USAID AND CHILD WELFARE REFORM IN ROMANIA

CHALLENGES, SUCCESSES, AND LEGACY

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The author's views expressed in this publication do not necessarily reflect the views of the United States Agency for International Development or the United States Government.

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ACRONYM LIST

AIDS	ACQUIRED IMMUNODEFICIENCY SYNDROME
ANPCA	NATIONAL AGENCY FOR CHILD PROTECTION AND ADOPTION
CBO	COMMUNITY BASED ORGANIZATION
CEB	COUNCIL OF EUROPE DEVELOPMENT BANK
CNPC	NATIONAL COMMITTEE FOR CHILD PROTECTION
CMTIS	CHILD MONITORING AND TRACKING INFORMATION SYSTEM
CRC	CONVENTION ON THE RIGHT OF THE CHILD
DFID	DEPARTMENT FOR INTERNATIONAL DEVELOPMENT (UK)
DPC	DEPARTMENT FOR CHILD PROTECTION (department in charge of child protection: 1997)
EO	EMERGENCY ORDINANCE
EU	EUROPEAN UNION
FICF	INTERNATIONAL FOUNDATION FOR CHILD AND FAMILY
GDP	GROSS DOMESTIC PRODUCT
GO	GOVERNMENT ORDINANCE
GoR	GOVERNMENT OF ROMANIA
HIV	HUMAN IMMUNODEFICIENCY VIRUS
IBRD	INTERNATIONAL BANK FOR RECONSTRUCTION AND DEVELOPMENT
IOCC	INTERNATIONAL ORTHODOX CHRISTIAN CHURCH
IMAS	INSTITUTE OF MARKETING AND POLLS
MOE	MINISTRY OF EDUCATION
MOF	MINISTRY OF FINANCE
MOH	MINISTRY OF HEALTH
MOU	MEMORANDUM OF UNDERSTANDING
NACPA	NATIONAL AUTHORITY FOR CHILD PROTECTION AND ADOPTION (department in charge of child protection and adoption: 2001-2004)
NAPCR	NATIONAL AUTHORITY FOR PROTECTION OF CHILDREN'S RIGHTS (department in charge of child protection: 2004)
NGO	NON GOVERNMENTAL ORGANIZATION
PCN	PENTRU COPIII NOSTRI
PEPFAR	PRESIDENT'S EMERGENCY PROGRAM FOR AIDS RELIEF

PHARE	EUROPEAN UNION PROGRAM TO ASSIST ACCESSION COUNTRIES
PIN	PROGRAM OF NATIONAL INTEREST
RFA	REQUEST FOR APPLICATION (USAID'S tool for soliciting proposals for Cooperative Agreements)
SEE	SOUTH EASTERN EUROPE
SEED	SOUTH EASTERN EUROPE DEVELOPMENT FUND
TA	TECHNICAL ASSISTANCE
UNICEF	UNITED NATIONS CHILDREN'S FUND
US	UNITED STATES
USAID	UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT
USG	UNITED STATES GOVERNMENT
WV	WORLD VISION INTERNATIONAL

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EXECUTIVE SUMMARY

Background on USAID's Child Welfare Programs in Romania

Romania's "orphanages" were a communist legacy where unwanted children housed in dormitory settings were neglected until they were ready to enter the workforce. Communist attitudes favored child placement in institutions, and parents were encouraged to believe the State could raise the children better than they. This system of large orphanages, which were organized under many ministers, was (and to some extent still is) common in Eastern Europe. Neighboring countries—Russia, Belarus, Ukraine, and Bulgaria—have similar systems. In Romania, the children's situation was more highly publicized.

The state of institutionalized children was precarious in 1989, and became worse as the economy collapsed. Increasing national poverty led to further deterioration of state institutions. The dire needs of the children called for a quick response and humanitarian assistance of food, clothing, heat and building repairs. In 1991, USAID responded with humanitarian assistance projects to improve the institutional settings and situations of children. In addition, it supported Non Governmental Organizations (NGOs) to provide innovative services. By 1997, USAID realized that Romania's child welfare system needed more than humanitarian aid and established a child welfare reform project. Its goals were to introduce alternative child welfare systems, to reintegrate institutionalized children into the community, and to close the institutions. This approach was later expanded to include a focus on quality services, but in general has remained consistent from its inception.

USAID work in Romanian child welfare evolved from humanitarian assistance and isolated pilots to a systemic reform with a continuum of services and, finally, an umbrella partnership project. Each step was informed by the previous step.

1991–1997. USAID began isolated pilot projects in health, education and life skills. Pilot projects increased the capacity of the NGO providers and were good practice models, but had little impact on the larger system. USAID offered technical assistance via the National Committee for Child Protection and was influential in determining what new child welfare programs were to emerge. The most important thing that happened in this period was a change in philosophy. By the end of the period the Romanian and American governments agreed that systemic child welfare reform was necessary.

1997-2001. Support for residential institutions was curtailed. USAID's efforts turned to community-based alternatives and closure of institutions. These targets seemed likely to accomplish the greatest improvement in the lives of the greatest numbers of children.

During this time span, the GoR passed legislation that created the Department of Child Protection and decentralized child welfare. Decentralization gave responsibility for child welfare to the county and local authorities, but they were unclear about their roles or responsibilities under the decentralized system. The links between services and delivery systems became a focus of USAID child welfare reform.

In 1998, USAID funded World Vision, Bethany and Holt to pilot a continuum of services in three counties. The three NGOs successfully reintegrated children into the community, and prevented others from entering the institutional system, but resistance formed, because keeping children with their families destablized the old system: funding formulas had not yet been changed and still favored keeping children in institutions, so institution staff were frightened of the potential loss of employment.

