relevant data included data collected by governments, as well as by non-governmental organizations (NGOs), including a Europe-wide organization for people with disabilities (OPD), and private bodies that support the development of the child-care system and inclusive education.

2. Key informant interviews informed the data collection process. Follow-up in-depth interviews were held with other international and national stakeholders, as well as with a number of stakeholders and representatives of UNICEF country offices.

3. Nine countries were selected for deep dives – Albania, Belarus, Bulgaria, Georgia, Kazakhstan, Moldova, Turkey, Ukraine and Uzbekistan – selected using criteria related to their use of boarding schools (including having high or low numbers of children in such schools, those that continue to use boarding schools without reforms, and those that are reforming their boarding school systems.

4. An External Reference Group was established to review the methodological approach, findings and the content of this White Paper. Its members, including representatives of an OPD, participated in bi-lateral, semi-structured interviews as well as follow-up group consultations, and provided written comments regarding the different draft versions of the paper.

The main focus of this White Paper is on children who are in situations of vulnerability, such as poverty and social exclusion, without parental or family care, and at risk of violence or abuse. However, given the evident vulnerability of children in residential care to violence and abuse, all children who live in boarding schools can be considered ‘vulnerable’. The paper explores this issue while maintaining a primary focus on the children in boarding schools that can be found specifically in the ECA region. It acknowledges, however, that its conclusions and recommendations may also apply to other types of boarding schools, including elite boarding schools in other parts of Europe and internationally.
1.3 Data limitations - overview of available data on children in boarding schools

There is little explicit mention of boarding schools or residential special schools in the considerable body of literature on institutions and deinstitutionalisation in the ECA region, and even less discussion about their role, either actively or by default, in providing yet another form of institutional care for children without parental care or who are vulnerable because, for example, they have disabilities. Boarding schools attract less research and attention as a form of out-of-home care provision. As a result, too little is known in the ECA region about the children who are living in boarding schools and the reasons why, the range of boarding school provision and the child’s experience of daily life in such a school, particularly when they are not in the classroom.

Inclusive education is gaining momentum in the ECA region as a result of it recognised benefits for all children and for wider society, economic as well as social, and the adoption of the UN Convention on the Rights of Persons with Disabilities (CRPD) by all countries in the region. Some countries, including Moldova, have made huge strides towards the inclusion of children with disabilities in mainstream education. Armenia, for example, has committed to make all schools inclusive by 2025 and Montenegro is closing special schools or transforming them into resource centres to support teachers in mainstream settings.

On the whole, mention of residential special schools and boarding schools is notably absent from national government policies and strategies on inclusive education, as well as from UNICEF strategic documents and guidance. There is no consideration of inclusion of children with disabilities in general boarding schools, nor is the need to target residential special schools for closure made explicit in strategies to improve inclusion for children with disabilities in mainstream schools. This may be because of fragmented responsibilities between ministries and a focus on the role of boarding schools as educators rather than care providers.

Moldova is one exception. The closure of 60 boarding schools under the control of the Ministry of Education and 7 boarding schools under local public authorities was part of the country’s Deinstitutionalisation Strategy cycles in 2008-2012 and 2012-2015. During the implementation of these strategies, 50 boarding schools were closed and replaced by family support, foster care and inclusive education. At the time of writing, only 2 boarding schools remain in Moldova: one under the Ministry of Education with

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10 UNICEF Moldova, Situation Analysis of children and adolescents in Moldova, Chisinau, 2022.
13 Based on a rapid online review of UNICEF ECA inclusive education policies and programmes as well as a selection of draft or adopted national government documents on inclusive education for Montenegro, Moldova and Turkmenistan.
10 resident children and one under a local authority with 5 children. Both are in the process of being closed. Where appropriate, some residential buildings have been repurposed as mainstream schools or to provide other education or social services. 

Moldova is one of the only countries in the ECA region to have addressed the closure of an extensive network of boarding schools so comprehensively as part of its deinstitutionalisation strategies.

While a lack of statistical data has made it difficult to establish the exact nature of the boarding school sector, its size and use, the available data are presented here for consideration.

Data on children with disabilities in residential special schools

The European Agency for Special Needs and Inclusive Education (EASIE) established the Changing Role of Specialist Provision in Supporting Inclusive Education (CROSP) approach to help countries map specialised education provision across the region and support inclusive education for all learners. EASIE monitoring data indicate that gains in inclusive education in EU countries have been incremental and slow.

The percentage of children with an official decision of special education needs who are in fully separate special schools as a share of the overall number of learners enrolled in all formal education settings fell by 0.41 per cent from 1.82 per cent in 2012/2013 to 1.41 per cent in 2016/2017. These values are for primary and lower secondary education levels (ISCED 1 and 2) across 30 countries for which data are available. The way in which this indicator is measured changed for school years 2018/2019 and 2019/2020 but the disaggregation for boarding school or residential provision in ‘special schools’ across all years is not provided. The latest available data for 2019/2020 indicate that 26 per cent of primary school learners (in 20 countries) and 26 per cent of lower secondary school pupils (in 19 countries) with an official decision of special education needs are educated outside mainstream education in specialised education settings that include day schools and boarding schools. A mapping of specialist provision conducted across 26 countries does not specify whether specialist education provision is residential or not.

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14 Information provided by UNICEF Moldova.
15 European Agency for Special Needs and Inclusive Education, "Changing Role of Specialist Provision in Supporting Inclusive Education" (CROSP), web-page, Odense, Denmark, n.d.
17 The International Standard Classification of Education (ISCED) is a statistical framework for organizing information on education maintained by the United Nations Educational, Scientific and Cultural Organization (UNESCO).
TransMonEE\textsuperscript{20} data confirms that specialised, segregated boarding schools for children with disabilities continue to exist in three countries that are also included in EASIE monitoring data (Bulgaria, Latvia and Slovakia).\textsuperscript{21} Many other European countries do not monitor residential education provision for children with disabilities as part of the system of alternative care.\textsuperscript{22}

Overall, there are limited data across countries included in EASIE and TransMonEE databases on the number of children in residential special schools or their role in the provision of special education and alternative care for children with disabilities and other complex needs. UNICEF TransMonEE data are only available for five countries on children with disabilities in residential special schools – Azerbaijan, Bulgaria, Kazakhstan, Latvia and Slovakia. When examined as a percentage of all children with disabilities in all special schools the percentage in Bulgaria was low (5 per cent) in 2015 but had almost tripled to 14 per cent in 2021.

In Latvia, TransMonEE data indicate a four-fold increase in the percentage of children with disabilities in specialised boarding schools from 10 per cent in 2015 to 38 per cent in 2021. Over the same period, the implementation of a deinstitutionalisation reform of alternative care had more than halved the number of children in residential alternative care from 2,386 children at the end of 2015 to 1,101 children at the end of 2021.\textsuperscript{23} This raises questions about whether boarding schools are falling outside deinstitutionalisation policies and programmes.

Both Azerbaijan and Slovakia have high percentages of children with disabilities in special boarding schools (41 per cent and 30 per cent respectively in 2021). In Slovakia, deinstitutionalisation policies and programmes only target residential alternative care institutions and social services under the Ministry of Labour Social Affairs and Family, and not the boarding schools or residential special schools under the Ministry of Education.\textsuperscript{24}

Kazakhstan is the only country among the five countries with available TransMonEE data that has seen a large decrease in the percentage of children with disabilities in special boarding schools from 48 per cent in 2015 to 14 per cent in 2021. At the same time, the number of children in residential alternative care in Kazakhstan, including in boarding schools for children who have been placed there for reasons of poverty and

\textsuperscript{20} TransMonEE is a UNICEF initiative to support national statistics offices in the ECA region on the monitoring of CRC and SDG implementation. To learn more, visit www.transmonee.org.

\textsuperscript{21} TransMonEE sub-domain 4.3 \textit{Children with disabilities in education} and \textit{children with disabilities in special boarding schools}.


other social needs, has fallen from 25,235 children in 2016 to 14,752 children in 2021.\textsuperscript{26} A 2019 study found that many children with disabilities in Kazakhstan are receiving low quality home-based education. Further monitoring is required to determine the extent to which residential special education is being replaced by quality inclusive education and family-based care for children with disabilities.\textsuperscript{26} In Moldova, although very few children with disabilities remain in boarding school facilities, they continue to account for 21 per cent of children in residential alternative care.\textsuperscript{27}

**General boarding schools**

General boarding schools in many countries in Europe and the UK are privately run and managed, are fee-paying. They may be regulated by governments, but they are not part of state-provided ‘mainstream education’.

State-run general boarding schools in former communist and eastern European countries are the result of a government ideology that saw the state sharing the responsibility for child rearing with parents.\textsuperscript{28} TransMonEE data on children in general boarding schools in these countries should be included in data on residential alternative care, but are not disaggregated from children’s homes or other types of residential alternative care for children without parental care. Even though TransMonEE definitions of alternative care include children who are living in boarding schools (except elite boarding schools) for more than a few days at a time, not all countries include data on children in boarding schools in their alternative care data. This again illustrates the grey area in some countries around whether boarding schools are perceived as providers of education or social care, or a combination of both.

The Azerbaijan Statistical Yearbook reports data on boarding institutions for children which disaggregate facilities for children with disabilities and general boarding schools, including those for orphans and children deprived of parental care.\textsuperscript{29} While provision for children with disabilities has not changed notably in recent years, the number of children in general boarding schools has increased by almost 60 per cent from 6,395 children at the beginning of 2011 to 10,126 at the beginning of 2023. The data also show a very large increase in children without parental care in children’s homes, rising from 66 children in 2022 to 792 children in 2023. Further investigation is needed to understand the causes of this increase.

