



Characterizing the Status and Progress of a Country's Child Welfare Reform¹

CHRISTINA J. GROARK, ROBERT B. MCCALL, AND JUNLEI LI

Abstract

Numerous countries are attempting to reform their child welfare system, especially as it pertains to state care for children without permanent parents. This paper explores using internationally collected indicators to characterize the status and progress a country might make toward reforming their child welfare system. However, it is concluded that such indicators alone are difficult to interpret and provide only very limited information and need to be supplemented with substantial qualitative information obtained in country. Consequently, a generic interview was created to be used with policy makers and relevant professionals to obtain such information, and the interview was field tested in Ukraine. Results of the interview are presented as examples of the kind of information that can be obtained by this process and illustrate many of the issues countries engaged in child welfare reform are likely to face.

Key Words: child welfare reform, indicators, qualitative information, Ukraine

In 2003, there were an estimated 143 million orphans in 93 countries in sub-Saharan Africa, Asia, Latin America, and the Caribbean (UNAIDS, UNICEF, USAID, 2004). Some of these children are "true orphans" without living parents, while others are "social orphans" who have at least one living parent who is not capable or willing to rear the child because of financial insufficiency, inability to parent (e.g., because of parental mental health, substance abuse, ill health including HIV/AIDS, youth, neglectful or abusive treatment of the child), or the child has disabilities or other special needs. Moreover, the number of such children is increasing, largely because of the HIV/AIDS epidemic, especially in sub-Saharan Africa.

Most countries reared such children in institutions, at least at one point in their histories. Although many high-resource countries have nearly eliminated institutional rearing of orphaned children in favor of family care alternatives (e.g., adoption, foster care, kinship care, reunification with biological parents, community-based small group homes, etc.), institutions remain the primary form of state care for orphaned children in many countries, especially in Central and Eastern Europe and the Commonwealth of Independent States (CEE/CIS), Latin America, and Asia.

Although institutions vary in the quality of care they provide children, a review of published descriptions of institutions primarily for infants and young children representing numerous countries over the last five decades indicates certain common characteristics (Rosas & McCall,

2009), including large group sizes, high child:caregiver ratios, many and changing caregivers, homogeneous grouping of children by age and disability status, and periodic graduations of children from one group of peers and caregivers to another during the first few years of life. In addition to these structural and operational characteristics, caregivers often behave with children in a business-like, perfunctory manner, denying children experience with warm, sensitive, and contingently responsive caregiver-child interactions or relationships (Rosas & McCall, 2009). Moreover, recent attempts to improve the quality of early social-emotional caregiver-child interactions in institutions (St. Petersburg-USA Orphanage Research Team, 2008) and reviews of other interventions (Rosas & McCall, 2009) support the hypothesis that the deficiencies in early social-emotional experiences in institutions may be as much or more deleterious for children's development than deficiencies in medical care, sanitation, nutrition, toys, and equipment.

The physical and behavioral development of children residing in institutions is markedly delayed. Such children tend to be substantially deficient in height, weight, and head and chest circumference; in general mental performance and language development; and social, behavioral, and emotional behavior (Gunnar, 2001; MacLean, 2003). For example, even children birth-4 years of age who reside in "baby homes" in St. Petersburg (Russian Federation), which are acceptable with respect to medical care, sanitation, nutrition, toys, and equipment but are nevertheless typical of orphanages with respect to insensitive and unresponsive caregiver-child interactions, are substantially delayed (St. Petersburg-USA Orphanage Research Team, 2005, 2008). Approximately half of the children fall into the lowest tenth percentile of non-institutional parent-reared children with respect to physical growth and general mental and behavioral development. Moreover, children who spend most of their first 18 years of life in an institution are often not prepared to live independently when they leave the institution, and such children are believed to contribute disproportionately to unemployment, crime, drug and alcohol problems, and unwanted pregnancies. In contrast, formerly institutionalized children who are subsequently adopted or placed in foster or kinship care display substantial improvements in nearly every facet of development and are more advanced developmentally than children who remain in institutions (Julian & McCall, 2009; van IJzendoorn & Juffer, 2006).

As a result, using as a basis the UN Convention on the Rights of the Child (United Nations, 1989), many national and international organizations (e.g., UNICEF, USAID) and NGOs have urged countries to reform their child welfare system primarily by reducing reliance on institutions and promoting the use of family care alternatives for orphaned children. Children develop better in every way in adoptive, foster, or kinship families (less so if reunified to their biological families), and family care alternatives tend to be substantially cheaper even after providing incentives and salaries than institutional care (Julian & McCall, 2009).

But reforming a national child welfare system faces many challenges. For example, rearing "someone else's child" may be a totally foreign idea, culturally not accepted, or prohibited by certain religions; many children do not have documents which prevents them from being transferred to family care alternatives; and certain financial and employment practices may have the effect of providing incentives to retain institutions and even keep them full of children. The process of reform raises a variety of potentially thorny social and political issues, such as providing financial incentives for parents to adopt, and paying foster parents in a manner that is sufficient but does not encourage "taking children for the money." Nevertheless, many countries recently have assigned a priority to reforming their child welfare system with varying degrees of success.

In this environment, it would be useful to have a structured assessment tool to identify strengths and limitations in a country's child welfare system and to chart the progress of reform. One approach to this task is to identify a set of numerical indicators that describe the number of children in state care, the number of children in various forms of care, and a variety of risk factors that are thought to be related to the number of children in state care (e.g., number of children born out-of-wedlock, number of children born to teenage mothers, number of divorces, adult

drug and alcohol problems, etc.). While such data exist (e.g., UNICEF Innocenti Research Centre, 2007), their use and interpretation is not simple or straightforward (e.g., Goerge, 1997; Moore, 1997). Further, at best, such data can provide a report card on child welfare reform and progress, but they do not provide the kind of qualitative information regarding policies, implementation of policies, services and their implementation, quality of professional personnel preparation, monitoring, and evaluation that is needed to guide next steps in the process of welfare reform.

