

Coordinated Approach to Child Care Reform in Georgia Targeting Deinstitutionalization and Development of Alternative Services

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Country Background



Population– 4.5 million

Child population – 934.000

Internally displaced persons – 300.000 (28% 0–18)

Extreme child poverty – 8 %



Country Child Care Background

Number of Children in Large State Institutions



-46 large state institutions managed by several state entities

- Limited understanding of institutional harm
- No alternative family substitute or family support services
- No social workers
- No policies and legislation supporting child care system reform

- 3 large state institutions for children with disabilities managed by MoLHSA

- Alternative services (SGH, Foster)
- Family support services
- Professional social work
- Outsourcing and monitoring
- Legislative framework
- More state, less donor resources

Supportive Factors

▶ Donor and NGO Support

- EU budget support
- UNICEF, USAID, other donors' coordinated approach
- Local and international NGO capacity

▶ Coordinated approach

- Inter-ministerial Council
- UNICEF convening role
- NGO coalition

▶ Political Will and Government Leadership

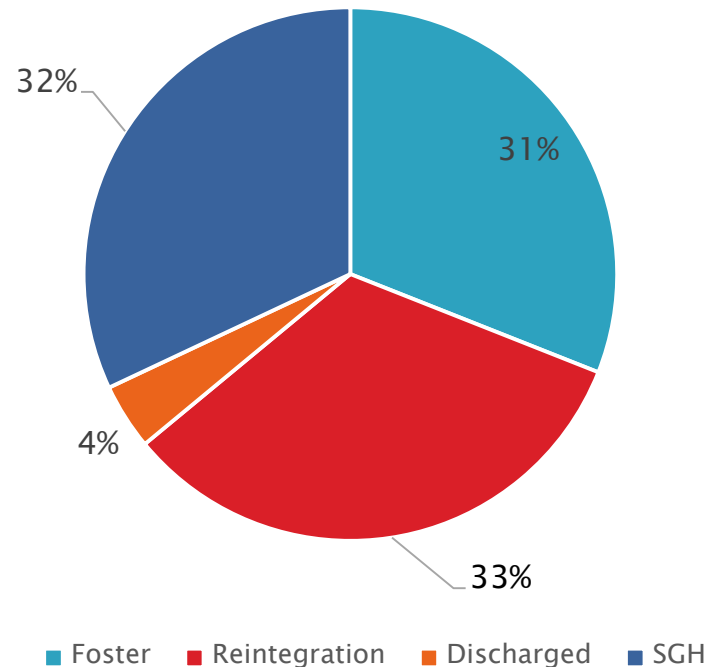
- Government Commission on Child Protection on DI
- Legislative framework, strategies and action plans
- Social Assistance System (targeted social assistance, reintegration and foster care payments, etc.)
- Guardianship and Care Panels (ensuring gatekeeping)
- Flexible funding mechanisms
 - Moratorium on new entries to avoid 'revolving door'
 - Involvement of non-state actors

Supportive Developments

- ▶ **Strengthening Social Work Education/Practice**
 - OSI, EU, US Gov support
 - Professional organization with >500 members and membership in IFSW, ICSW, etc.
 - NGOs support (Georgian Association of Social Workers, etc.)
 - Certificate, BA, MSW, PhD programs
 - 1000% increased number countrywide
 - Professional supervision and performance evaluation system
- ▶ **Strengthening reintegration and prevention**
 - Family support services
 - Government reintegration benefit
 - Donor supported social fund (top-up reint. support, etc)
 - Case management
- ▶ **New family substitute services**
 - Kinship and foster (regular, specialized, emergency)
 - Small Group Homes (for 8 or 10 children)
- ▶ **Quality assurance system**
 - Licensing of 24-hr services
 - Child Care Standards
 - Monitoring mechanism
 - Research

Key Achievements (DI)

- **All children** deprived of parental care with no special needs and children with mild disabilities (6–18 yr) moved back home or are were placed in family-like environment
- All young children (0–6 yr) with no special needs and children with mild disabilities reintegrated or placed in foster care
- MoU with Georgian Church. Church institutions are more open for GoG and NGOs (assessment, monitoring, reintegration)
- Percentage of children in formal care (including church institutions) reduced by at least 55%