Data on general boarding schools are, however, largely absent from documentation relating to both inclusive education and alternative care reforms.

\textsuperscript{25} TransMoNEE, 2021.

\textsuperscript{26} Human Rights Watch, “On the Margins”: Education for Children with Disabilities in Kazakhstan, New York NY, 2019

\textsuperscript{27} UNICEF and UNDP, Family-type Care vs Residential Care Costs: An analysis of the recent developments in government expenditure and the costs per child in family-type care and residential care (Moldova), ECORYS, Rotterdam, The Netherlands, 2022.


\textsuperscript{29} The Statistical Committee of the Republic of Azerbaijan, Statistical Yearbook of Azerbaijan 2023, Baku, 2023,Table 8.3 page 198.
1.4 The context for the use of boarding schools

All countries in the ECA region are signatories of the CRC and the CRPD, both of which assert children’s right to grow up in a family environment. While parents have the primary responsibility for raising their children, the state should support them in fulfilling that duty.

Children have a right to protection from harm, and the right to access education and healthcare while also having the right to be raised by their family. Where the family cannot provide the care they need, despite the provision of adequate family support from the state, the child has the right to substitute family care.

The CRC also articulates the rights of children with disabilities to live in conditions that promote dignity, self-reliance and active community participation. The CRPD further guarantees the right of the child with disabilities to inclusive education in the community alongside peers without disabilities (Article 24) and to life in the family and the community (Articles 19 and 23).

When considering the use of boarding schools for disadvantaged children, or any other decision that affects the child’s life and their potential separation from their family, the best interests of the child should be the primary consideration (Articles 3 and 9 of the CRC and Article 7 of the CRPD).

Following the 1994 Salamanca Statement, which confirmed the commitment of governments to inclusive education, the Committee on the Rights of the Child highlighted the need to end segregation in education for children with disabilities, recommending that ‘States review and amend laws that inappropriately segregate disabled children into separate institutions for care, treatment, or education.’ CRPD Committee General Comment 4 further emphasises that Article 24 on inclusive education cannot be implemented if children are segregated into residential special schools away from their families and communities.

These considerations mean that the safeguarding of children’s best interests and rights is the responsibility of all organisations and agencies and citizens who touch the lives of children. They also raise critical questions about how boarding schools uphold children’s rights.

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1.5 Defining boarding schools

Boarding schools cater to diverse populations, have very different functions, and have varying definitions across countries. This complicates attempts to define their role in the provision of education and care, and their place in reforms focused on the deinstitutionalisation of alternative care for children.

It can be difficult to identify disadvantaged children within the population of children living in boarding schools. For example, in many countries of the ECA region residential care institutions for children in out-of-home care house similar populations, while general boarding schools cater for more diverse populations (and larger numbers).

The remit of this White Paper is to explore the quality and use of boarding schools in the ECA region for a particular group of children that are socially excluded, ‘disadvantaged’ or ‘vulnerable’. These include children without parental care, those with disabilities and complex medical needs, those in legal trouble, and children from rural areas who lack mainstream schools in their area. Different types of boarding schools fall within the scope of this paper, including faith-based, public and private, single-sex and co-educational, but it excludes elite boarding schools. A typology of boarding schools that can be found both in the ECA region and more widely in Europe and internationally is summarised in Box 1, illustrating their heterogeneity.

BOX 1. The heterogeneity of types of boarding schools

<table>
<thead>
<tr>
<th>SPECIALIZED RESIDENTIAL EDUCATION</th>
<th>GENERAL RESIDENTIAL EDUCATION</th>
<th>ELITE RESIDENTIAL EDUCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>(or specialized boarding schools)</td>
<td>(or general boarding schools): reasons for placement</td>
<td>(or elite boarding schools)</td>
</tr>
<tr>
<td>• For children with disabilities</td>
<td>• Lack of access to appropriate education in rural areas</td>
<td>• Private boarding schools</td>
</tr>
<tr>
<td>• Health care and rehabilitation</td>
<td>• Support for poverty and other social reasons</td>
<td>• Boarding schools specializing in arts, music, sport, science, mathematics</td>
</tr>
<tr>
<td>• Correctional boarding schools</td>
<td>• Parents working abroad (military, civil service)</td>
<td>• Military boarding schools</td>
</tr>
<tr>
<td></td>
<td>• Religious schools</td>
<td></td>
</tr>
</tbody>
</table>

Source: the authors, based on Islam and Fulcher, 2018.32

Specialised boarding schools for children with disabilities organised by the state are common across the ECA region and other countries of Europe, the UK, North America, Australia (and, indeed, worldwide). These facilities group children with similar impairments (sight, hearing, communication, cognition) for the purpose of teaching adapted education curricula, perhaps using adapted teaching methods. As inclusive

32 Islam, Tuhinul, and Leon Fulcher (eds), Residential Child and Youth Care in a Developing World: Middle East and Asia Perspectives, CYC-Net Press, Cape Town, South Africa, 2018, pg.18.
education has expanded across the globe, however incrementally, dependence on residential schools may have reduced, but a lack of data means that this cannot be verified. The CRPD is clear – children should not be separated from their families and communities in order to access education, health or other services that they need. This means that residential special education should no longer be permissible in any education system, for any children with disabilities. It also means that inclusive provision should be available in all communities for all children with disabilities. However, given the slow pace of change evident in the development of inclusive education in many countries, even those committed to providing widely available inclusive education for all children continue to provide education for children with disabilities in residential facilities that are not part of national deinstitutionalisation strategies or child care system reforms.

Health care and rehabilitation settings can be found in some countries where some hospitals or other health facilities, such as sanatoria for those with tuberculosis, have schools where children may stay for long periods of time – sometimes for many years – because of a lack of other care options, even when the children are healthy and have no additional need for health services.

Correctional boarding schools in the ECA region are a form of residential education and care that caters to children entangled in the criminal justice system or those at risk of offending. They present a nuanced intersection of juvenile justice and child welfare. They can be for children under the minimum age of criminal responsibility, often falling under the responsibility of ministries in charge of social affairs, or for children above the minimum age, falling under the ministries of justice.

Correctional boarding schools not only institutionalise children, but they also constitute de facto detention for these children as they are often closed institutions or only semi-open, leaving children with little or no contact with their community or families. Correctional boarding schools can be used when children are moved out of detention and are transferred to these facilities instead of accessing community-based support, diversion or other alternatives to detention. This reinforces the need for the promotion of diversion and non-custodial measures, as well as prevention and family support services to address the root causes to family separation. In tandem with international human rights principles, especially those embedded in the CRC, correctional boarding schools require careful scrutiny. Legal and policy frameworks should be tailored to ensure that these institutions are not substitutes for detention or punitive measures, and that they are used only as a last resort and for the shortest duration possible.

It is imperative to deepen our understanding of correctional boarding schools through comprehensive data collection and thorough analysis. There is, at present, a significant gap in empirical data regarding the number and type of children they host, their operations, effectiveness, and their impact on the children they serve.
General boarding schools

These residential facilities organised by the state teach the mainstream curriculum and are not adapted for children with special educational needs. They are a way to provide education for children who experience barriers to education in their own communities, often because they live in remote communities with no local schools, or because their families cannot afford the costs of accessing the local education on offer. There may be specific social and economic criteria applied to children who access this kind of education. Some countries offer this type of boarding school education only to children who meet criteria related to academic achievement, as well as geographic or socio-economic criteria. In some countries, such as Kazakhstan, this type of boarding facility is also provided for pre-school age children (under 7 years of age). In addition, some countries provide this kind of education to the children of military personnel who are serving abroad.

Religious boarding schools are organised by faith-based education networks to teach the mainstream curriculum but with additional religious teaching and faith-based extracurricular activities. Places can be provided at no cost to parents. Children may reside at the facility during the week and return home at weekends if possible, or they may spend their weekends at the boarding school, or another residential facility organised by the faith-based education network. In some cases, this may result in full-time residence, year round.

Elite boarding schools

The main types of elite boarding school in the ECA region are run by the state and were developed, and continue to operate, as a way to find children who are gifted in particular areas (such as sport, music, art, mathematics) and provide them with an education that nurtures their perceived talent. Children are admitted to these boarding schools from around the country if they meet specific academic or other criteria relating to the speciality of the school.

Privately funded schools that teach the mainstream curriculum may also be found in many countries of the ECA region. These are profit-making education services that may also have boarding facilities.

Military boarding schools are another type of state-funded elite boarding school in the ECA region, which give children an education that prepares them for military college and a military career. This kind of boarding school may be available to children who meet specific education or other criteria.

Given these variations in the needs and circumstances of the children attending boarding schools, as well as the different functions and purposes of boarding schools in the ECA region, it is not possible to address either their diversity or to provide a single definition. However, by the very nature of providing 24-hour care on a regular basis in the absence of parents or primary caregivers, it could be argued that boarding schools are providing alternative care. Whether they are defined in national legislation
as providing alternative care or not, they nevertheless have a duty to uphold children’s rights, ensure their education and development, and safeguard them from abuse.

While this White Paper does not focus on elite schools, its exploration of the overall role of boarding schools in the education of disadvantaged children may reveal some overlaps. Clearly, any recommendations about the role and functioning of boarding schools should extend to elite boarding schools, including military, and specialist arts, science and sport schools.
2. Should boarding schools be formally classified as ‘alternative care’?