The purpose of the present study was fourfold: 1) To explore numerical indices of child welfare, specifically pertaining to children without permanent parents, to determine how suitable and useful such data might be for understanding the issues and creating policies, services, competent professional personnel, and monitoring and evaluation systems; 2) to devise a more in-depth, qualitative assessment approach to characterizing the status of a country's child welfare system; 3) to try out the assessment tool to determine if it is workable and provides more or better information than indicators alone; and 4) to identify successes, failures, challenges, and issues involved in child welfare reform in the target country that may be more generally relevant to other countries embarking on such reforms. Specifically, Ukraine was selected as the target, because in the last few years it has made child welfare reform a priority and adopted a variety of policies and practices to move toward family care alternatives for children without permanent parents.

Numerical Indices

The first task was to explore the feasibility and interpretability of numerical indicators pertaining to children without permanent parents, the contexts in which such children reside, and risk factors thought to be associated with the number of such children as a possible basis for planning prevention strategies. This strategy of creating one or more numerical indices to define the status of a country has been tried as a method of characterizing the broader concept of "child well-being," which includes health, education, economic resources, etc. (e.g., Dalirazar, 2002; Bradshaw, Hoelscher & Richardson, 2007). In these cases, a few or many internationally collected indices of child well-being were combined mathematically to produce a single numerical indicator that presumably reflected general child well-being that can be used within the country to chart progress over time and used between countries to identify those most in need of reform.

Primarily using UNICEF's TransMONEE database (UNICEF Innocenti Research Center, 2007), a single "*Marker of Child Welfare*" (the "Marker") was composed of the percent of children (population age 0 to 17, TransMONEE variable 1.5) who are in residential care (variable 8.2) or in foster care (variable 8.7), which includes kinship and guardianship arrangements. Presumably, such a Marker reflects the extent of the child welfare problem in a country, at least with respect to the percent of children in residential, foster care, kinship, and guardianship arrangements, and this Marker potentially could be used to rank countries with respect to the extent of their child welfare problem. Further, the percent of children in residential versus in foster care (which includes kinship and guardianship), called "*indicators*" in this paper, presumably could be used to chart progress in a country's transition from reliance on institutions to family care alternatives.

In addition, "*risk factors*" in five domains were identified that are often thought to be correlated with or contribute to the number of children who come under state care, including the domains of financial inability, single motherhood, revocation of parental rights, children with disabilities, and teenage problem behavior. Table 1 lists and defines the Marker as well as 14 risk factors that fall into these five domains.

Table 1
Variable Definitions

Marker of Child Welfare	
The Marker of Child Welfare is the percent of children (population age 0-17, variable 1.5) who are in residential care (variable 8.2) or in foster care (variable 8.7), which includes kinship and guardianship arrangements.	
Risk Factors	
Domain I. Financial Inability	
1.	<i>Gross domestic product at purchasing-power parity</i> (variable 10.02)
2.	<i>Registered unemployed aged 15-24</i> (per cent of total annual unemployed; variable 10.05)
Domain II. Single Motherhood	
1.	<i>Non-marital births</i> (as per cent of live births; variable 2.12 divided by variable 2.1)
2.	<i>Rate of children affected by parental divorce</i> (per 1,000 population age 0-17; variable 5.10)
Domain III. Revocation of Parental Rights	
1.	<i>Children deprived of parental care</i> (per 100,000 population at age 0-17; variable 8.01)
2.	<i>Crimes against children and youth</i> (per 100,000 population age 0-17; variable 9.02)
Domain IV. Children with Disabilities	
1.	<i>Share of low-weight births</i> (births under 2,500 grams as per cent of total live births; variable 2.15)
2.	<i>Infant mortality rate</i> (per 1,000 live births; variable 3.01)
3.	<i>Percent of births attended by skilled personnel</i> (variable 6.01)
4.	<i>Total number of children with disabilities in residential care</i> (variable 8.06)
Domain V. Teenage Problem Behavior	
1.	<i>Suicide rate for population aged 15-19</i> (suicide deaths per 100,000 in population aged 15-19; variable 3.22)
2.	<i>Registered juvenile crime rate</i> (per 100,000 in population aged 14-17; variable 9.04)
3.	<i>Homicides committed by or with participation of juveniles</i> (as percent of population aged 14-17; variable 9.07, divided by the estimated number of children aged 14-17)
4.	<i>Juveniles placed in correctional institutions</i> (as percent of estimated population aged 14-17; variable 9.11)

Source: Indicators selected from the TransMONEE database. The TransMONEE variable number is given in each case.

Year-to-year plots of each domain's risk factors plus the Marker were created in an effort to observe relative trends over years in risk factors that corresponded to a similar trend in the Marker, which at least might indicate circumstances in an individual country that might contribute to the problem of children without permanent parents. Such plots were created for those CEE/CIS countries that had sufficient data available in the TransMONEE database.

An examination of the search for year-to-year relative correspondences between risk factors and the Marker produced several conclusions (for complete details, see <http://dec.usaid.gov>):

- **There was a great deal of inconsistency from country to country.** Although some risk factors were more consistently related to the Marker across countries than others, there was considerable variability between countries in the nature of year-to-year changes between a risk factor and the Marker. This is not surprising given the very substantial cultural, social, political, and economic differences between these countries, differences that are likely to exist for any broad set of countries. This result implied that each country needed to be examined individually for risk factors that pertain to its own situation.
- **There seemed to be discontinuity in correspondence between year-to-year changes in the risk factors and the Marker.** Frequently, the relation between a risk factor and the Marker was different before approximately 1995-2000 than it was afterwards, and often there were

more consistently similar trends after 1995-2000. The recent era corresponds to the years following the fall of the Soviet Union, which led to numerous social, economic, and political changes in most of these countries which apparently became somewhat more stable in the 2000s. While this discontinuity characterized many of the CEE/CIS countries because of their similar political histories, social and political changes more generally can be expected to influence year-to-year trends in many other countries.