Key Achievements

(development of alternatives)

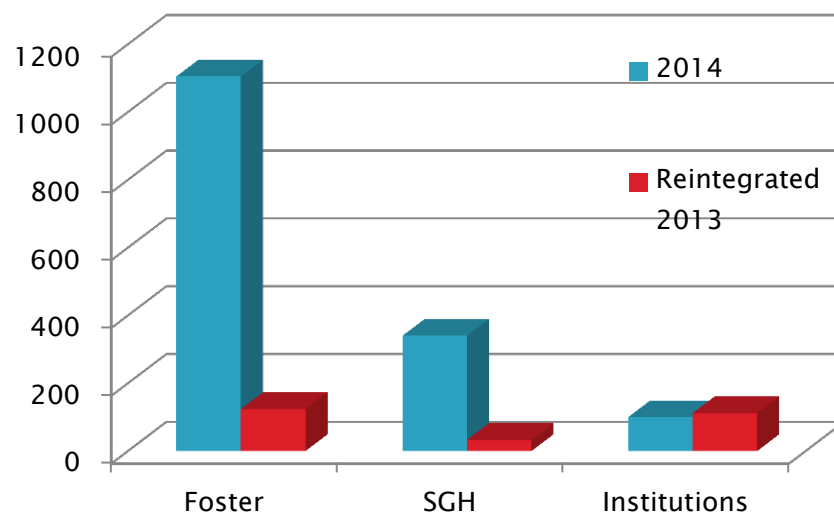
- ▶ Foster care developed, strengthened, prioritized over SGHs countrywide
- ▶ 70 % of children in formal care live in foster families
 - Kinship care - 158
 - Kinship (special needs) - 24
 - Regular foster care - 777
 - Specialized foster care - 112
 - Emergency foster care - 34

- ▶ Small Group Homes (<8 or 10 kids) in place

- ▶ Services monitored

- ▶ Children in formal care regularly assessed and reintegrated

- In 2013 10% of children reintegrated from SGHs and foster

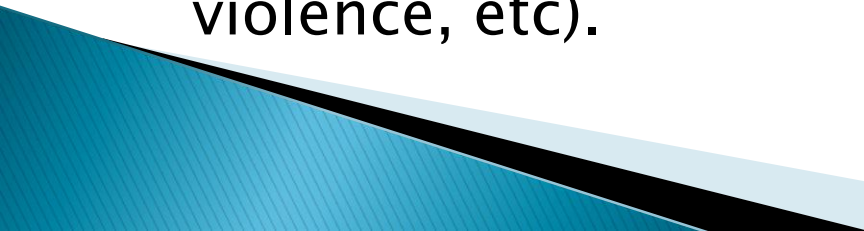


- ▶ Foster carers and SGH caregivers trained and supported
 - ▶ Gatekeeping

Remaining Challenges

- ▶ Preventive services don't fully meet needs of the most vulnerable families
- ▶ Healthcare and education systems are not equipped to support system DI
- ▶ Georgian public stigmatized disability
- ▶ Family support and alternative family substitute services for children with profound disabilities are not available
- ▶ 100 children with disabilities still live in institutions
- ▶ Church-run institutions (3) are large, not licensed; enrolment mechanisms not mainstreamed
- ▶ State resources scarce; external funding reducing

Recommendations

- ▶ Strengthened/sustained **cross-sectorial coordination** and state leadership
 - ▶ Coordinated and child-centered efforts to **mainstream children's rights** into all state policies
 - ▶ Increased awareness and **participation of children** in implementation of CRC, CRPD and other international conventions and strategies
 - ▶ Strengthened **prevention** policies and services for at-risk families in need of complex support
 - ▶ More resources and coordination for achieving **equitable results of children with disabilities**
 - ▶ Raised **public awareness** on children's rights (importance of inclusion, family environment, non-violence, etc).
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