2.1 The historical legacy and current use of boarding schools

Boarding schools originated in Europe and spread to other countries through colonisation, often to serve the elite or military or to promote religious beliefs.\(^{33, 34, 35, 36}\)

More recently some consideration has been given, for example in the UK and US, of how boarding schools can also serve disadvantaged children in foster care or in families that are struggling to provide adequate care. These initiatives are mindful of concerns about the impacts of institutionalization on children and focus on issues of stability and education achievement for disadvantaged children.\(^{37, 38}\)

In the ECA region, however, current policies and practices have been heavily influenced by the historic legacy of USSR boarding schools. The challenges that are being experienced now have emerged from a range of factors. These include: the lack of social work (with no social work services established until 1991) or family support (other than minimal financial assistance encouraging the use of free boarding school places), including preschool childcare; an over reliance on the medical model of disability and defectology, and the pathologizing of developmental problems; and the absence of inclusive education for children with disabilities in mainstream schools and community-based care services.\(^{39}\)

States used a variety of measures to remove children to an increasingly differentiated range of boarding schools and children's homes. The selection criteria for such schools often mirrored societal and political controls and the prevailing medical model of disability, which emphasised the medical diagnosis, correction and the need to rehabilitate people, and at the extreme, warehoused them in extremely poor conditions and denied them the right to education and family life.\(^{40}\)

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39 Carter, *Family Matters*

The harmful effects of institutional care on child development have been recognised in recent years, prompting a shift towards community and family-based care for children in need of alternative care. Efforts to deinstitutionalise residential alternative care services (children’s homes, infant homes) are evident in most countries with a shift towards small-scale residential care and foster care, as well as family support and prevention of separation. However, children and young adults with disabilities have been left behind, with the percentage of children with disabilities among those in residential alternative care increasing in many countries in the region between 2015 and 2021.\(^{41}\)

Deinstitutionalisation and inclusive education reforms have not yet reached residential special schools to the same extent as alternative residential care. Around two thirds of education systems in 30 countries across Eastern Europe, the Caucasus and Central Asia still have separate, specialised education in special schools, boarding schools, hospital schools and rehabilitation centres.\(^{42}\) There have, nevertheless, been some significant success stories in closing boarding schools across the ECA region and warrant a closer look to explore both the drivers of this shift and the methodologies used.

### 2.2 Boarding schools and deinstitutionalisation

The individual drivers for the closure of boarding schools have been varied. In some countries, the COVID-19 pandemic led to the emergency closure of boarding schools and other institutions, some of which then remained closed. In 2021 in five regions of Ukraine, 10 per cent of children in boarding schools, equating to more than 437 children, received support to remain at home and go to mainstream schools or attend the boarding school as day pupils. Another 788 were supported to prevent their entry into institutions in the first place.\(^{43}\)

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43 UNICEF Ukraine, “One in ten children from institutions in five regions were integrated into their families thanks to the UNICEF project”, Press release, Kyiv, 19 February 2021.
In Uzbekistan the pressing need to address levels of violence in a correctional institution for girls led to the deinstitutionalization of the residents in 2019 (Box 2).44

**BOX 2. Uzbekistan case study – deinstitutionalisation of a correctional boarding school for girls in contact with the law**

**The issue:** Violence, sexual harassment, staff burnout (1 psychologist for 207 children) in a boarding school for girls in contact with the law.

**Assessment:** The first step was an assessment of the needs of the girls, using social work instruments, which revealed that all the girls were in the institution because of a lack of prevention services for domestic abuse, child abuse, gender violence, drugs and alcohol, and labour migration.

**Plan:** The assessment of each child was followed by the development of a reintegration plan overseen by the new Ministry of the Interior, creating a system for interagency working.

**Decision-making:** New functions were created at local level where professionals were able to take decisions about what should happen.

**Intervention:** Agencies at local level were able to come together to work on inclusion and undertake prevention and reintegration activities. The ability to implement this in practice was limited by a lack of skills and capacity on the ground, particularly a lack of social workers and psychologists. This highlighted the need to recruit a new social service workforce, and for training and investment in new ways of working before changes are introduced.

**Wider activity:** The specific reforms around the closed institutions were accompanied by the development of models for interagency working, new laws on prevention and UNICEF support for social work training in universities and investment in 1,000 school-based counsellors, who were trained and supported to work with students and parents. Issues remain in terms of training for all staff.

**Impact:** Within 12 months of implementation, 167 children had been assessed for reintegration and 48 had been successfully reintegrated into their families

Source: UNICEF Uzbekistan. 2019. Assessing and reintegrating girls from closed institutions in Uzbekistan back into their families and communities, Tashkent.

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44 UNICEF Uzbekistan, Assessing and reintegrating girls from closed institutions in Uzbekistan back into their families and communities, Tashkent, 2019.
Deinstitutionalisation reforms in Moldova have been ongoing since the early 2000s and have resulted in a notable decrease of the number of children, including children with disabilities, living in institutions and residential special schools. Their numbers fell from 12,000 in 2007\(^{45}\) to 828 children at the end of 2021.\(^{46}\)

Effective deinstitutionalisation has involved the comprehensive assessment of children and family needs to identify the services required across education, health and social welfare to support the successful return of children to their families and to community-based care and education. These initiatives have found that community solutions support more children and families than residential options, have substantial cost benefits and uphold children’s rights to family life. They have resulted in significant progress in the development of new child and family services in the ECA region, including appropriate legislative reform.\(^{47}\) Nevertheless, continued investment and momentum are required to ensure that these reforms are irreversible and that no child is excluded, particularly in a region that has twice the global average of children in residential care.\(^{48}\)

Despite these clear signs of progress, many governments in the region are either unwilling or unable to ensure family care for all children, leaving children with disabilities and ‘difficult to place children’ behind in residential alternative care including boarding schools and residential special schools. In some cases, children have been ‘trans-institutionalised’: moved into smaller-scale residential care services, which have been used as a temporary and pragmatic ‘quick fix’ solution to large institutions, particularly for children with disabilities.\(^{49}\) In nearly all countries for which data are available, children with disabilities are over-represented in residential alternative care, including residential special schools. At the end of 2021, in eight countries of the ECA region from 30 per cent to 60 per cent of children in residential alternative care were children with disabilities, and in three countries this percentage was over 67 per cent.\(^{50}\)

While the reduction in the numbers and rate of children in residential alternative care in the region is encouraging, concerns remain about the number of children still living in boarding schools, and the fact that many vulnerable children, such as those with disabilities, remain over-represented in residential special schools. There are also concerns about the tendency towards the increasing use of boarding schools noted in some countries, such as Azerbaijan and Turkey.


\(^{46}\) UNICEF, TransMonEE Analytical Series: Pathways to Better Protection.


\(^{50}\) UNICEF, TransMonEE Analytical Series: Pathways to Better Protection.
2.3 The role of boarding schools in the wider agenda of child care system reform

Boarding schools in the ECA region often fall through the cracks of policy areas such as inclusive education and childcare or child protection system reform. They have often been left out of deinstitutionalisation agendas and safeguarding measures as a result of fragmented responsibilities between ministries and a focus on the role of boarding schools as educators rather than care providers. In addition, they may not be prioritised in the drive for inclusive education as the focus is on establishing inclusive mainstream education environments, with less attention given to the family support and social services that are also needed to enable children with disabilities in boarding schools to return to their families and attend mainstream, inclusive education.

Tolfree suggests that schools provide an education service to *supplement* the care and education provided by parents, while residential institutions (and other alternative care provision) *provide* the care and education that parents, for whatever reason, cannot.\(^\text{51}\) By default, however, boarding schools are fulfilling both of these functions, particularly where children are in their care for entire terms or for 365 days a year. It is crucial, therefore, to consider the care functions provided by boarding schools and their impact on vulnerable children.\(^\text{52}\)

Supporters of boarding schools highlight their educational benefits and the opportunities they offer for the development of life skills, yet little research evidence is available specifically in relation to such schools. An Australian study found that the impact on the health and well-being of children attending quality, culturally sensitive, secondary boarding schools is neutral.\(^\text{53}\) Another study, which focused on Indigenous students attending private boarding schools, found weak evidence of benefits.\(^\text{54}\) Critics of elite boarding schools in the UK highlight the emotional stress and damage they can cause and have named it ‘boarding-school syndrome’.\(^\text{55}\) A 2022 UK independent inquiry into the sexual abuse of children highlighted that boarding schools share characteristics that make children more vulnerable to sexual abuse, particularly children with disabilities.\(^\text{56}\) Other research, however, suggests that boarding schools offer educational and other benefits to disadvantaged children.\(^\text{57, 58}\) Overall, the available evidence seems


\(^{56}\) Independent Inquiry into Child Sexual Abuse, *Residential schools investigation report*.

\(^{57}\) Lee and Barth, *Residential education: An emerging resource for improving educational outcomes for youth in foster care*.


inconclusive on the positive or negative benefits of boarding schools for vulnerable children in these countries.

Outcomes for children in different kinds of boarding schools in the ECA region should be studied separately from those in Western Europe, North America and Australia. This is because the historic target groups for these facilities in the region are very different from those in other countries, whether children have disabilities or special education needs or not.

Studies of boarding schools in Armenia, Kazakhstan, Kyrgyzstan, Moldova and Serbia show that the quality of education offered by these schools can be poor or wholly absent, particularly for children with disabilities or children with challenging behaviours. In one boarding school in Moldova 46 per cent of children were not accessing the education that was being provided on-site.⁵⁹ ⁶⁰ Other studies from Moldova found that special boarding schools were not providing adequate education for the children who were supposed to receive a specialised education because of a lack of staff capacity and other resources.⁶¹ The cost of providing education in two auxiliary boarding schools in Moldova was calculated to be 2-3 times higher than the average annual cost in other general primary or secondary educational institutions, and higher than the costs of a model inclusive education unit for children with severe disabilities.⁶²

These studies highlight that the provision of segregated, specialised education for children with disabilities in residential settings cannot guarantee either quality or cost-effectiveness in terms of education outcomes.