- **There were a few apparently promising risk factors.** After the 1995-2000 period, the most promising risk factors in terms of following the same year-to-year relative changes as the Marker of Child Welfare in many (but not all) countries included the percentage of non-marital births, the percentage of children affected by parental divorce, and the percentage of low-birth weight births (presumably, an increasing number of children born with low-birth weights may be associated with more cases of children with disabilities who are then relinquished to the state by their parents).

In general, however, no risk factor was very useful without additional qualitative information which likely could be obtained only in-country. Not only was it difficult to provide any useful interpretation of these factors that would help guide efforts at child welfare reform, some of the data seemed contradictory. Further, while people can agree that more (or less) of a health, education, and economic indicator of well-being is desirable, it is less clear for indicators of child welfare per se whether increases or decreases in an indicator are desirable. For example, presumably decreases in the number of children in institutions is desirable, but whether that is actually the case depends on where children without permanent parents are being raised if they are not in institutions – are they being adopted or placed in foster or kinship arrangements, or did the country simply legislate that children shall not be placed in institutions without provision of alternative care (e.g., infants without parents remain in hospitals where they get less social-emotional caregiver-child interaction experience than in an orphanage or older children are “on the streets”). So a more qualitative approach was pursued, building upon the indicators and risk factors but extending substantially beyond the numbers alone.

In-Country Qualitative Interview Assessment

The purpose of this exercise was to create a qualitative assessment tool consisting of a structured interview that could be used in-country to obtain enough information regarding policies, services, personnel preparation, and monitoring of child welfare in a country to identify successes, limitations, and areas to be improved in the future. The procedure was to focus on a single country, specifically Ukraine, develop the assessment tool specifically for that country, and then modify it to be less country specific and more generally useful in other countries. Both interviews can be found in University of Pittsburgh Office of Child Development (2008) and at <http://dec.usaid.gov>.

Questionnaire Development

Brief cultural and political histories were obtained, which indicated that Ukraine underwent a very substantial political revision with the Orange Revolution in November, 2004, and subsequently child welfare reform became a political priority. This fact alone meant that nearly all the data available, which pertained to the years 1989-2005, did not reflect the current emphasis on child welfare reform. Nevertheless, the breakdown of children into placement categories (i.e., indicators) as well as some of the risk factors that seemed to have year-to-year trends corresponding to the Marker became the initial points of departure to be validated, contradicted, qualified, explained, and interpreted during the in-country interview process.

A variety of background articles on Ukraine, supplied primarily by Victor Groza of Case Western Reserve University and Alyona Gerasimova of Holt International (Ukraine), provided information about policies, numbers of children in various care arrangements, pilot programs that attempt to demonstrate how the child welfare system may be changed, new family care alternatives to residential institutions, and other issues. A single comprehensive interview was designed using this information that covered the major aspects of child welfare in Ukraine, including: 1) The status of children without permanent parents; 2) sources or reasons why children are relinquished to the care of the state; 3) residential care; 4) family care alternatives; 5) domestic adoption; and 6) children with disabilities.

The Interviews

Table 2

Interviewees and Topics

1.	Andriy Haidamashko – UNICEF Child Protection Officer, data, overall situation
2.	Halyna Postoliuk , Director, Hope & Homes for Children (UK NGO) – family-based alternatives, de-institutionalization, children in institutions, role of NGOs
3.	Irina Zvereva , Director, Child Wellbeing Fund (formerly Christian Children's Fund) – family-based alternatives, introduced PRIDE (training for foster parents), responsible parenting and community-based social services
4.	Natalia Lukyanova , Director, State Social Services and Irina Pinchuk , Deputy Director, State Social Services, Ministry of Family, Youth, & Sports Affairs
5.	Lyudmyla Volynets , Director, State Department on Adoption and Child Protection, Ministry of Family, Youth, & Sports; Co-Chairperson of the All-Ukraine Public Organization Child Protection Service – government policies, regulations, legislation, "money follows the child"; all kinds of benefits for families, children; reform of residential care facilities, adoption, child protection
6.	Nadiya Komarova , Head of the Social Work Department, State Institute of Family & Youth, Ministry of Family, Youth, & Sports – training for social service providers and parents, children with special needs
7.	Serhiy Andriyash , Head of Department, Kyiv Oblast Administration Department of Children – "money follows the child" experiment in Kyiv Oblast, reasons for children being institutionalized, services for children in institutions.
8.	Lyudmyla Nikolaienko , Director, Oblast Administration Regional Center for Social Services – family support services
9.	Olha Shiyen , Head of Department, Ministry of Education
10.	Nadiya Chernukha , Director, Charitable Foundation "Peremoga" – family preservation program in Brovarskoy rayon, family support services for vulnerable families with children under 6 (therapeutic classes for children, home visiting, parent education), HIV
11.	Marek Vnuk , President, International Charitable Foundation "Sunshine" – street children rehabilitation and placement into family type environment or transition to independent living
12.	Oksana Boiko , Head of Rayon Department of Children – finding placements for children deprived of parental care
13.	Ruslan Maliuta , Vice-President, International Charitable Foundation "Father's Home" – adoption programs, rehabilitation programs for street children and abuse and neglect victims, family-based care models
14.	Raisa Kravchenko , Director, "Dzherela", Rehabilitation Center for Children with Disabilities – Rehab programs for children with mental disorders, parent support groups, advocacy
15.	Valentina Pedan , Head of Department of Child Health Care, Ministry of Health
16.	Mykola Kuleba , Head of Department, Kyiv City Department of Children – family-based alternatives, HIV

