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Romanian Child Welfare Reform: Progress on Deinstitutionalization

### Abstract

This paper presents the findings of a focus group comprised of Romanian county officials who participated in U.S. based study groups designed to support implementation of child welfare reform legislation aimed at improving the lives of thousands of institutionalized children and those at risk of abandonment. Concerns and implications for future success based on findings from the focus group are discussed in terms of factors that support efforts to move children out of institutional settings and prevent more children from entering them. Such factors include adequate resources, leadership, changes in legislation, support from nongovernmental agencies and involvement of key stakeholders.

### Romanian Child Welfare Reform: Progress on Deinstitutionalization

In order to produce more workers for the state, the Romanian dictator, Nicolae Ceausescu, implemented a pronatalist policy in 1966 that banned the use of contraception and abortion. He launched his campaign to increase Romania's population from 23 million to 30 million by the year 2000 by proclaiming that the fetus is the "property of the entire society...anyone who avoids having children is a deserter who abandons the laws of national continuity" (Breslau, 1990). By law, Romanian women of childbearing age with large families received a monetary bonus but those with less than four children were taxed. If parents found that they could not provide the care for all of their children, the state readily accepted them for placement into institutions. Severe economic measures imposed during the 1970's and 80's as a result of Ceausescu's resolve to repay all foreign debt created food scarcity, energy shortages, and widespread national poverty. Without community-based childcare alternatives or civil society involvement, impoverished families were encouraged by the medical establishment to place their children in institutions. Legislation existed that outlined conditions for institutionalization and are described in the following excerpt (Kligman, 1998).

Those whose parents are dead, unknown or in any other situation leading to the establishment of guardianship; if they have no goods or other material means and there are no persons who are obliged or who can be obliged to maintain them; those who, being deficient, need special care that cannot be provided in their family; those whose physical, moral, or intellectual development or whose health is endangered in the family; those who have committed [delinquent] acts or whose behavior contributes to dissemination of vices and immoral habits among minors

(p. 85).

By the time of Romania's revolution in late 1989, there were over 700 institutions across the country populated by nearly 170,000 children (Rosapepe, 2001). Some of the first images the world received from Romania following the overthrow of Ceausescu were those of the "orphans" created by a draconian approach to increasing the country's population.

#### *Negative Effects of Institutionalization*

The negative effects of institutionalization on children are well documented in an extensive review of the literature by Groze & Ileana (1996). Of particular note is Macovei's series of studies comparing a random sample of rural, urban and orphanage children at age 3 and found global delays among the institutionalized children that included physical delays (smaller height, weight, circumference of head and less resistance to illness), lags in intellectual and psychological functioning and decreased motor, living and social skills. Johnson confirmed these findings through a study of 65 children who were brought to the U.S. in 1990 (as cited in Groze & Ileana, 1996). In their review of the literature on this issue Cermak and Groza (1998), found that maternal and environmental deprivations experienced by children in institutions result in delays in physical, emotional, social and intellectual development. Negative effects on social relations, cognitive and language development were also noted along with increasing recognition that inadequate developmental interaction can result in children's inability to regulate themselves to sensory stimuli. Through their own investigation of the effects of deprivation on processing of sensory information, Cermak and Groze (1998) found that children who are institutionalized at early ages are likely to have difficulty with sensory

integration. Signs of such difficulty include being overly sensitive to touch movement, sights or sounds; high distractibility, under-reactive to sensory stimulation; coordination problems; delays in pre-academic or academic achievement or activities of daily living; impulsiveness; difficulty anticipating the consequences of actions; difficulty adjusting to a new situation or following directions; difficulty with transitions resulting in frustration, aggressiveness or withdrawal when encountering failure. Additional details on the negative impact of institutionalization on children in Romanian may also be found in Buzducea et al. (1997), *Toward a Child-Centered Society: A Report of the Institute for the Research of the Quality of Life*.

