DEVELOPING ALTERNATIVES TO INSTITUTIONAL CARE IN MONTENEGRO

Recently, the Council of Europe's Committee for the prevention of torture and inhuman or degrading treatment or punishment (CPT) Report has given visibility to the situation of children in Montenegro’s residential institutions and in particular in Komanski Most.

UNICEF calls for accelerated efforts to transform the existing system of residential institutions into a continuum of community-based alternative social services. The goal of a modern, caring and quality-driven child care system that delivers family and community-based social services is attainable for Montenegro, but requires a concerted “push” and broad based support. Only a family-based, rather than institutional-based approach can offer better quality of care for children with disabilities and/or children without parental care, and guarantee more efficient use of resources.

Alternative community-based services are under development in all countries of South-East Europe. Reforming the child protection system became an important milestone on the path to EU membership in the last wave of enlargement, and will continue to be high on the agenda in the accession process.

Detrimental effect of institutional care

Fifty years of research demonstrates that children in institutions will not develop in the same way as children living in families. Normal child development requires frequent one-to-one interactions with a parent. While a socially-rich family environment promotes infant brain growth, an impoverished environment has the opposite effect and will suppress brain development. The child’s lack of opportunity to form a specific attachment to a parent figure is a typical feature of residential care. Research has demonstrated that young children who are institutionalised during the first 6 months of their lives suffer long-term developmental delay, leading to a greater probability of antisocial behaviour and mental health problems. Moreover, young children who have experienced residential care after the age of 6 months, as an emergency measure, have been found to be more likely to recover once they have been placed in a caring family environment.

This is why it is recommended that no child under the age of three years should be placed in a residential care institution. Child placement, in any kind of institution, should be a last resort and for the shortest time possible.

Institutional care costs more than community based alternatives

Institutional care has been shown to cost on average three times more than foster care. The EU and the WHO funded a survey¹ on the costs of institutional and foster care among EU

¹ Kevin Browne and colleagues, 'A European Survey of the number and characteristics of children less than three years old in residential care at risk of harm'. Adoption and Fostering Volume 29 number 4, pp 23-32, 2005
countries in 2003. The average annual costs in 2003 for a child without disabilities and aged under three years were 41,051 euros for residential care and 13,124 euros for foster care. For a child with disabilities of the same age, the average annual costs were 43,017 euros for residential care and 30,998 euros for foster care.

Alternatives to institutional care

Can the placement in residential care ever be in the “best interest” of the child? Institutions were not established for children needs, but rather to respond to adults’ inability to care for them. However, it is only when family-based care alternatives are created that placement in residential institutions can realistically become the measure of last resort. Quick closure is dangerous as it may further harm the children if the transition is too rapid and the children’s needs are not considered as a priority. Closing down residential care depends upon finding alternative placements for all residents and preventing further admissions.

Alternative services for children at risk can be divided into family assistance services (Day Care Centres, home based care, psycho-social support, legal aid) and family substitute services (kinship, foster care, adoption, institutional care including small family type-homes).

Day Care Centres for prevention of family separation

Day Care Centres have been introduced successfully in South Eastern Europe. In particular, FYR Macedonia has established a network of day care centres throughout the country.

In Montenegro, Day Care Centres did not exist until 2004, when UNICEF supported the Ministry of Labour and Social Welfare and the municipality of Bijelo Polje to set up the first Day Care Centre for children with disabilities. The children benefit from a therapeutic environment during the day with professional support. At the end of the day, and at weekends they return to their families. Families that would have considered institutional care are still able to work and benefit from a loving relationship with their child. Creating a day care network in every municipality throughout Montenegro will prevent separation of children with disabilities from their families and create more possibilities for them to develop to their full potential and to participate in the life of the local community. Parents’ Associations together with local and national authorities have been working intensively to establish Day Care Centres in Niksic, Pljevlja and Berane and beyond.

People and organizations wanting to help children with disabilities should donate their funds and time to inclusive education, and/or to establishing or maintaining a day care centre in their municipality.

Family substitute services – kinship, fostering

When relatives become guardians, live with the child and may receive financial support from the state for child’s maintenance costs, this is a case of kinship care. In Romania, several thousands of children are in kinship care.
When non-relatives – couples or individuals – are recruited, selected, trained and receive financial allowances for their work and the child’s maintenance – it is an example of fostering. While fully caring for the child, the foster parents do not replace biological ones, but rather support them. The biological family of the child placed in substitute care must remain an “open case” for social services.

Croatia is a good example of where foster care is available to children without parental care and for children with disabilities. It is essential to create public support for fostering and mobilise funds to support it. Campaigns “Every child needs a family” and “A children’s home is not a home” developed in Croatia and Romania have had a strong impact.

**Services for prevention of abandonment of newborns, including with disabilities**

There is a need to raise capacities of health workers so they can provide adequate support to parents of newborns with disabilities, and vulnerable parents starting from maternity wards. In this context, the “baby friendly hospital initiative” needs to be expanded across Montenegro to cover all maternity wards, and to go beyond breastfeeding promotion. A package of services needs to be developed including provision of information on the detrimental impact of institutional care on the young child, and education for parents of children with disabilities and parents at risk of abandoning their infants. UNICEF stands ready to support this.

**Small Group Homes**

A small group home is an alternative for children placed in institutions or for those at risk of being institutionalised. It provides a family-type environment for children who are temporarily without suitable parental care. It does not replace the child’s right to live in a family, as it is a transition placement until the child can return to the biological family or be successfully fostered, adopted or live independently.

With UNICEF support, individual assessments, care and treatment plans for all 10 children in Komanski Most have been developed to improve their social skills and prepare them for the movement into Small Group Homes. Two Small Group homes will be built in Danilovgrad with the support of the US Embassy in Montenegro. They will offer Komanski Most children the necessary support to develop to their maximum potential, have relationships with their peers and be integrated into the community.

In conclusion, it is important for governments and local communities to realise that the resources currently invested in the 24-hour institutional care of children can be better invested – in family support, day care, specialist care, education, and support and shelter for vulnerable parents and their children.

This article is submitted by UNICEF Montenegro, headed by Noala Skinner. Arguments put forward are based on published resources. March 2010.