Consultants suggested individuals in Ukraine whom they thought should be interviewed. They included representatives from the four Ministries that have some responsibility for children without permanent parents, the UNICEF Child Protection Officer, five relevant Oblast (a geo-

graphical subunit analogous to an American state) officials, and directors of six service programs, both government and privately funded, that constituted examples of emerging programs available in Ukraine (several were innovative demonstration programs funded by USAID through Holt International). Table 2 presents a list of the interviewees including their titles, ministries or organizations, and their areas of expertise. Holt International scheduled interviews with all of these people during a five-day period in April, 2008. The total questionnaire was broken down into parts that matched the expertise and responsibilities of each interviewee in such a way that the entire interview was covered by the set of interviewees and many important issues were asked of more than one interviewee to provide some degree of cross-validation of answers. The University of Pittsburgh Office of Child Development Team (i.e., the authors of this paper) that conducted the interviews was interdisciplinary and had experience with one or another aspect of child welfare in the Russian Federation, San Salvador, Nicaragua, and China. Collectively, they had academic, practice, and policy experience in children with disabilities, special education, child development, psychology, school-age education, statistics and indicators, and applied developmental psychology. These diverse perspectives allowed different members of the Team to cover different portions of the interview and to probe insightfully when answers were uncertain, vague, inconsistent, or incomplete. The three-member Team conducted all of the interviews, which lasted approximately 30-90 minutes, accompanied by a representative of Holt International and/or USAID (Ukraine).

Sample Results of the Interview Process in Ukraine

To illustrate the kind of information obtained with this interview and the in-country interview process, we present below sample findings that illustrate the nature of the information obtained by this process, some of the successes and problems encountered in child welfare reform in Ukraine, and lessons learned that may be useful to other countries embarking on child welfare reform. Note that this information represented circumstances that existed in April, 2008; subsequent events may have changed these findings. Nevertheless, they are illustrative of the information gained by this process and some of the issues to be faced by countries pursuing child welfare reform.

The Limits of Quantitative Data

The Marker, indicators, and risk factors, even when plotted across years, can give a misleading impression of the status and progress of a country's child welfare system.

1. **The number of children in residential versus foster/guardianship care gives an inaccurate impression of the status of children in Ukraine.** Figure 1 displays the total number of children residing in residential and the number of children in foster/guardianship arrangements as taken from the TransMONEE database. The impression is that more children are in alternative care environments (i.e., with foster parents or guardians) than in institutions. However, the interviews revealed that Figure 1 represents what might be called "legal custody" arrangements, not necessarily "residential custody," because a significant portion of children who are in the "legal custody" of a relative and counted in guardianships in Figure 1 actually "reside" day-to-day in institutions (approximately 15% by one estimate). Further, those children are double counted, because they are represented both in the guardianship and in the institutional numbers. Thus, the indicators given in Figure 1 overstate the number of children actually residing in alternative care arrangements.

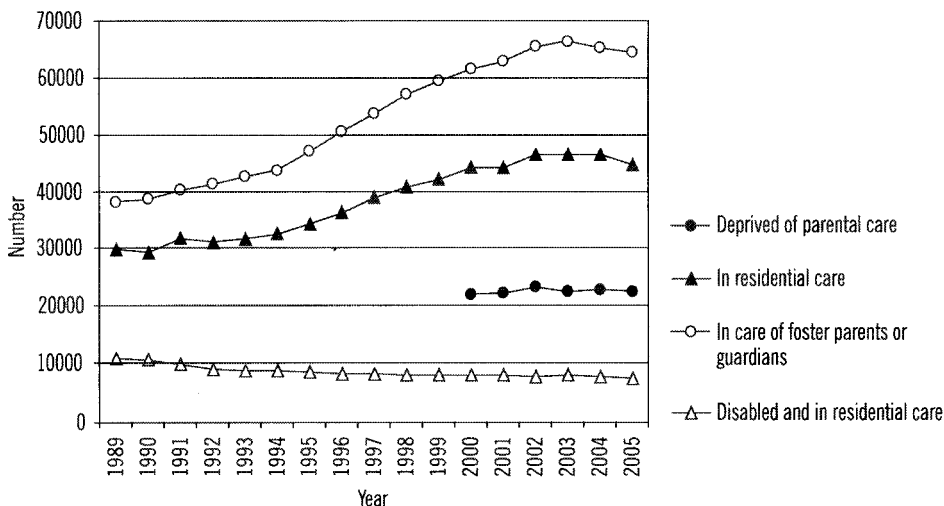
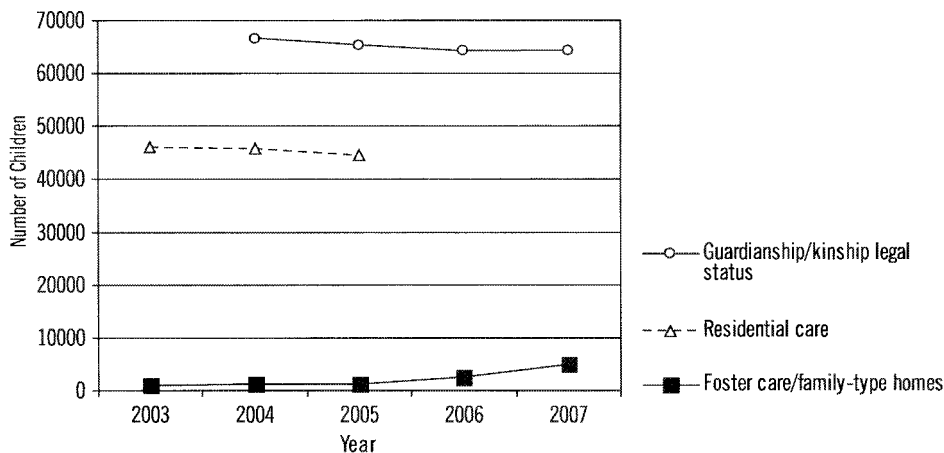


Figure 1

Year-to-Year Plots of Children Without Permanent Parental Care in Various Circumstances (Ukraine)



(Number of children having guardianship/kinship legal status (many do not reside with guardian or kin but in institutions), number in foster care or family-type homes (both from the Ministry for Family, Youth, and Sports, April 17, 2008), and the number residing in residential care (from TransMONEE)).