#### *Legislative Change in Romanian Child Welfare*

In June of 1997, the Romanian government passed legislation concerning children's rights related to the organization of services (HG205/1997); adoption (OU25/1997); and the protection of children in difficulty which addressed substitute care including fostering (Dicken, 1999). These decisions were intended to change the way in which child welfare and child protection services are organized, managed and delivered. Most notably, the new legislation focused on promoting local initiatives and decision making in serving children by transferring the authority and funding for child welfare institutions and services from national ministries to county commissions for child protection and county departments of child welfare services. The new laws were designed to encourage community initiatives focused on transforming institutions into alternative residential and non-residential services and to develop collaborations between governmental and non-governmental organizations. The laws emphasized the need for alternative out-of-home placements in the form of group homes, foster care and adoption

for children who were institutionalized. At the time the laws were passed over 100,000 children were residing in institutions including 45,000 children in institutions for child protection (World Learning/TRANSIT-Europe, 1997). Dicken (1999) provides the following description of the impact of the new legislation:

The radical nature of these reforms should not be underestimated in a country where social work has only been reestablished as a profession since 1990, after twenty-five years of abolition under Ceausescu's communist dictatorship; where popular—and often professional—perceptions about adoption are dominated by ideas about a 'clean break' with the birth family; where foster care is still dominantly seen as a stage in the adoption process or as a permanent measure for extended family care, not as a part of a service to support birth families and work towards reintegration (p. 139).

The United States Agency for International Development (USAID), in an effort to address child welfare and child protective service needs in Romania, funded several U.S. based training programs designed to prepare county level officials and administrators of county child protection directorates for their role in developing and sustaining social services for children and decreasing the unnecessary institutionalization of children. The overarching goal of the training was for participants to understand and apply to the Romanian setting a community-based, family-centered child welfare system with shared authority between the local and national governments. Specific study program objectives were developed via collaboration with the Romanian Secretary of State for Child Protection at the time, the USAID program officer and consultants from a nongovernmental organization involved in child welfare efforts in Romania (B.T. Davis,

personal communication, December 18, 2002). The study described here is an effort to explore the study group participant perceptions regarding the progress they have experienced within their counties as they have worked to move away from a longstanding reliance on institutions for the care of children.

### *U.S. Study Programs*

The study programs designed for the participants included a range of learning objectives focused on helping participants envision and contribute to the development of a community-based, family-centered child welfare system. To accomplish this, the study programs provided a wide range of learning opportunities that included exposure to models for strengthening the family as a child care system and approaches to transforming child care institutions (orphanages) into community-based, family-centered programs. Participants in the study programs were also involved in learning about standards for child welfare services, management information systems, private-public partnerships, and advocacy for policy change. Each of the study programs included a visit to Washington, DC and scheduled appointments with personnel at the U.S. Children's Bureau, the Child Welfare League of America, and the Children's Defense Fund. Participants then traveled to Illinois where they visited public child welfare agency administrative and field offices along with private sector agencies. Throughout the programs, participants were provided ample opportunity to meet and discuss their thoughts and reactions to the site visits and presentations they experienced. Through this experience they became acquainted with how the child welfare system works within the United States with a special emphasis on the relationship between the judicial and social service systems in meeting the needs of children and families and the differences in

philosophy between child protection agencies and child welfare agencies.

By the conclusion of their study programs, participants in the USAID sponsored programs were required to develop individual and group action plans for how they might use what they had seen and discussed in the United States. A sound action plan was defined as being one that has a least one stated goal and a strategy along with target dates and identification of needed resources. The study programs were expected to help participants to produce action plans that would lead the development of child welfare programming and oversight in response to the new child protection legislation that would aid in reducing the numbers of children in institutions and prevent more children from entering them.

## Method

### *Design*

The investigator received a Fulbright Scholarship to teach and conduct research in Romania. The research project involved contacting members of 1997 and 1998 USAID-sponsored training programs in order to invite their participation in a focus group designed to obtain their perspective on progress made in the deinstitutionalization of children. The researcher was provided the opportunity to meet with members of both study groups in April of 2001. Present at the meeting were 18 study group participants representing 10 of Romania's 41 *judets* (counties). A focus group format was combined with having participants write out responses to a series of questions developed for the meeting. The combination of focus group discussion and use of written responses was chosen as a method for data collection due to time limitations and the need for the researcher to rely on the efforts of a translator.

The option to participate in the focus group discussion and to prepare written responses to the focus group questions was offered to all participants of the 1997 and 1998 study programs. The opportunity to convene the focus groups was made possible through its inclusion in the agenda of three day meeting of county secretaries, directors of child protection, a representative of the National Agency for the Protection of Children's Rights (NAPCRA), and representatives of nongovernmental agencies involved in child welfare reform efforts. The meeting was convened at a mountain retreat near Belis-Fantanele in the northern Romanian county of Cluj. The focus group discussion was held on April 24, 2001.

