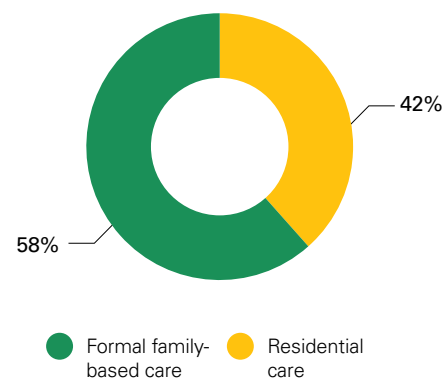
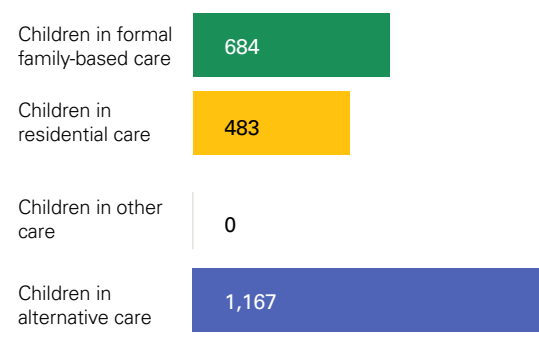


Slovenia

<p>● No</p> <p>● Yes</p>	<p>Red indicates that the variable is not collected or the statement not true, green that it is. If no information was found about any of the points in the overview for the particular country, the points are removed on the page for that country.</p>	<p>● Children in formal family-based care</p> <p>● Children in residential care</p> <p>● Children in other care</p> <p>● Children in alternative care</p>
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Total number of children in alternative care¹

● All children in alternative care covered



Headline statistics²

The rate of children aged 0-17 in alternative care at a specific point in time (per 100,000)	324
The rate of children aged 0-17 in residential care at a specific point in time (per 100,000)	135
The rate of children aged 0-17 in formal family-based care at a specific point in time (per 100,000)	188
The percentage of children aged 0-17 in residential care (of the total number of children in alternative care) at a specific point in time	41.8%

Country system	Data system
● Decentralised alternative care and data system	● Recent or current reform of data system on children in alternative care
● Data on alternative care published ³	● Data collected per individual child
● Is the data system on children in alternative care covered in legislation?	● Personal identification numbers used
● Is the overarching term, in line with 'alternative care', used in legislation?	● More than one agency mandated to collect data
	● Data collected on quality of care and outcomes

Variables collected on

<input type="radio"/> Age	<input type="radio"/> Reason for entry into care
<input type="radio"/> Sex	<input type="radio"/> Placement decision maker
<input type="radio"/> Unaccompanied minor status	<input type="radio"/> Reintegrated with family
<input type="radio"/> Statelessness	<input type="radio"/> Adopted
<input type="radio"/> Disability status	<input type="radio"/> Leaving care due to death
<input type="radio"/> Parental status	<input type="radio"/> Age on leaving care

Residential care

<input type="radio"/> Official maximum number of places in a small group home
<input type="radio"/> Official maximum number of places in largest type of residential care facilities
<input type="radio"/> Data collected separately for small group homes and large institutions
<input type="radio"/> Data collected on length of stay
<input type="radio"/> Data collected on number of staff and their qualifications

Helpful examples

In 2017, the Council of the Republic of Slovenia for Children and the Family was established. It is a permanent consultative body of the Government of the Republic of Slovenia, whose members are representatives of non-governmental Organisations and professional institutions in the field of children and families and representatives of the Government of the Republic of Slovenia. The Council discusses any issue about children's rights and family policy, including statistical results.

Room for improvement

The Statistical Office of the Republic of Slovenia (Statistični urad Republike Slovenije, or SURS) collected and published data on children in institutional care until 2014. From then onwards, the Ministry of Labour, Family, Social Affairs and Equal Opportunities has collected the data from administrative sources but the data are not publicly available.

Source: The DataCare project, 2021.

Endnotes

- 1 Foster care data are from December 2017, source <https://www.irsv.si/index.php/baza-podatkov-o-otrocih> (accessed August 2021). The rest are from 2014 (as they are no longer made public), from the website of The Statistical Office of the Republic of Slovenia (Statistični urad Republike Slovenije), and no data are provided for small group homes and crisis centres.
- 2 Calculated by the DataCare project team using, where relevant, country-specific population statistics from the UNICEF Data Warehouse. Source: https://data.unicef.org/resources/data_explorer/unicef_f/?ag=UNICEF&df=DM&ver=1.0&dq=.DM_POP_U18...&startPeriod=2010&endPeriod=2020.
- 3 Some data on children in alternative care were published until 2014. Since then, such data has had to be requested.