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⁶² Changing the Way We Care, *Findings and recommendations from evaluations of six residential institutions*, Catholic Relief Services, Chisinau.
3. Are boarding schools an appropriate form of education and care provision for vulnerable children?

Residential special schools contravene the CRPD and are an extreme form of segregated education for children with disabilities. As a result, these types of facilities cannot be considered appropriate in any way. The over-representation of children with disabilities in residential special schools and other types of residential alternative care is a sign of inequitable access to mainstream, quality education for all children. Given, however, the slow pace at which inclusive education is developing in many countries, some types of residential special schools may continue to operate in the short term if this remains the only available education service for some children with disabilities.

As previously stated, there is a lack of evidence on the outcomes of mainstream boarding school care and education for vulnerable children in the UK, Europe and internationally, and the evidence that is available is largely inconclusive. The effectiveness, appropriateness and outcomes of boarding schools are, therefore, difficult to monitor as definitions of residential care vary widely across countries. 63

Evidence on outcomes from boarding schools in the ECA region is also limited, but available studies indicate, in some cases, similarly mixed positive and negative findings. 64 One study of special residential schools for children who are deaf or hard of hearing in Moldova, however, found that very few children from these special residential schools transition to mainstream schools, tertiary education or professional occupations and that “it is safe to assume that the education, social and developmental outcomes of children… are dismally low.”  65

While monitoring outcomes continues to be challenging because of the varied definitions and lack of data, TransMonEE defines ‘children in residential alternative care’ as those who are in boarding schools of all types, with the exception of elite or specialised boarding schools (see Box 3).

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63 EuroChild and UNICEF, Better data for better child protection systems in Europe.
BOX 3. TransMonEE definition of ‘Formal Residential Care’

Formal Residential Care is provided by paid and/or unpaid staff in a group setting (non-family based) where some children live and receive care (including in private facilities), whether or not as a result of administrative or judicial measures. Parental rights may or may not have been (fully) transferred to the state in the case of these children. This also includes relinquishment, which refers to situations where the parent(s) surrender their parental rights voluntarily, and to situations in which parents are temporarily unable or not in a position to care for the child (e.g. where one or both parents are in prison, children are temporarily left behind by migrating parents).

Residential care may be provided full-time, for most of the year, temporarily or for a defined period. Residential care facilities can be operated by the government at the national and/or sub-national level or by a private entity, including facilities operated by civil society and faith-based organisations or organizations with a religious affiliation. In case facilities are operated by the state, oversight may be provided by different sectors of the government (for instance, social welfare, education, or health).

This definition of residential care includes a wide range of residential care settings, from small group homes to large residential facilities: such as infant homes (usually up to the age of 3) and long-term baby care in maternity hospitals; children’s homes and orphanages; institutions including special schools/institutions for people/children with disabilities; special boarding schools where children are placed and cared for who have, for example, dropped out of school, engaged in risk practices, are victims of violence, are children from families at risk of poverty and social exclusion or have special educational needs, among other institutions and care settings.

Not counted as residential care:

- Children/youth who are placed in specialised boarding schools because they have met educational entrance requirements, including for specific subjects such as sports, music, dance, mathematics, art, etc.
- Children in outpatient and/or daycare facilities
- Children between the ages of 0 and 17 in custody (pre-trial and post-trial detention).

Source: UNICEF ECA Regional Office. May 2023, TransMonEE NSO Data Collection, Definitions and Guidelines. UNICEF ECA Regional Office, May 2023, Presentation to Online TransMonEE meeting, Slide 23.
This definition, however, is not necessarily adhered to in a consistent way by the 28 countries that participate in TransMonEE data collection.66 In the data for 2021 for example, some countries reported all children in all types of boarding schools (except elite boarding schools specialising in mathematics, arts, sports) as being in residential alternative care. Other countries only reported children in children’s homes or children without parental care. They did not report children in residential special schools under alternative care indicators, but did report them under indicators on children with disabilities and education. Indicators continue to be refined.67

The Conference of European Statisticians notes the challenges in defining residential care and recommends working to achieve an international consensus on definitions for a core set of indicators on children in alternative care. These include standard definitions for the types of alternative care: family-based care, institutional care and other forms of residential care, such as small group homes.68 It also notes that special boarding schools in some countries are large-scale institutions for children with disabilities or complex medical needs.69

It is not only residential special schools that share some of the characteristics of institutional care: this also applies to boarding schools more generally. When viewed through the lens of child development, many boarding schools can be considered to share some harmful characteristics of institutional care that can hamper the development of young children. As a result, the age of the child is just as important in relation to boarding schools as it is for institutional care and should be factored into the design of admissions criteria and processes for any boarding schools. The dangers of institutionalisation for the development of young children under 3 years of age are well-documented and widely recognised by governments in the ECA region, as is the importance of investing in early childhood development throughout the preschool years.70 It is vital to understand the constraints of residential care and boarding school when it comes to young children, in particular.

Parents are typically children’s first teachers of essential skills. In a non-boarding context, parents collaborate with teachers in pre-school settings to reinforce school-based learning, advocate for the child’s needs, and help them explore their communities. Children in boarding schools may lack this vital advocacy, particularly children without parents, and many boarding schools in the region report minimal parental contact and no contact with the local community. Further, in certain boarding schools, institutional managers are the only formal guardians. This absence of

69 Ibid, p. 41, footnote 27.
independent scrutiny means that there is little effort to ensure the continued suitability of the boarding school for the child or any continuity in their individual relationships.

Modern psychological and neurological research has deepened understanding of child development, emphasising the impact of early experiences on adult well-being.\textsuperscript{71, 72} Theories like Bronfenbrenner's ecological theory\textsuperscript{73} and Bandura's social learning theory\textsuperscript{74} highlight wider economic, political and cultural influences, as well as environmental learning. Key components include supportive responsive relationships, stress reduction\textsuperscript{75, 76} and the strengthening of core life skills, such as impulse control, working memory and cognitive flexibility.\textsuperscript{77, 78, 79}

All of these theories affirm the importance of family-based care and the need for considerable caution in relation to placing any children into boarding schools or residential special schools, particularly vulnerable children, younger children of pre-school or primary school age (7-10 years) or even lower-secondary school (middle school) age (11-13 years).

The time spent in a boarding school and its influence on the continuity of children’s other relationships is also a pertinent issue for older children. This is because the continuity of warm and trusting relationships is crucial to building the resilience of children and young people, as well as a sense of their belonging within the community as they transition into adulthood and face the adversities of life, all of which is even more important for children without parental care.\textsuperscript{80}

\begin{itemize}
\item 71 Center on the Developing Child, \textit{From Best Practices to Breakthrough Impacts}, Harvard University, Cambridge MA, 2016.
\item 76 Masten, Anne, ‘Inside Resilient children’, lecture recorded on YouTube, 2013 (https://www.youtube.com/results?search_query=ann+masten+resilience+).\textsuperscript{11}
\item 78 Perry, Bruce D., \textit{‘Creating an emotionally safe classroom’}, \textit{Early Childhood Today}, 2016.
\end{itemize}
Concerns about the quality of care provided in boarding schools in the ECA region stem from concerns about residential care more generally. Georgia is closing and Uzbekistan has closed religious boarding schools because of concerns about the quality of care and lack of access to the facilities for parents, community members, inspectors and other outsiders (information from interviews). Studies on regional boarding schools in Turkey for example have found varying and non-generalisable results, underscoring the urgent need for more research.

The ability of boarding schools to meet children’s needs depends largely on the quality of the facilities, staff and the programmes they provide, the length of time children are there, and their contact with their families. For these institutions to meet the basic care needs of vulnerable children, they must be informed by best interest decisions and provide a place where children’s needs are met by warm and responsive carers who are able to create a family-like environment. These carers must be equipped to interpret the behaviour of the children in their care, given their higher levels of complex needs. They must also be consistent in assessing and re-evaluating their holistic needs and in adjusting their care and environment to encourage their sense of agency and of belonging to the school, community and to their families. This may include community integration activities such as joining a local library or attending community clubs or sports activities.

According to Hansen, “young people need to feel that society is a place of safety and welcome for themselves,” a place where they can participate with a community of adults who help them solve problems and pursue resilience.

83 Cinoğlu, Mustafa, ‘Evaluation of Boarding School in Turkey (Case Study)’, The Online Journal of Counselling and Education, October 2012, Volume 1, Issue 4.


85 Hansen, Craig Trevor, ‘Alternative Education; is someone crazy about your young people?’, Academia Letters, 8 August 2021 (10.1177/0743588419833332).
4. A systematic approach to address the root causes of, and concerns about, boarding school use

Experience in the ECA region indicates the need to both reduce the demand for boarding schools and residential special schools through systemic reforms, and to regulate both the education and care components of boarding school services. Given concerns about the additional vulnerability of children in boarding schools and the inconclusive evidence on the benefits of boarding school for vulnerable children, the priority should be to close such schools rather than to improve them. Clear entry criteria and the full application of the necessity principle from the Guidelines on Alternative Care for Children are required to ensure that boarding schools are not seen as a way to provide alternative care in the absence of family-based alternatives, or as a way to provide education in the absence of inclusive community-based education.