Prior to the meeting, a list of potential focus group questions was developed based on a review of the expected outcomes of the study groups and the action plans that the participants had developed at the conclusion of their study programs. Two individuals who had significant involvement in the study programs then reviewed them. One individual had been a representative from the national level in the 1997 study program and the other had been instrumental in developing the study program objectives. Based on their consultation, the focus group questions were revised to encourage richer discussion of key areas of interest.

The focus group meeting centered on two major areas of discussion. The first area of discussion was prompted by the researcher's request that the participants in the group describe their progress in *reducing the number of institutionalized children* in their county. The second area of discussion was initiated by the facilitator's request for participants to describe the progress in their county related to *preventing institutionalization*. In the course of the focus group meeting, the participants were asked

to also describe both what they saw as *aids* to progress made in actual deinstitutionalization of children and in prevention of institutionalization. They also were asked to describe the *barriers* to progress in both areas.

Lacking fluency in Romanian, the investigator relied heavily on the efforts of a translator who spoke to the group about the purpose of the study and communicated general information about how the focus group session would be facilitated. The actual facilitation of the session was handled by a staff member from a nongovernmental organization who was acquainted with all focus group participants and who was very familiar with the role of the study programs in supporting the implementation of the child welfare legislation that transferred the responsibility for children in institutions to local authorities. During the course of the two-hour discussion, the translator used shorthand to collect responses to questions that she later translated. The responses were reviewed by the facilitator for accuracy and clarification. As mentioned earlier, focus group members were also encouraged to write out responses to questions to further ensure accuracy in translation and understanding.

Following transcription and translation, the researcher reviewed the transcripts with a Romanian child welfare expert who had been present at the meeting and who had participated in the 1997 U.S. based training group as a representative of the National Agency for the Protection of Children's Rights (NAPCRA). This was done to insure that the transcriptions were an accurate representation of focus group proceedings.

### *Data Analysis*

A transcript of the group discussion and the individual written responses for both questions were analyzed using an approach to managing qualitative data described by

Coleman and Unrau (1996). This approach emphasizes beginning data analysis by looking at smaller units in order to identify broad themes, and ultimately to develop theory. In this case the theory developed relates to what must be done to successfully develop alternatives to institutional care for children in Romania.

### *Participants*

The focus group participants included individuals who had actually participated in either the 1997 or 1998 U.S. based child welfare training programs. Six of the participants were executive level county administrators. In this role, the county secretaries, as they are known, were targeted for inclusion in the study programs because of the change in child welfare legislation that emphasized local initiatives and local authority, responsibility and funds for child welfare institutions and services from various national ministries to county administration. For these individuals the study programs represented an opportunity to learn how local administration of child welfare services could be carried out in order to realize the intent of the legislation. The other nine participants were executive directors or staff members of county departments of child protection that bear the responsibility for overseeing the transformation of institutions into alternative residential and non-residential services to better serve the needs of children who are institutionalized. Of particular focus for both groups were the 45,000 children who were in institutions for child protection.

## Results

### *Progress in Reducing the Number of Institutionalized Children*

All participants reported significant reductions in the number of institutionalized children during the period from mid-1998 to early 2001. Reductions reported by the 10

counties represented at the meeting ranged from 20% to 60% of institutionalized children from age 0-18 years.

*Factors That Aided in Reducing the Number of Institutionalized Children*

*Legislative change.* An analysis of the written and focus group responses showed that participants perceived that reducing the numbers of institutionalized children was *aided* by a variety of activities. One major category of actions that emerged was that of legislative change that served to decentralize control of child protection institutions by placing them under the direction of county and local government. Legislative reform also included the establishment of the CCPD to support coordination of child protection programming, and the creation of “National Interest Programs” focused on preventing child abandonment and supporting families in their efforts to parent their children.

*Professional development.* A second major category of activities identified by participants as critical in the deinstitutionalization efforts was that of the professional development of both child protection personnel and of county officials responsible for implementing and overseeing activities required for making decentralization of child protection services a reality. Several participants remarked on the helpfulness of the child welfare training program that took place in the U.S. during November 1997.

*Continuum of services.* The development of a continuum of services was clearly identified as a major aid to deinstitutionalization. Based on participant discussion, cooperation with nongovernmental organizations was a major factor in the development of the continuum of services. Services identified by participants as being most helpful included those focused on moving children out of institutions and offering alternatives to institutional care. Participants identified the professional reassessment of children who

were residing in placement centers and setting up a professional maternal assistant network (foster care) as major contributors to deinstitutionalization. Participants also noted the development and expansion of services such as counseling, material support to families, daycare centers and maternal centers as being very helpful in efforts to bring children out of institutions. They also noted the increased viability of adoption.