Figure 2

Living Arrangements for Children without Parental Care in Ukraine

2. **Disaggregating an indicator sometimes reveals a different impression.** For example, Figure 1 shows a rather large number of children in “foster/guardianship” arrangements, but Figure 2 presents the number of children actually residing in foster care plus family-type homes, the number of children under guardianship/kinship care (many of which may nevertheless reside in institutions), and the number residing in institutions. This information was released by the government one week before the interviews took place. These data show that very few children actually reside in foster care and family-type homes (although the number has increased in the last three years). Even in 2007, the number of children in foster care and family-type homes (4,882) is less than 5% of the 103,000 chil-

dren without permanent parents, but approximately 44,700 reside in institutions – just the opposite impression given by the aggregated indicator. Thus, while the Marker and indicators gave the impression that foster care is growing and numerically larger than residential care, the in-country interviews confirmed that foster care still constitutes a very small (but increasing) proportion of the overall population of children without parental care.

3. **Internationally available data may be out of date.** Almost all of the change in child welfare policies and practices in Ukraine has occurred since 2005, the last year of data available from UNICEF. However, Figure 3 shows the dramatic rise in the number of children in foster care and family-type homes provided by the Ministry of Family, Youth, and Sports (April 17, 2008) during the last three years (2005-2007), a nearly fourfold increase, which is not comprehensively reflected in indicators from world organizations that unavoidably tend to be two or more years behind. Domestic adoptions have not risen compared to foster care during this recent period, perhaps because financial incentives were offered *only* to foster families, not adoptive parents, although legislation to extend incentives to adoptive parents was being considered at the time of the interviews.

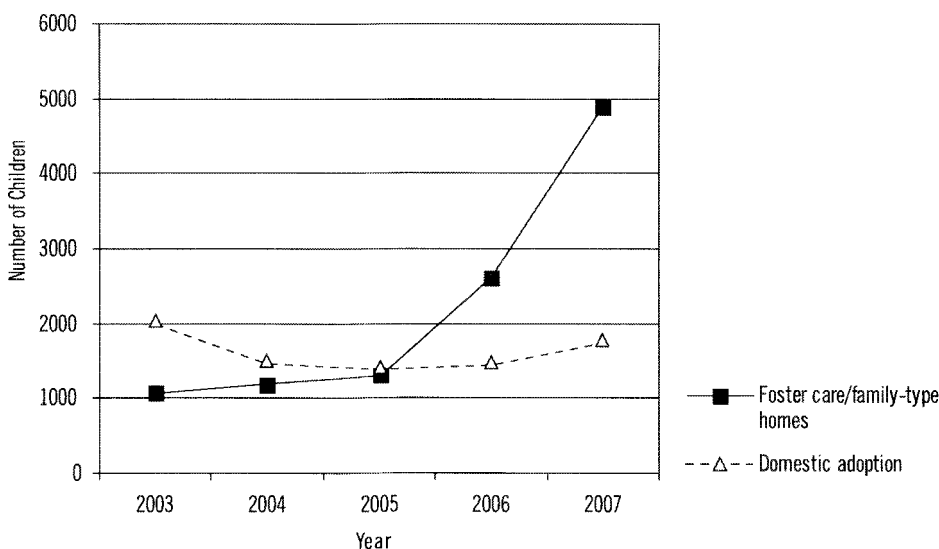


Figure 3

The number of children in foster care/family-type homes and the number of domestic adoptions (Ministry of Family, Youth, and Sports, April 17, 2008)

4. **Trends over years may reflect unintended consequences of policies.** For example, more financial benefits are paid to unmarried than married women who give birth. One of the risk factors was the number of non-marital births, which has been rising recently. This gives the impression that more children are being born out-of-wedlock, which may be contributing to children without permanent parents. But interviewees pointed out, and data confirmed, that most of the increase in non-marital births occurred to *women over 20 years of age* (i.e., not teenagers), and some co-habiting couples were remaining unmarried despite the birth of a child to obtain these financial benefits. In addition, several sources indicated that an unspecified portion of mothers were keeping their children long enough to receive the financial benefits (which rewarded “birthing” not “parenting a child”), and once the benefits expired, they relinquished the child to state care.

5. **The definitions of indicators and risk factors need to be clarified.** For example, the number of adoptions is not restricted to the adoptions of children who have been in state care; it also includes adoptions by stepparents, although this definition was changed in 1996. Further, there is no count of “street children,” and one interviewee estimated that in 2005 there were 140,000 street children in Ukraine, which is more than the 103,000 in state care in 2007. Thus, the total number of children without “functional parental care” could approach 250,000, more than double the figure conveyed by the Marker of child welfare.
6. **There may be double counting.** A child may be considered institutionalized every time he or she enters the institution, so a child who enters, leaves, and re-enters the institution within a year is counted as “two children” in residential care in that year. Children also frequently qualify under two or more categories. For example, children who change placements or status within a year, children who receive special services and reside in an institution (e.g., children with disabilities), and children in legal guardianships who actually reside in institutions are double counted. Thus, the actual number of children in aggregate categories is often not accurately determined.

Generally, then, the total statistical picture of a country may be very complicated and difficult to determine and portray, especially using the international data alone. The Team also had the impression that even representatives of the Ministries did not always have specific numbers available to them. Moreover, one Minister was unwilling to share data tables that were internally produced and on her desk during the interview, perhaps because the number of children in various situations is so closely linked to funding and policy decisions that data may be viewed as a proprietary asset of a Ministry.

Alternative Family Care Arrangements and Institutions

A major emphasis in Ukraine has been the creation of policies that promote family-type care arrangements as alternatives to residential institutions. There have been some clear achievements in this domain, but also some growing pains, limitations, and issues remaining for future agenda.