This section identifies the drivers of boarding school use in the ECA region and examines ways to address these drivers and the concerns about the quality of boarding school education and care through four key system-wide changes: gatekeeping, family support, inclusive education and family-based alternative care.

4.1 Drivers of boarding school use in the Europe and Central Asia region

The current legacy of boarding schools in the ECA region is characterised by a shifting perspective towards the prioritisation of family-based care and the promotion of inclusive education. In some countries, such as Moldova, inclusive education reforms, alongside active deinstitutionalisation policies, mean that the country now has no boarding schools and very few residential special schools. In many countries, however, boarding school use remains high as a result of the following issues.

- Discriminatory views and practices about children with disabilities and other marginalised groups remain unchallenged, reinforcing the belief that boarding schools are the only suitable option for them.
- Admission criteria and processes are easier than for other forms of alternative care. In many ECA countries, a request from the parent(s) and the approval of the director of the boarding school is sufficient, while placement in another form of alternative care might imply the limitation or even removal of parental rights.
- A lack of exposure to modern and evidence-based practices in education, health and social care prevents families from demanding (and decision-makers from providing) alternatives to boarding schools. There is also a lack of political will and commitment on inclusive education for all children.
- There is a lack of understanding among educators, policy-makers and parents of the dangers to children and to child development and well-being that can arise from poor quality residential care provision in boarding schools and residential special schools.
In some countries, stakeholders who have vested interests in maintaining the system of boarding schools present an additional barrier to reforms. High level political will is required to mitigate and address the personal and institutional interests involved in maintaining the status quo.

A number of other factors compound the use of boarding schools, including the following.

**Social factors** contribute to the continued use of boarding schools. These include poverty; the way in which services are organised; stigma and discrimination within families and communities towards children with disabilities and other marginalised groups; a lack of integrated working between stakeholders; and a lack of inclusive education, or indeed any education.

**Poverty** itself is a powerful driver for the use of boarding schools by disadvantaged families in the ECA region in that these schools are free. While local schools may provide free education, there are always the hidden costs of, for example, transport, books, outings, etc., in addition to the core costs of rearing a child, which are difficult for poor parents to meet. These issues are exacerbated for parents of a child with a disability: their social protection payments are rarely adequate, and stigma or lack of education may prevent the child attending a local school, leaving one parent unable to take paid work.

**Social support services are often under-developed** with services organised around specialities, with the lack of collaboration making it difficult to access specialist help. This is often time-consuming, with parents shuttled from one ‘expert’ to another, rather than services being organised around the child and their family. The offer of free boarding then becomes very attractive financially and may outweigh considerations about the child’s place in the family.

The **prevailing medical model of disability** in the region means that the results of educational assessments by medical-pedagogical commissions are pre-determined: they may not look beyond the diagnosis or health condition and have practices based on the belief that boarding schools are the only viable option, even though few offer a quality education, contact with the community or holistic development opportunities. UNICEF and NGOs also report, however, that in some countries in the region, most of the children admitted to boarding schools intended for children with disabilities (so-called auxiliary or ‘helping’ schools) have no real disability. The medical model is, therefore, often used to give undue weight to certain types of information and criteria in the admissions process and to justify the admission of children without disabilities to schools that are supposed to be specialised.

**Discriminatory views about children with disabilities** and other drivers of social exclusion and vulnerability remain unchallenged in many countries. In particular, there is a widely-held perception that boarding schools or residential special schools are the repository for the most relevant specialist resources, which cannot be replicated at community level because of the ‘defectology’ approach/medical model. Other
vulnerable children in the region also face discriminatory views, including those with challenging behaviour or those without parents, and approaches to their care are too often based on outdated theoretical and practice models that result in their exclusion from mainstream society.

### 4.2 Addressing the drivers of boarding school use

Recognising families as active partners and raising awareness of a rights-based model of disability can help to overcome the factors that drive the use of boarding schools. Political commitment is also needed to review, amend or introduce relevant policies and ensure their implementation by, for example, ensuring that a boarding school is not a more viable financial option for a family.

Parental involvement in the education of children is associated with improved educational achievement and is increasingly recognised as crucial, particularly for parents of children with disabilities. If parents become aware of their rights and new possibilities, and can address their own prejudices and those of their community, they can advocate for better services that are arranged around their needs and the needs of their children. Those who fight to keep their children say that they are often defeated by poverty and lack of access to comprehensive education, along with the prejudices they and their child face in all areas of their life and their own need to work. Parents may also feel sceptical about inclusive education that is poorly organised, essentially meaning that their children are segregated either in school or at home.

Communication for social and behaviour change to address stigma is important to support inclusive education and there is some encouraging evidence that it can be effective in supporting transformative change in integrated programmes that also address policies and practice.

It is also important to note the impact of segregation and discrimination on other groups in the ECA region, particularly minority communities such as Roma, and some religious groups. As already noted, remoteness, poverty, ethnicity, language, migration, displacement, incarceration, sexual orientation, gender identity and expression, and other beliefs and attitudes all have an impact on inclusion and segregation.

Human-rights discourse is critical for lasting change, and a shift is needed in both social attitudes and the training of relevant professionals, in addition to the establishment of a range of support services. Some of the most compelling ways to effect change are

86 Iara, Laura and Mahia Saracostti, ‘Effect of Parental Involvement on Children’s Academic Achievement in Chile’, Psychol., Sec. Developmental Psychology 27 June 2019.


better education and support for staff, as well as inclusive education for all children, starting from early years provision.

Little investment has, however, been made in some countries in up-to-date professional training and supervision for staff in boarding schools. This has left staff protective of what they have and know, and often resistant to or unable to implement change in their roles and ways of working. It is essential, therefore, to support re-education programmes for staff, parents and society if children from these communities are to take their place in mainstream society.

The use of technology to supplement teachers’ skills and provide quality education in rural schools may be an effective way to address rural depopulation issues by exploring successful alternatives to boarding schools in remote communities. These could include multi-grade teaching, distance learning or other schemes for rural education provision. Australia and the Scottish islands provide good examples of rural education where teachers’ skills are supplemented by technology, an approach also seen in the far North where local traditions combine with modern education while preventing children of primary age going to boarding school.  

Common factors that have had an impact on the successful deinstitutionalization of boarding schools and support for effective change in the ECA region include the following:

- **Political commitment and strong strategic leadership** at all levels, with clear vision and communication strategies to overcome boundaries. Leaders should ensure alignment with international standards for safeguarding and education, negotiate resistance, and establish steering and advisory groups with representation from different stakeholders including children and families.

- **Partnerships and engagement** with all stakeholders, including children, families, faith leaders, and community leaders, to understand and address emerging issues, negotiate core values, foster collaboration and support effective decision-making.

- **Detailed assessment and planning** through the conduct of comprehensive assessments and the development of strategic plans for change that are centrally aligned and owned across sectors. It is important to understand the demographics of children and families, identify available resources, and address gaps in community family support, human resources, and required services. The process needs to consider individual needs and establish clear timescales for implementation, with regular reviews of progress.

- **Changes in funding, legislation and regulation** that are informed by the piloting of new models of care and education, the joint evaluation of their

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effectiveness and an understanding of the changes that will be needed in
terms of human resources requirements, training, financial aid and regulation.

- **A robust gatekeeping system** to ensure that children funded by the state
do not enter boarding schools or residential special schools unnecessarily
and that they remain in boarding schools for only as long as necessary, and
the prioritisation of community-based provisions in education and support for
families. Gatekeeping should include the development of community-based
gatekeeping mechanisms and other resources to prevent new entries into
boarding schools and support the successful reintegration of children returning
home and their inclusive education in schools in the community.

- **Staff training and development** for all relevant staff in education, health
and social services, aiming to ensure that all community members have the
necessary skills, shared vision, values, and understanding of key concepts and
standards. Key stakeholders need to be engaged and equipped to be active
participants in the change process.

- **The establishment of quality assurance systems**, with experts from various
fields, including faith communities, with the inspection of all boarding schools
and residential special schools based on agreed standards that prioritise
children’s welfare.

- **Utilising evidence-based practices**, such as early childhood intervention (ECI)
models to target developmental delays and strengthen in-country services.
Examples include, in Croatia and Serbia, the systematic monitoring of child
development, individualised planning and transition planning to support
children’s entry into inclusive education; and continuous monitoring and
evaluation\(^ {91}\) – all of which are vital for effective interventions.

The components of effective programmes for all children include the treatment
of parents as partners by service providers; the tailoring of interventions to the
strengths and needs of both parents and children; service integration and interagency
collaborative care; peer support; trauma-informed services; the cultural relevance of
programmes; the inclusion of fathers;\(^ {92}\) and the quality of the relationships between
the children and their families and the professionals\(^ {93}\) (including, in social work, the
importance of the ‘holding relationship’).\(^ {94}\)

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91 UNICEF, ‘Family-centred services for early childhood intervention: highlighting initiatives in Croatia and Serbia’,

92 National Academies of Sciences, Engineering, and Medicine et al., ‘Elements of Effective Parenting Programs
and Strategies for Increasing Program Participation and Retention’ in Breiner et al., Parenting Matters: Supporting

93 Knobloch-Fedders, Lynne, ‘The Importance of the Relationship with the Therapist’, Clinical Science Insights
VOL 1 2008.

94 Ferguson, Harry, et al., ‘Relationship-based practice and the creation of therapeutic change in long-term work: social
Success can be measured by the perception of effectiveness, the extent of improved outcomes in comparison with other similar areas, and the quality of diverse provisions. To enhance the effectiveness of this process, it is crucial for everyone to utilise a comprehensive set of commonly understood tools to prioritise the development of inclusive education.