*Resources.* Another category that emerged from participant discussion of aids to moving children out of institutions was resources. Responses related to this category included identification of material support for families from the government, support from non-governmental agencies, and a developing network of employees with social work training to implement institutionalization prevention programs.

*Leadership.* Leadership emerged as a final major category related to aids in deinstitutionalizing children. Responses focused on leadership at both the community and county level. Of great significance was the perceived support offered by county councils in implementing objectives related to child welfare reforms. Participants also identified an important correlation between county and local leadership and increased levels of community awareness and involvement.

#### *Factors Identified As Barriers In Reducing The Number Of Institutionalized Children*

An analysis of focus group and written responses showed that participants perceived that there were a number of significant *barriers* to reducing the numbers of institutionalized children in their respective counties.

*Poor Economy.* Romania's poor economy was the first major category of barriers that emerged. Participant described decreasing living conditions as a major obstacle for families in raising their own children. Increased poverty as a result of the increase in

unemployment due to the shut down of major employers in some regions has contributed economic difficulties for many families and made them increasingly more reliant on the state for assistance in providing for their children. Concern about maintaining employment among employees in institutions has led to resistance to change in due to fear of losing their workplace. Added to this is what participants identified as lack of a motivating wage system to recruit maternal assistants (foster parents) and therapists trained in child and family counseling.

*Perception of the state's role.* Perceptions of the state's role in the care of children emerged as a second major category in the participant responses related to barriers. Throughout Ceausescu's dictatorship the state provided a range of social services with institutionalization being the overarching solution to caring for children if parents were unable. (Kligman, 1998). According to responses from focus group participants the belief that the state must be the primary caregiver for children in need persists among many people.

*Lack of key stakeholder involvement.* A fourth category that emerged in the analysis of participant responses related to barriers was lack of involvement and cooperation by key stakeholders. Participants described cases in which community leaders chose not to get involved in child welfare reform efforts despite expectations that they do so. They also pointed to lack of involvement by other types of systems and institutions that also have responsibilities for the well-being of children in the areas of education and health services.

*Communication.* Communication as it related to the media and difficulties associated with information sharing also emerged as category in the discussion of barriers.

Participants cited difficulties with a media approach that tends to feature sensational news articles about institutionalized children as one such barrier. Other types of communication-related barriers included insufficient information provided for public administrators at the local level regarding their new child protection responsibilities. Another difficulty related to the sharing of information identified was as the lack of a system for sharing information in rural communities related to child protection.

#### *Progress In Preventing Institutionalization*

*Development of child placement alternatives.* Participants typically described progress in preventing institutionalization by describing the development of child placement alternatives. The development of a network of maternal assistants (foster parents) and a national network of potential adoptive families, increased emphasis on placing children with extended family, and the availability of material supports for biological families represented indicators of progress in the effort to prevent institutionalization.

*Preventative services.* Participants also described the development of preventative services intended to reduce the risk of child abandonment to the streets or to institutions. Such preventative services include counseling for individuals and families at risk of abandoning their child. Participants also identified the establishment of Maternal Centers where single mothers can stay for a period of time as they learn to care for their child and identify employment opportunities.

*Monitoring families at risk.* Participants identified an increased ability to monitor families at risk of abandoning their children. Monitoring activities have been aided by the establishment of social worker networks within the community in some counties. In

addition, families who are receiving material aid for their children are known to the local authorities and can be monitored and further assisted.

*Cooperation between governmental agencies.* Several participants described progress in preventing institutionalization in terms of greater cooperation between governmental agencies that are involved with children and families. This cooperation has manifested itself in cooperative agreements with the school Inspectorate, public health department, county police department, and the county department for disabled persons.

*Financial support.* Participants also identified progress in preventing institutionalization in fiscal terms. Participants cited financial support from the national government as well as from nongovernmental organizations, including funds from the Labor Department for the support of child placement with extended families for child protection, funds from the National Agency for the Protection of Children's Rights (NAPRCA) in Bucharest to support programming efforts, and humanitarian foundations.

#### *Factors Identified As Aids To Preventing Institutionalization*

*Collaborative and cooperative relationships.* When discussing influential factors in preventing institutionalization, participants frequently referred to the collaborative and cooperative relationships both between and among nongovernmental and governmental bodies. Cooperation with non-governmental organizations authorized by the county level directorates for child protection and cooperation with specialized state institutions were identified as instrumental. In the latter case, cooperation has been especially valuable in obtaining specialized training for child welfare staff.