The government gives high priority to children without permanent parents, but public priorities may be lower. For example, the President periodically held Conferences on Child Welfare, but they were not prominently covered in the media.

Foster care, adoption, and other family-type care are now the preferred alternative care arrangements to institutions. A new Department on Adoption and Child Protection has been created within the Ministry of Family, Youth and Sports to oversee this emphasis. A policy directs that there be fewer than 50 children in any single residential institution, although achieving this goal faces resistance from current residential staff and will need to be supported with financial incentives. Family planning programs have begun to decrease unwanted pregnancies, although there are economic limitations and some cultural values in parts of Ukraine that favor having children. Some pilot demonstration programs providing services to high-risk women who would otherwise likely relinquish their children are helping them keep their children at home.

Public awareness campaigns have been partly successful at promoting public acceptance of family-care alternatives, but they also have produced undesirable consequences that need solutions. To encourage people to consider fostering or adopting a child in a country that had no tradition and some aversion to these ideas, a public awareness campaign emphasized how terrible institutions were for children. While segments of society became aware of children in institutions and more likely disposed to fostering and adopting, the institutional staff felt maligned and became defensive, digging in their heels to preserve their institutions, their jobs, and their dignity. Such staff have the potential of resisting family-care alternatives, because institutions are funded on a per capita basis, so some acceptable and socially desirable alternatives for

residential staff (e.g., incentives to become a foster parent) as well as a different way of funding institutions need to be considered. The public relations campaign also had the effect of placing a stigma on children who have spent time in institutions and who eventually live in society. The stigma could hamper these children's progress in education, employment, and social settings.

The policy priority and new funding is nearly all directed at family-care alternatives, while the majority of children without permanent parental care still reside in institutions. While a 10-year national plan exists, some interviewees believed that the plan does not provide enough clarity of where the country should be in 10 years or the steps necessary to achieve those goals. Currently, while progress is being made to increase the number of foster and adoptive parents, it is unlikely that the vast majority of the 103,000 children currently without permanent parents, most of whom now reside in institutions, can be absorbed in the next few years by family-care alternative environments. So thousands of children will likely continue to be housed in institutions in the foreseeable future with no plan to improve the quality of care in those institutions.

Governance by Multiple Ministries

Children without permanent parental care are handled by four different Ministries. The Ministry of Health operates 48 "baby homes" with approximately 3,606 children from birth to 3 years of age; the Ministry of Education and Science operates 109 children's homes for children 3 to 6 years of age and 54 boarding schools for children 6 to 17 years of age; the Ministry of Labor and Social Policy operates 56 institutions for children with special needs; and the Ministry of Family, Youth and Sports operates 96 temporary shelters for street children, runaways, delinquents, and victims of abuse and neglect. When multiple ministries are involved, it produces the possibilities that either no single ministry is fully responsible for performing a function or that ministries compete with each other. Recently the latter Ministry has been put in charge of adoption and child protection, which may help consolidate authority. Even so, parents and children need a one-stop shop that at least coordinates, if not delivers, health and mental health care as well as social services.

Funding Issues

A common problem is that policies exist but their implementation and funding is not effective. The policies favor adoption, kinship care, foster care, family-type homes, and then institutional care in that order, but the financial incentives do not uniformly align with the policy. Foster parents are well compensated and even biological parents receive a child allowance, but adoptive parents currently receive nothing despite the fact that adoption is the first preference in the policy (although incentives were being considered at the time of the interviews).

Categorical and line-item rigidity sometimes prevents the best interests of the child from being served. The tension between a government striving for accountability in the wake of much corruption by specifying how funds can be spent and on what often restricts agencies who care for such children to pay for services and other items that would be in the best interests of those children. This complaint was heard from several of the interviewees who operated services.

The policy of "money following the child" is good in principle, but it has restrictions that sometimes limit its usefulness. The intent was that government support of children without permanent parents would be tied to the child and thus could be used for any family-care alternative or other service for that child. But local NGOs reported that the government funding that follows the child is overly restrictive by line items and can only be used to support the child when cared for by government organizations, not NGOs, and currently only in Kiev. A new system of funding designed to rectify some of these issues was being considered.

Child Status

Child status determines which children are eligible for which services, and many children are eligible for none. Approximately 25% of all children in Ukraine do not have documents (e.g., birth certificate, registration papers), and they are ineligible for any kind of service. Further, of children in institutions, only true orphans (an estimated 7%-10%) and those whose parental rights have been denied or formerly relinquished (20%-25%) can go to foster care or be adopted. In total, there are 12 categories of children, only 6 of which are adoptable. Further, given the preference of adoptive parents for babies, an even smaller percentage of children currently in institutions are "functionally adoptable." Thus, there is a need for legal and administrative procedures that will allow children to move more rapidly toward a status that permits adoption or family-care.

Children with Disabilities

Care for children with disabilities is not a priority in Ukraine. There are now approximately 168,000 children with disabilities, 89% of whom live in families, while the most severe reside in institutions. Fortunately, the number of children with disabilities being sent to live in institutions is decreasing, but this is less a function of deliberate government policy and more likely the consequence of the public awareness campaign suggesting that institutions are undesirable places for children.

The institutions for children with disabilities are mandated to provide a great many services, but funding is so limited that most such services are not actually offered. It is likely that only one staff member specially trained to care for children with disabilities is available for every 50 children in the institution, so it is nearly impossible to deliver the kinds of personalized and specialized services that are mandated. Further, the law that reduces the size of residential institutions to less than 50 children does not apply to institutions for children with disabilities.

Adoption of children with disabilities is unlikely. Most parents do not relinquish parental rights for a child with disabilities, and people are generally unwilling to adopt children with disabilities in this culture that long shunned such children. While it costs the government approximately \$1,000 per month to keep a severely disabled child in an institution, the government only provides approximately \$100 a month to families to keep their child with disabilities (although foster parents are paid twice as much to care for a child with disabilities, and approximately 10% of foster parents have such children). The argument justifying such a policy is that parents can hold full-time jobs to supplement the low government payments, but it is debatable whether this strategy is working.