### 4.3 Addressing concerns about quality of education and care in boarding schools

This section builds on evidence from countries such as the UK and Australia, which have well-established standards for general and elite boarding schools, as well as for special residential education for children with disabilities. The purpose of boarding school standards is to safeguard and promote the welfare of children in these schools by setting the minimum standard of care based on their developmental needs.

Driving up standards within residential settings to fulfil children's rights is expensive. The Government of Moldova, for example, saw the cost of residential care rise almost three-fold (by 2.8 times) between 2017 and 2021\(^95\) as it attempted to off-set the damaging impact of institutional care by meeting improved standards.\(^96\) This experience should serve as an incentive for greater investment in the development of inclusive education and family support services or alternative family-based care provision, as this has proven to be far more cost-effective in the long term.

Examples of boarding school standards can be found in the UK\(^97\) and Australia.\(^98\) These standards are legally enforceable and are backed in the UK by a legally enforceable multi-sectoral inspection regime. With the exception of Turkey, all of the countries that took part in this review expressed a lack of confidence in their minimum standards and in the inspection processes governing their boarding schools, with vague eligibility criteria and minimal external scrutiny.

Quality boarding schools should adhere to several standards to ensure the well-being, development, and overall educational experience of their students, as well as their academic achievement and the attainment of a well-rounded education. Boarding schools in the UK and Australia must meet important standards, including:

- **Accreditation and certification** by recognised government bodies or associations on quality standards related to curriculum, faculty qualifications, facilities, and overall educational, care, child protection and health practices.

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95 UNICEF and UNDP, *Family-type Care vs Residential Care Costs: An analysis of the recent developments in government expenditure and the costs per child in family-type care and residential care* (Moldova), ECORYS, Rotterdam, The Netherlands, 2022.


• **Health and safety standards** that should include: safe facilities, appropriate security measures, regular safety drills, policies and protocols for emergencies and health issues.

• **Qualified and caring staff**, who are experienced and dedicated to the holistic development of students, including teachers, counsellors, residential staff, and other support personnel.

• **Systematic monitoring and inspection** to ensure adherence to minimum standards.

• **The protection** of children from maltreatment, abuse, neglect, exploitation, and accidents within the school’s residential accommodation or any setting where they are under the care of the school, including:
  • **reporting procedures** so that children know how to report any concerns about their safety and feel empowered to speak up if they encounter any issues or risks;
  • **risk management and incident response** measures to manage risks, including proactive risk assessment, preventive measures, and robust protocols for prompt and appropriate action to address incidents that may occur.

• **A homely and welcoming environment** where children feel safe, secure, and comfortable, with respect for their privacy, protection of their personal possessions, and the provision of enjoyable accommodation and mealtimes. The large-scale institutions that are found in countries in the ECA region, which house hundreds of children and where many children share each room, are unlikely to be able to establish a homely environment that can meeting this standard and are, therefore, unlikely to be appropriate for any kind of boarding school care provision.

• **Open communication** should enable children to develop positive relationships with staff and to **maintain family relationships** so that they feel connected and supported. Regular updates for parents, parent-teacher conferences, and opportunities for parental involvement in school activities are essential.

• **Child participation** in decision-making processes, and in shaping their own well-being and care.

• **The integration of pastoral care and support** in boarding schools for the overall well-being and development of students and standards should address:
  • **access to counselling** and mental health services;
  • **mentorship programmes** between students and trusted adults in relation to academic assistance, personal development, as well as encouragement and motivation.
  • **The creation of a positive and inclusive culture** that promotes respect, diversity, agency, and a sense of belonging in the boarding school through
policies and practices that promote equality, individual differences, and a supportive atmosphere.

- **Student support networks** that promote a sense of community and a supportive and inclusive environment. These can include peer support groups and student clubs, as well as trained residential care staff.

By upholding such standards, the governments of the ECA region can gradually phase out sub-standard boarding schools and promote a nurturing and enriching environment in the facilities that remain (if any). This would be an environment that promotes the overall well-being of all children in their temporary care, as well as their academic achievement and personal growth, of all children in their temporary care, including children with special educational needs.

Without a clear framework of standards and governance that is rigorously enforced by legislation and inspection, placement in any boarding school, including special residential schools for children with disabilities, will continue to be a high-risk placement.

### 4.4 The strategic planning and implementation of system wide changes: gatekeeping and family support, inclusive education and alternative care

There is a clear need for strategic cross-government partnerships and integrated approaches, particularly for boarding schools that are governed by ministries of education. The starting point for strategic planning should be detailed assessments of children and family’s needs to ensure effective service development, whether in boarding schools or local communities. Stakeholders have also identified a range of other significant system wide changes that should be prioritised in education and social care: inclusive education, creative family support packages, out-of-school education provision, foster care, and short-term, high-need small group homes. Moldova’s successful deinstitutionalisation reform, for example, which has closed all boarding schools, illustrates some key components of change – assessment, gatekeeping, and the development of inclusive community-based education and social services (see Box 4).

The repurposing of institutions is another critical step in deinstitutionalisation and the full closure of these facilities. Buildings, staff and other resources attached to the facilities can be repurposed to support families, such as providing day-care services that enable parents to work, and diverting children with disabilities from institutional care. In 2021, for example, Tajikistan used a multiagency team to provide support services (including childcare to enable parents to work) to 359 families at risk and 373 children, and diverted 322 children with disabilities from institutional care.99

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99 UNICEF, ‘Transforming childcare institutions and services’. 
Box 4. Moldova case study – closure of residential special schools

Outcomes – As part of its ongoing deinstitutionalisation of alternative care for children, the Government of Moldova has closed all general boarding schools. Only two residential special schools remain for children with mainly sensory disabilities, and these are also in the process of being closed. Some closed facilities have been repurposed to provide social services or as resources centres to support inclusive education.

Critical interventions – recognising boarding schools and residential special schools as types of alternative care and applying deinstitutionalisation processes to them; child protection system reform; social work and social service workforce strengthening; social assistance (cash benefits for families); and comprehensive education reform, including in rural areas, to ensure the provision of disability-inclusive education in every part of the country.

- Gatekeeping panels were originally designed to take decisions about entry into alternative care for children without parent care. As inclusive education reforms were implemented, entry into boarding schools and special residential schools was included in the remit of these panels. The assessments of medical-pedagogical commissions of children with special educational needs were presented to the panels at the local level and children were diverted to non-residential solutions in the local community wherever possible, with all necessary support for their families.

- All schools in Moldova are now inclusive. Pedagogical commissions and multi-disciplinary gate-keeping commissions have now been replaced by inclusive education centres to assess children and support every child with special educational needs to access the support they require so that they can participate in education without being separated from their families and communities.

- System innovation has included rethinking how organisations operate within a system, aiming to provide the right conditions for practice to flourish. Building services around children and families has involved complex negotiations at both national and local levels, including negotiations between different ministries responsible for the services that touch children’s lives, for example, health, education, housing, transport, and financial support.

Key lessons on effective implementation

It takes time and is very challenging. It also requires detailed planning; effective assessment of need at every level; pump priming and additional funding to develop new services in parallel with existing services; and the development of the community services and inclusive education that enable the closure of boarding schools to happen. It also requires effective, consistent leadership and management across all levels, from ministerial departments to local agencies, to overcome service boundaries and develop effective interagency partnerships, including with children and families, to reconfigure services for the delivery of integrated, flexible and individual services that are monitored effectively and evolving. The closure of boarding schools is also only possible when practitioner training, practice tools and processes, and support for families, work consistently towards the desired outcomes and ways of working rather than against them.
Closed boarding schools and other residential institutions can also be transformed into professional hubs to train and continuously educate the specialist workforce to work directly with children who have special education needs in mainstream schools. This can form part of inclusive education arrangements as seen in Moldova, Montenegro and many other countries that are implementing ongoing inclusive education and deinstitutionalisation reforms.

4.4.1 Gatekeeping panels and family support services

If the unnecessary use of boarding schools is to be reduced in the ECA region, it is essential to understand the demand for such schools and to develop alternative forms of education provision for vulnerable children who cannot remain at home and access education. Gatekeeping panels are one way to achieve this. Their primary aim is to coordinate various activities within child protection systems, including alternative care, with a strong emphasis on supporting families to remain together when it is safe to do so and ensuring that resources are in place to facilitate children's prompt return or reunification.

Led by senior managers from different sectors including health, education and child protection, gatekeeping panels are integral to an overarching system designed to ensure the effective planning, monitoring and evaluation of services provided to children who require specialised assistance, including in education. This encompasses scenarios such as the assessment of placements in specialist boarding schools with educational and/or health provisions, innovative family support packages for children at risk of entering care, or the facilitation of children's timely reunification with their families. Gatekeeping panels can review referrals to boarding schools and direct children and their families towards alternative provision in the community.

In Moldova, for example, gatekeeping panels included representatives from the local authority health, education, child protection and social protection departments, as well as local NGO representatives, organisations for people with disabilities and other relevant local community leaders, institutions or bodies. They reviewed recommendations made by social workers who have assessed each child's needs and developed a plan for their care and protection. When boarding schools were included in the scope of deinstitutionalisation programmes, the recommendations of medico-pedagogical commissions for the referral of children to special schools were also subject to scrutiny by these gatekeeping panels, which helped to stimulate the more effective introduction of inclusive education in local communities. Moldova’s medico-pedagogical commissions were eventually replaced by inclusive education centres.