*Early identification of families-at-risk.* Participants also identified early identification of families-at-risk as a major aid to preventing institutionalization. Participants described activities related to identifying and describing the causes of child abandonment and developing interventions to prevent it. The establishment of the community social workers network and the specialists from county child protection directorate has been extremely helpful in this effort as well as to developing a database of families considered being at-risk.

*Access to resources.* Participants identified greater access to resources as a major factor in preventing institutionalization. Key resources discussed included the availability of counseling, private and public material support, and placement with maternal assistants (foster parents).

*Paradigm-shift.* Participants also described aids to preventing institutionalization that together seem to signify a paradigm-shift from the perspective that it was solely the state's responsibility to handle the welfare of children to one that identifies the involvement of the community as a key ingredient in preventing institutionalization. Participants provided a number of examples that seem to suggest a shift in thinking with regard to the role of family and community in the welfare of children including, presentations of families in need of help in the media, increased involvement of the community in providing resources, and increased sensitivity of local level authorities regarding the field of child protection.

#### *Factors Identified As Barriers To Preventing Institutionalization*

*Lack of resources.* Participant responses related to barriers to being able to prevent institutionalization of children generally focused on the lack of resources, including both

adequate financing and availability of trained child welfare personnel. Lack of resources is seen as a major impediment to supporting families at risk of child abandonment. There is also reluctance on the part of some maternal assistants to care for children with health problems or premature babies that further impairs efforts to keep children out of institutions.

*Lack of community involvement.* Lack of community involvement emerged as a major category in description of the barriers to preventing institutionalization. Responses reflected the need for leaders within the community such as the mayor to inspire interest and commitment among community members in playing a role in child protection.

## Discussion

### *Limitations*

A major limitation of the study is that it included only one focus group and therefore it is not possible to generalize the results from the analysis of participant responses to other U.S. study group participants. This is somewhat mediated by the fact that the single focus group did combine participants from two different study groups.

### *Conclusions*

Since the passage of the child welfare reform legislation in 1997, Romania has made progress in achieving some significant outcomes. In reflecting on this progress, Rossapepe (2001) described the movement from a “highly chaotic system of control by six governmental ministries to decentralized county and community-based control, decreased number of children in placement centers, greater numbers of children receiving community-based services, and transformation from a system run exclusively by the state to one in which hundreds of non-governmental agencies are involved.” (Rosapepe, 2001).

From the perspective of the participants in this study, the Romanian child welfare reform effort on the county and community level has been reliant on the following key factors: legislative change, professional development, creation of a continuum of services, leadership, collaboration and cooperation, early identification of families at-risk, access to resources, and a paradigm-shift away from seeing the state as the sole provider of child protection efforts.

Based on the themes that emerged relative to the barriers in reducing and preventing institutionalization of children, continued progress in reform efforts will be dependent on being able to address the lingering perception that the state is solely responsible for the care of children, and to obtain greater involvement and improved communication among key stakeholders including the community. Even if these barriers are successfully addressed, a greater obstacle, that of a severely lagging economy continues to loom—producing impossible demands on a government that is fiscally limited in what it can offer. This directly affects both Romania’s ability to provide families with the material assistance they need as well as the ability to recruit trained social workers who are able to provide the kind of services needed for linking families with resources they need to stay together.

Making the transition from a highly centralized economy to a market economy and a democratic society has presented Romania, like many other former Soviet bloc countries, with incredible challenges that continue even thirteen years after the revolution that drove Ceausescu from power. Certainly Romania has made progress in the promulgation of new legislation and restructured legal authorities and policy frameworks as they relate to child protection. But it seems that the financial means for managing and

sustaining sound social programs is lacking for a variety of reasons including, but not limited to, slow economic growth, poor tax collection and budget austerity requirements in order to obtain funding from such entities as the World Bank. Dicken (1998) notes that the impact of both the World Bank transition policies and the International Monetary Fund (IMF) have actually contributed to rising poverty and reductions in family support. He further notes that there is competition and duplication in many of the non-governmental organizations' efforts that tend to leave more remote and less developed communities with far fewer services.

At present Romania relies heavily on funding from non-governmental organizations and sources of support. This raises the general concern about the sustainability of the changes that have been made to allow for bringing children out of institutions and being able to prevent more children from entering them. It also raises serious questions about Romania's ability to create long-range plans for continued reform of its approach to child welfare.

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