While specialized training for professionals working with children with disabilities is said to be adequate, the salaries are so low that such people often do not take positions in the profession.

Services for Prevention and Alternative Care

Procedurally, the foster care initiative is headed in the right direction. Extensive training of foster parents is mandated, the training also serves as a selection process, and some periodic monitoring and supportive social services to foster parents are provided.

The Social Services system is not sufficiently ready to deal with the inevitable problems of foster care. While the training program for foster parents is extensive, it is largely book learning; facing an actual child with challenging behaviors stemming from prior abuse and neglect or institutional residency often requires on-site assistance and support of a specialized nature, not

simply social support. Neither the training of social service workers nor the social service system appears prepared for this challenge.

While foster parenting is perceived as permanent, in fact it is not. One minister reported that a single children's home had 30 children who had been placed in foster care returned to the institution within a single year by foster parents. Also, social workers or foster parents are allowed to pick the child to be fostered, so it is likely that children currently being fostered are among the "best" in residential care. Eventually, all the "best" children will be placed and those remaining will have more challenges. Also, older children are not a priority; adoption and foster care tends to occur for infants and younger children, and there is no training for people to work with older children.

There are no training or support services specifically aimed at adoptive parents, and no specialized support services for foster, adoptive, or biological parents rearing children with disabilities.

The secrecy of adoption limits certain services. Parents have the right, but are not mandated, to have adoption kept secret, which is a culturally accepted attitude perhaps stemming from traditional preferences for bloodlines, the perception that the orphanage child is problematic (historically institutionalized children have been portrayed as damaged, delinquent, or even criminal), or embarrassment over infertility issues. This secrecy limits giving training to adoptive parents and providing services to them after adoption.

Non-Government Organizations

The demonstration programs operated by NGOs that the Team visited were highly competent, state-of-the-art programs. They were creative, comprehensive, and entirely consistent with the new priorities of the government. But they are not typical, because the vast majority of NGOs are one- or two-persons shops operated on very small budgets and ineffectively managed. As a result, the government does not support NGOs or pay them to provide services, and NGOs must raise money from many non-governmental sources. Bringing the pilot demonstration projects operated by a few NGOs to scale will require new procedures and challenges that need to be planned.

Personnel Preparation

College-level personnel preparation curricula are not well matched to the demands made on personnel by the child welfare system. The preparation is too theoretical and not very practical, meaning that social workers are effectively trained "on-the-job." Train-the-trainer strategies are just starting, which means there are few trained professionals available to train and supervise new staff. Recruitment and retention of professional personnel is poor due to the low status and salary accorded these professional positions. One interviewee described them as "the poor serving the poor." **Standards for Services are Just Now Being Developed and are not yet Complete.**

Monitoring and Evaluation

While the need for monitoring is recognized, it is in only the earliest phase of development. Existing databases are not child focused or linked to one another. The goal should be to develop a single, national, "follow the child" database using the child/family as the unit that spans particular services, specific ministries, and the specific legal status of the child. Of course, such integrated databases are not common even in high-resource countries where they often face issues of confidentiality and other problems.

Discussion

The primary intent of this project was to develop an assessment tool that would provide quantitative and qualitative information that could be used by a country to describe the status of its child welfare system as it pertains to children without permanent parents and to chart progress in reforming that system, predominately away from institutionalization and toward family-care alternatives for caring for such children. The Team drew several conclusions from this exercise.

Benefits of the Process

Internationally available data on child welfare is of limited use. At a minimum, such data need to be carefully interpreted, presumably by in-country individuals (perhaps as a result of the interview process) to clarify definitions, policies that may affect such indicators, disaggregated information, etc. While the indicators may represent a reasonable starting point for the interview process, their interpretation rests squarely on qualitative information obtained during the interview.

The structured interview used in Ukraine was successful. As implemented, the process produced a comprehensive, integrated, “big picture” look at Ukraine, and the general interview appropriate for many countries is likely to be similarly useful. Most people who work in a country operate primarily in separate units (e.g., “silos”) and rarely have the opportunity to see all aspects of the child welfare system in a comprehensive and integrated manner. Both the NGO collaborator and the USAID officer were eager to accompany the Team to the interviews, because this represented a rare opportunity to integrate information from a large group of primary stakeholders. The result was a comprehensive, balanced, and integrated view of the child welfare system in Ukraine.

The collaboration of independent visitors with local professionals had several benefits. It produced a balanced, objective, and informed view of the country’s child welfare system that neither a totally internal nor totally external review would likely have produced. Professionals from the USAID mission and Holt International provided invaluable local data and information as well as contacts, scheduling, and local arrangements, plus their presence at interviews perhaps helped to keep interviewee responses accurate and balanced. Their involvement may also have contributed to the fact that interviewees were exceedingly gracious in giving the visiting Team substantial amounts of time and flexibility of scheduling.

An interdisciplinary interview Team enriches the information obtained. The diverse backgrounds of Team members permitted insightful probes following an interviewee’s response to place that information into a broader professional and international context. The interview could be used by in-country personnel alone, but it might lack the diverse perspectives and broader context brought by these specialists, depending on the backgrounds of the local personnel.

Asking the same questions of different interviewees provided some degree of cross-validation. The Team encountered very little disparity and contradictions in general information between sources, and never did the Team feel they were not provided with accurate information, perspectives, and interpretations.

Background research and information was useful. It helped to target the interview questions, stimulated probes to produce more insightful information, and occasionally permitted the Team to compare the accuracy of interview responses with authoritative data. Thus, the general structured interview should be tailored to the unique circumstances, data, policies, history, and culture of an individual country to obtain the maximum amount of information.