Gatekeeping panels may be phased out in other countries that achieve successful inclusive education and childcare reforms, where education is available for all children, including children with disabilities regardless of the additional support and accommodations that they require to enable their participation and full inclusion in mainstream schools. But for as long as residential special schools continue to operate, then gatekeeping panels can help to control entry to these facilities and to ensure that placement is in the best interests of the child, for a specific education purpose and
limited to the length of time necessary to achieve this purpose. Gatekeeping panels can also play a role in highlighting gaps in services (for example transport or access to assistive devices) that may be constraining the development of inclusive education in the community.

These panels should strive to enable children to remain within their communities, receiving education and support, whenever feasible. If this is not possible, priority should be given to alternative arrangements that involve family and friends as caregivers or formal foster placements. When education assessment commissions (medical-pedagogical commissions) refer children to residential special schools or other types of boarding schools, gatekeeping panels should assess whether this referral is indeed the only available option and if other ways to provide care and access education can be arranged.

Gatekeeping panels can streamline processes to foster consistent practice and decision-making, as well as cost-effectiveness across all local areas, with ultimate benefits for the entire country.

4.4.2 Inclusive education

The inclusion agenda is essential for successful deinstitutionalisation and for preventing the inappropriate use of boarding schools for vulnerable children. However, inclusion is a term that is often misunderstood.

General Comment No 4 on Article 24 of the CRPD emphasises the need for systemic reform in education to provide an equitable and participatory learning environment for all children, including those with a range of difficulties in functioning. It advocates for inclusion and for communities of learners, which offer both educational and social benefits through higher achievements and makes a strong economic case for family- and community-based care over segregated education, including residential special schools. While both integration and inclusion aim to bring students with disabilities into mainstream schools, one key distinction is that integration expects students to adapt to the pre-existing structure, while inclusion ensures that the existing education system adapts to each student.

Governments need to address implementation challenges beyond legislative and policy reforms if they are to transition effectively to community-based care and ensure that all vulnerable children attend education with their peers. This entails changes in cultures within schools, in the education management and workforce, and in the attitudes of all students and parents.

In the ECA region, two thirds of education systems have a definition of inclusion that includes those in marginalised communities. In all, 23 out of 30 national education systems have been making their support systems broader and more flexible, with 23 countries now offering counselling and mentoring, 22 countries offering learning assistance and 21 countries offering specialist and therapist support.¹⁰⁰

Policies and strategic plans to address inclusion and the current implementation challenges need to be strengthened and accelerated, and national laws need to tackle segregation, given concerns about low teacher confidence and an aging teaching population in many countries.101 These policies include investing in teacher and school capacities, resource allocation and school autonomy; collaboration with other sectors and civil society; empowering children and their families; and challenging stigma and discrimination.102 The potential of digital technology to reach the most vulnerable and marginalised children also needs to be explored.103

Inclusion offers significant cost benefits. Following the initial investment in accessibility, staff training and additional staff, inclusion offers long-term financial benefits to individuals, families and society. The importance of targeted and inclusive access for poor and disadvantaged children is underscored by studies that demonstrate a positive relationship between education and disability.104 106 The International Labour Organisation highlights that current barriers to education and employment for disabled individuals could lead to a GDP loss in productivity of between 1 per cent and 7 per cent.106 Such statistics are likely to underestimate the overall impact because they do not account for the productivity loss of those caring for people with disabilities. Projects that aim to foster inclusion, therefore, require both political will and an understanding of its long-term benefits.

Inclusive education is less expensive than segregated education and it is inefficient to run two separate education systems. The World Bank estimates that building disability accessible schools adds only about 1 per cent107 to construction costs but can reduce overall education costs by up to 41 per cent as illustrated by a project in Tajikistan108 which provided teacher training to facilitate teaching in schools rather than a home learning scheme. And in Moldova, it has been shown that community services and inclusive education are cheaper, support more families and deliver better outcomes.

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101 Ibid.
102 Ibid.
103 Ibid.
108 Mont, Combatting the Costs of Exclusion for Children with Disabilities and their Families, p. 32.
than boarding schools for children with special needs, with the costs of residential care growing exponentially as they are compelled to improve their standards. Despite policies that promote inclusive education, it is not always the guiding principle across all relevant domains. As a result, one in three students with special needs in the ECA region is still in special schools in the name of education, and the medical approach to disability continues to dominate. For example, school admission in 15 of 30 education systems in the ECA region still depends on a medical-psychological assessment and other selection procedures.

Inflexible curricula and a lack of teacher preparation remain prevalent and only about half of lower secondary school teachers in 2018 felt prepared to work in mixed-ability classrooms and only one third in culturally diverse classrooms.

If poorly delivered, inclusive education can be a negative and isolating experience for children with special needs. Parents may then demand segregated education for their children with special needs as they may believe that it will offer individual support, a specialised curriculum and a supportive peer group. Parents may also argue that segregated education can provide a more comfortable and safe environment where children can learn at their own pace. However, as mentioned, there is a need to raise awareness about the benefits of inclusive education in terms of promoting integration and support for all students.

Such choices depend on individual circumstances and the best interests of the child and their family and may reflect the state of inclusive education in particular settings. For example, 140,000 out of 250,000 children in Russia who are reported as participating in ‘inclusive education’ are in fact being educated in segregated classrooms within schools or are in home-based learning, with a similar situation in Serbia. In Kazakhstan, an estimated 66 per cent of children with disabilities are receiving low quality home schooling that consists of two visits each week.


110 UNICEF and UNDP, Family-type Care vs Residential Care Costs: An analysis of the recent developments in government expenditure and the costs per child in family-type care and residential care (Moldova), ECORYS, Rotterdam, The Netherlands, 2022.


112 Ibid.


114 Hanssen and Erina, ‘Parents’ views on inclusive education for children with special educational needs in Russia’.


The Serbian report also found that Roma children were over-represented in special educational settings, with the analysis suggesting that children in special schools could be easily accommodated in regular education. A survey carried out in 2016 in nine EU member states shows that 33 per cent of Roma children were attending schools in which most other pupils were Roma, and 13 per cent were in Roma-only schools. Segregation also occurs within mainstream school premises, where Roma children can be assigned to separate classes and excluded from common playgrounds or dining halls.\textsuperscript{117}

\subsection*{4.4.3 Family support and community-based services}

In many countries, in particular those that were once part of the USSR, boarding schools have continued to be used to provide alternative care to children who are at risk of family separation as a result of neglect, abuse, family violence, alcohol or drug abuse by parents, as well as the children of parents with disabilities. If the child protection authorities do not have kinship carers, or enough foster carers, the children are placed in boarding schools. Many go to general boarding schools, but some are placed in special residential schools even if they do not have special educational needs, are only in need of alternative care, and if there is such a school nearby.

Yet studies to calculate the extra costs of disability have shown that taking the different consumption of households with children with disabilities into account can help to build more inclusive social protection systems\textsuperscript{118} that can, in turn, support families and the participation of children in community-based inclusive education. A continuum of family support services, underpinned by a case management system, is required in the community to address the drivers of placement into residential boarding schools. The Guidelines for the Alternative Care of Children make it clear that governments should make every possible effort to ensure that children do not enter any kind of alternative care unnecessarily.\textsuperscript{119} The handbook for implementing the Guidelines\textsuperscript{120} provides a range of examples of family support services that can help to ensure that children are not placed into boarding schools. These services can include, but are not limited to the following:

- \textbf{Support for families where parents or children have disabilities}, including early intervention services; parent training programmes; short-break services; personal assistance services; rehabilitation services such as speech and occupational therapy, assistive devices and home remodelling; support with


\textsuperscript{119} United Nations General Assembly. Guidelines for the Alternative Care of Children (2010)

\textsuperscript{120} Cantwell, Nigel, Davidson, Jennifer, Milligan, Ian, Quigley, Noah, Centre of Excellence for Looked After Children in Scotland (CELCIS), \textit{Moving Forward: Implementing The Guidelines for the Alternative Care of Children}, Glasgow.
transport; and inclusive social protection policies and programmes that address the extra costs of disability and support inclusion and participation.

- **Support for families living in poverty** where there are risks to the child of separation, abuse, violence and neglect. This may include evidence-based interventions, such as active family support services, parent training, family mentoring schemes, case management, home visits by social workers, counselling and mental health services, treatment programmes for substance and alcohol abuse, social protection programmes and support for skills training and employment.

- **Support for families in minority communities or remote areas**, including support with transport to access schools nearby whenever possible, mobile outreach services (for example early intervention, libraries and toy libraries), and inclusive social protection policies and programmes.

### 4.4.4 Alternative family based care

Kinship and foster care are important parts of the continuum of services that can help to prevent the use of boarding schools for children who need alternative care. Kinship care has always played an important role in the provision of alternative care in the ECA region, and the use of foster care has increased notably in Belarus, Bulgaria, Georgia, Moldova and Russia since 2010. However, concerns about the quality of foster care and a reduction in the number of available foster families in some countries makes it imperative to continue to strengthen this part of the continuum of care. The countries of central Asia have developed foster care to only a very limited extent, which means that there are greater challenges in achieving deinstitutionalization in this part of the region, including the closure of boarding schools.

Although data are limited, children with disabilities continue to be under-represented in kinship and foster care placements in many countries where data are available. There are however, some signs that children with disabilities may be starting to have slightly better access to family-based care in some countries.

The United Nations General Assembly decision on children without parental care in 2019 emphasises that family-based alternative care, including foster care, should be available for all children, including those with disabilities. UNICEF’s 2024 White Paper on foster care sets out recommendations for countries in the ECA region on different types of foster care and how governments can ensure that foster care and other types of family-based care are available to meet a range of children’s needs.

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122 Ibid.

5. Conclusions and recommendations

5.1 Conclusions

The countries of the ECA region have a long history of using boarding schools to cater to diverse populations, but the practices and definitions of boarding schools vary across the region. The evidence gathered for this White Paper confirms the need to uphold the fundamental rights of every child to grow up in a loving family environment and receive a good education in their own community. However, the evidence also suggests that children in the region are often denied these rights, with numerous examples of children being placed in boarding schools far away from their families and communities for extended periods, which can result in a loss of contact and increased vulnerability to abuse.

The varying definitions of boarding schools in the region make it challenging to establish their precise role. While they may offer certain advantages, such as specialised facilities and access to education, they are also used to provide segregated education for children with disabilities, which contravenes the Convention on the Rights of People with Disabilities, and their potential negative effects on children’s relationships, communities, and long-term development have not been adequately assessed.

Several factors contribute to the continued and inappropriate use of boarding schools, including: rural depopulation, poverty, lack of (or poorly implemented) inclusive education, and the stigma and discrimination faced by children with disabilities and other marginalised groups. This situation is exacerbated by the lack of community-based services, gatekeeping and coordination among stakeholders.

To address these challenges, some countries in the region, like Moldova, have closed all of their boarding schools or are working to do so. In some countries of the Western Balkans, boarding schools have been transformed into resource centres for inclusive education and other community-based services. However, other countries, like Azerbaijan, are seeing an increase in the use of boarding schools, including schools for so-called talented children, for children living in poverty, and military boarding schools.

The successful closure of boarding schools, as seen in Moldova, can be attributed to inter-sectoral and multi-disciplinary collaboration, political commitment, and strategic leadership at all levels. Although the closure of boarding schools requires investment in the establishment of community-based education and social services, it offers significant social and financial benefits for the country in the long run.

Experts agree that policies related to boarding schools for vulnerable children in the ECA region need to be revised. They emphasise the need to implement inclusive education and care, and to promote the transition from institutional to family-based care for children who need alternative care. They also agree that discriminatory views and practices must be challenged, and that implementation challenges must be addressed.
All the evidence confirms that children without parental care or from socially vulnerable families should never be placed in boarding schools. Poverty, lack of parental care, or any kind of family dysfunction are never valid criteria for admission into boarding schools.

The White Paper has also noted that children with disabilities and other disadvantaged children are over-represented in boarding school populations, and that many of them either receive poor-quality care and segregated ‘specialised’ education, or no education at all. While a number of common themes have emerged in this review, such as the need for consistent data usage, classifications, standards, and safeguards, it is important to recognise that each country is at a different stage in its development of inclusive education, childcare system reforms, deinstitutionalisation of alternative care and the strengthening of its child protection system. Country-specific strategic coordination platforms are, therefore, crucial to advance this agenda.

The review suggests that boarding schools should be classified as providers of care and education, given that the provision of care is a significant part of their mandate. This classification would enable their inclusion in national strategies and plans for inclusive education and deinstitutionalisation as part of the continuum of childcare services, alongside other forms of residential care. Broadening the deinstitutionalisation agenda in this way would free up much-needed resources that could be invested in strengthening family and community support and inclusive education. This requires a coordinated, cross-government approach that ensures comprehensive reforms across all levels and sectors of government, as well as transparent financial arrangements.

The White Paper emphasises, therefore, the need for the clear classification and evaluation of boarding schools, prioritising children’s welfare and accountability. It indicates the critical importance of promoting inclusive education and family-based care, challenging discriminatory views, and raising awareness among parents as well as policy-makers, managers and professionals. Effective change can be enabled by using evidence-based approaches, addressing implementation challenges (including workforce capacity), committing to amending laws and regulations, strengthening partnerships, and allocating resources appropriately.

Boarding provision is rarely appropriate for younger children under 13 years. Children without parental care should not be placed in boarding schools. If they are in stable and nurturing family-based alternative care placements, then it is possible that boarding school could be used in the same was it is used for children in parental care. However, there is a growing recognition of the importance of close relationships for child development, particularly in the early years, and the risk of exposure to violence and abuse for all children in residential care settings, including sexual abuse, and the certainty of structural violence towards children with disabilities.

For older children who have no schools in their communities, boarding schools can have a useful role within a comprehensive education and child protection system if their use is part of a plan that aims to meet a child’s wider developmental needs and identified educational goals and to increase the capacity of their family to care for them at home.
However, such placements should be determined and monitored by a multidisciplinary gatekeeping panel to ensure that it is the most appropriate educational and care provision for each child, and minimum standards and governance mechanisms should be in place to guide decision-making about placements.

The priority should be to limit the use of boarding schools in the ECA region and to ensure the creation of national inclusive education services, family support and family-based alternative care, as demonstrated in Moldova. Given however, that countries are at different stages of implementing deinstitutionalisation and inclusive education reforms, and that boarding schools continue to form part of national education systems, it is necessary to establish clear standards to ensure the quality of children’s experiences in boarding schools, and to protect them from the risk of abuse and violence, including sexual violence.

Standards should be enforced through inspections and accountability mechanisms, and policies and services should prioritise family reintegration and inclusion into mainstream education for all children, including children with disabilities, complex medical needs and challenging behaviour. Rigorous assessment processes are essential, as are effective gatekeeping measures, and the regular monitoring and review of access to boarding schools by inspectors and representatives of parents and child protection authorities. It is also important to study innovative projects that have led to the closure of boarding schools or the removal of specific groups of children from such schools to identify key themes and lessons learned.

In conclusion, the review highlights the need for collaboration and engagement with stakeholders, together with a joint approach that spans care, education, health, and other sectors to plan wider system reform processes. Discriminatory views and practices must be challenged, and efforts should be made to enhance parental involvement, child participation, and e-learning as cost-effective alternatives for vulnerable groups of children. The reclassification of boarding schools as providers of care as well as education within the continuum of childcare services would facilitate their inclusion in national deinstitutionalisation strategies and plans. Boarding schools should also be targeted within inclusive education strategies and plans to prevent placements and ensure the systematic development of inclusive education provision nationwide.

This broader agenda would allocate resources to strengthen family and community support and inclusive education for all children. A coordinated, cross-government approach, encompassing reforms, budget allocation, and attitude changes, is necessary to achieve these goals.
5.2 Recommendations

The recommendations from this report provide a roadmap for the implementation of comprehensive changes in the boarding school system, the promotion of inclusive education and support for families, and measures to address concerns and challenges associated with boarding schools for vulnerable children, particularly in relation to the segregated education of children with disabilities or from other marginalised groups.

An inter-country reference group should be established to support learning and provide valuable insights from research and from successful and unsuccessful practices. This would foster cooperation among multiple countries, enhance overall understanding, and help to drive progress in addressing the issues surrounding boarding schools for vulnerable children.

The development of regional exchange and a common approach

Governments across the Europe and Central Asia region should review their boarding school systems and design strategic plans to reduce their use of and reliance upon such schools for vulnerable children. These reviews should include regional and international collaboration to achieve the following.

- Establish common classifications of boarding schools and alternative care settings, and to include boarding schools for vulnerable children in the continuum of alternative care services.
- Reach agreement on common standards and principles for safeguarding children in boarding schools and ensuring inspection of services.
- Conduct deep-dive exercises in specific countries and evaluation of pilots to determine what works and why.

Recommendations for national governments

- Recognise boarding schools as part of the continuum of alternative care, regulate them as social care and education providers, and include them in deinstitutionalisation and child care system reform policies and programmes, as well as in inclusive education reforms.
- Ensure effective collaboration across sectors and budgets (as well as a shift in attitudes where necessary), at different levels of governance, and involve all stakeholders in design and decision-making processes, particularly children and parents.
- Revise policies at all levels to align with the principles of inclusion, family-based care, and safeguarding.
- Implement comprehensive solutions that are informed by evidence-based practices, including the allocation of adequate resources, the implementation of inclusive education and family and community-based care, the raising
of awareness, the establishment of assessment tools, and the monitoring of progress.

- Develop inter-agency gatekeeping mechanisms, common assessment frameworks and case-management practices to stop placing young children in boarding schools, and consider community-based inclusive education and care alternatives before such placements.

- Develop a well-trained workforce, including social workers, teachers, psychologists, carers, medical disability assessors, and other professionals, to support inclusive practices. This involves using up-to-date and evidenced-based knowledge to re-educate the workforce to understand the social and rights-based model of disability, which focuses on eliminating environmental barriers and ensuring full societal participation.

- Develop the full continuum of services, starting with early intervention, family support, inclusive education, assistive devices and technology, and family-based alternative care.

- Strengthen inclusive education, utilising technology to support teachers’ skills for remote education, particularly for primary aged children.

Undertake cost-benefit analyses of various types of boarding schools to identify the ratios of their care and education budgets and support the case for redirecting resources towards inclusive education in the community and family support services.

Gradually decrease the number of boarding schools and redirect released resources, including the workforce, to strengthen inclusive education and community-based services.

Ensure that existing boarding schools have quality frameworks, standards, inspection monitoring and evaluation, and complaint mechanisms. All types of boarding schools must be regulated and inspected for their social care component, as well as the education they offer.

- Develop a comprehensive model and standardised tools to identify, assess, plan and review the specific needs of children in boarding schools.

- Conduct public awareness campaigns and evaluate and promote the effectiveness of inclusive practices through research.

- Promote child and parent participation in service provision, including the evaluation of services received. Their involvement in decision-making processes is key, as is their assessment of the success of any changes made.

In achieving any change, it is crucial to bring the boarding school sector itself into the debates and discussions to reflect their perspectives on these issues.