Limitations of the Process

Interviews produce information that people claim is accurate. Of course, it is subject to the needs, priorities, responsibilities, and perspectives of the interviewees. The Team felt that all interviewees were frank, forthright, and honest; none gave the Team the impression that they were offering “the party line;” and no one avoided directly answering a challenging question. However, it is necessary to have several different interviewees representing different types of stakeholders to ensure that all perspectives are represented and some statements are validated across more than one interviewee. Also, background documents could sometimes be used to corroborate information from interviewees.

Interview information often does not adequately convey the prevalence of certain conditions. For example, one source said that an institution had 30 children returned from foster care in a year, but there is no information on how typical or prevalent that circumstance is. Analogously, most of the interviews were conducted in Kiev, but often the care of children without permanent parents is different in big cities than it is in rural areas, so some balance in the representation of interviewees should be sought. Further, in this case, the Team did not visit existing residential facilities (and only one foster parent and child), but these groups should be better represented.

Issues in Child Welfare Reform

This case study of an information-gathering process produced a report on the progress, successes, challenges, and future agenda in child welfare reform for Ukraine (University of Pittsburgh Office of Child Development, 2008; <http://dec.usaid.gov>). Many of these issues are described above. Although couched in the specific context of Ukraine, they illustrate the more general kinds of issues and challenges many countries embarking on similar reforms of their child welfare systems are likely to face.

Note

1. This paper was based on a report funded and delivered to the United States Agency for International Development (USAID) by the University of Pittsburgh Office of Child Development (2008) and titled “A Strategic Approach to Characterizing the Status and Progress of Child Welfare Reform in CEE/CIS Countries: Including a Case Study on Child Welfare Reform in Ukraine” (<http://dec.usaid.gov>). The scope of the report was conceived by the USAID Europe and Eurasia Bureau Social Transitions Team. It was prepared under the SOCIAL Task Order of the Advancing Basic Education (ABE-BE) IQC by the University of Pittsburgh Office of Child Development and Creative Associates International, Inc., Aguirre Division of JBS International, Inc. The authors thank Christy Allison of Creative Associates, Aguirre Division, JBS International, and Catherine Cozzarelli of USAID/ECE/DGST for their helpful comments on the report which was the basis of this paper. The authors’ views expressed in this article do not necessarily reflect the views of the United States Agency for International Development, the United States Government, or Creative Associates. The University of Pittsburgh Office of Child Development Team was assisted by Alexandra Debbas, Graduate Student Researcher, Larry Fish, Research Statistician, and Amy Gee, Assistant to the Co-Director.

References

- BRADSHAW, J., HOELSCHER, P., & RICHARDSON, D. (2007). An index of child well-being in the European Union. *Social Indicators Research*, 80, 133-177.
- DALIRAZAR, N. (2002). An international index of child welfare. Amherst, MA: Political Economy Research Institute, Working Paper Series (No. 40).
- GOERGE, R. M. (1997). Potential and problems in developing indicators on child well-being from administrative data. In R. M. HAUSER, B. V. BRAUN, AND W. R. PROSSER (eds.), *Indicator of children's well-being* (pp. 457-471). New York: Russell Sage Foundation.
- GUNNAR, M. (2001). Effects of early deprivation: Findings from orphanage-reared infants and children. In C. A. NELSON & M. LUCIANA (eds.), *Handbook of developmental cognitive neuroscience* (pp. 617-629). Cambridge, MA: MIT Press.
- JULIAN, M., & MCCALL, R. B. (2009). The development of children within different alternative residential care environments. Unpublished manuscript, authors. Pittsburgh, PA: University of Pittsburgh Office of Child Development.
- MACLEAN, K. (2003). The impact of institutionalization on child development. *Development and Psychopathology*, 15, 853-884.
- MOORE, K. A. (1997). Criteria for indicators of child well-being. In R. M. HAUSER, B. V. BRAUN, AND W. R. PROSSER (eds.), *Indicator of children's well-being* (pp. 36-44). New York: Russell Sage Foundation.
- ROSAS, J., & MCCALL, R. B. (2009). Characteristics of institutions, interventions, and resident children's development. Unpublished manuscript, Authors. Pittsburgh, PA: University of Pittsburgh Office of Child Development.
- ST. PETERSBURG-USA ORPHANAGE RESEARCH TEAM (2005). Characteristics of children, caregivers, and orphanages for young children in St. Petersburg, Russian Federation. *Journal of Applied Developmental Psychology: Special Issue on Child Abandonment*, 26, 477-506.
- ST. PETERSBURG-USA ORPHANAGE RESEARCH TEAM (2008). The effects of early social-emotional-relationship experience on the development of young orphanage children. *Monographs of the Society for Research in Child Development*, Serial No. 291, Vol. 73, No. 3.
- UNAIDS, UNICEF, USAID (2004). Children on the brink. Washington, DC: USAID.
- UNICEF Innocenti Research Centre (2007). TransMONEE Database. Florence, Italy: UNICEF Innocenti Research Centre.
- UNITED NATIONS (1989). Convention on the rights of the child (CRC). Adopted and opened for signature, ratification and accession by General Assembly resolution 44/25 of 20 November 1989.
- VAN IJZENDOORN, M. H., & JUFFER, F. (2006). The Emanuel Miller Memorial Lecture 2006: Adoption as intervention. Meta-analytic evidence for massive catchup and plasticity in physical, social emotional, and cognitive development. *Journal of Child Psychology and Psychiatry*, 47 (12), 1228-1245.

Authors' notes

Christina J. Groark

University of Pittsburgh Office of Child Development, 400 N. Lexington Ave., Pittsburgh, PA 15208 USA.

cgroark@pitt.edu

telephone: 412-244-5303

fax: 412-244-5440

Robert B. McCall

University of Pittsburgh Office of Child Development, 400 N. Lexington Ave., Pittsburgh, PA 15208 USA.

Junlei Li

University of Pittsburgh Office of Child Development, 400 N. Lexington Ave., Pittsburgh, PA 15208 USA.