In response to this issue, World Vision and Bethany trained social workers, volunteers, supervisors and public officials, and World Vision started a small activity to train non-professional staff to assist mayors with their new responsibilities. The activity was so successful that mayors not in the activity zone asked to be included. This pilot was replicated in a wide swath of the country. World Vision, Bethany and Holt introduced the concept of case management. A subsequent study reports that the three target counties averaged 21 percent less institutionalization than other counties in the period 1997–2000.

Approximately 60 high-level civil servants traveled to the United States through the USAID funded World Learning Transit Program to study governmental structures and child welfare services. Participants returned with a vision and began making changes without any additional funding. Most of these individuals continue as reformers.

2001-present. USAID launched the $15M ChildNet grant in 2001. ChildNet is a collaboration among USAID, GoR, and World Learning that is characterized by mutually desired objectives and planning, frequent meetings, shared decision-making, flexibility, multi-lateral transfers of resources and a written agreement from the top level of the government. The ChildNet partnership was a key factor in advancing child welfare reform; partners' expectations were clear and misunderstandings few. The ability to respond to unexpected needs allowed ChildNet to be the "most effective" donor according to an official at the National Authority for Child Protection and Adoption (NACPA). USAID procedures and the ChildNet process for sub-grants were much appreciated and compared favorably to other granting procedures. ChildNet provided training, technical assistance, and sub-grants, in a complex and comprehensive manner and influenced all actors and aspects of the child welfare reform process.

As closure of the USAID child welfare component approached, the project tightened its focus on NGO sustainability and civil society development. ChildNet and the coordinating committee became more sophisticated and purposeful; emphasis was shifted to the NGO sector. Over half of the grant funding was allocated to NGO sub-grants and almost 100 multi-purpose sub-grants were awarded, targeting areas such as life skills, services for the disabled, and NGO capacity development. The sub-grants also promoted partnerships and sustainability, which were mandated in all grant proposals. In many of these sub-grants, the public officials provided the staff and other major components of the service, making it a foregone conclusion that services

would continue after completion of the funding. Informal surveys gathered as a part of this report indicate that most of the sub-grantees' services have been sustained.

ChildNet was determined to work at the community level and to increase community involvement with and responsibility for children. It funded sub-grants to develop several models of community boards. What began in two counties is now widely spread throughout the country; there are now 2,700 community boards functioning. Mayors were trained in 34 counties to clarify their roles and responsibilities with regard to child welfare.

The Child Monitoring and Tracking Information System (CMTIS). USAID funded a child monitoring and tracking system that established a unique identifier for each child in the system, identified the child's family and siblings, and tracked the services provided. The CMTIS model is expandable and can incorporate health, education, and police records; it is unique in Eastern Europe.

The Politics of International Adoption

International adoption became a major political issue around 2000. Though both the United States and the European Union (EU) approved of domestic adoption, the United States strongly favored international adoption if there were no permanent national alternatives for children. The EU, by contrast, was opposed to all international adoption, viewing in-country foster home and institutional placement as preferable to children leaving their home country. The dispute caused hard feelings and postponed progress on projects on which the United States, the EU, and GoR all agreed, while international adoption issues were debated. Finally, after years of wrangling, Romania imposed a permanent moratorium on international adoption in 2004. International adoptions have stopped, but the United States continues to insist that international adoption be reinstated as an option for children and that adoption be restored to its rightful position in the continuum of child welfare services.

The Legacy

USAID funding supported hundreds of activities in Romania from 1991 to the present; many of them resulted in outcomes that remain and form the foundation for future progress in child welfare. These lasting results are the USAID legacy and contribute to each of the pillars prerequisite to a system of child welfare services.

Pillar 1: Political Will, Policy and Legislation
Pillar 2: Child Welfare Services
Pillar 3: Service Delivery System
Pillar 4: Coordinated Programs and Funding
Pillar 5: Community Development and Participation

Pillar 1: Political Will, Policy and Legislative Framework

- USAID developed through ChildNet fourteen service standards, which were passed into legislation.

- Law 272 of 2004 promoted the use of community boards—a USAID innovation—as a support to local government child protection programs.
- USAID was successful in creating a vision and communicating that vision to a critical mass of decision-makers.

Pillar 2: Child Welfare Services

- USAID funds created a system of community-based services, such as counseling, day care, foster care, life skills for adolescents, and adoption to replace the institutional system.

Pillar 3: Service Delivery Systems

- Local government systems were developed to deliver services; government officials and a corps of social workers were trained.
- USAID introduced the concept of public/private contracting between local government and service providers, creating a flexible, responsive, competitive and creative service delivery model.
- USAID built the social work profession by providing training and support for professional organizations, and establishing ethical standards.

Pillar 4: Coordinated Programs and Funding

- USAID was a consistent proponent of coordination, supporting donor meetings and synchronizing activities between the major donors and the National Authority. The ChildNet partnership was particularly successful at harmonizing activities.
- USAID funded the Federation of Child Welfare NGOs, ProChild, to coordinate and educate CBOs and NGOs active in child welfare.

Pillar 5: Community Participation

- USAID introduced the use of Community Boards to advise and monitor child welfare service delivery at the local level. The government now promotes Community Boards in its legislation.
- USAID developed the capacity of over 100 NGOs.
- USAID reinforced sustainable sub-grants by encouraging partnerships. Most of the services begun by ChildNet sub-grantees have been sustained since U.S. funding has been completed.

Key Lessons Learned

Create a vision for key decision makers. Creating a vision and communicating that vision to a critical mass of decision makers is the most important first step. With vision and political will, child welfare reform can leap forward with little other external aid.

Sustain and extend the vision. From the time USAID embarked on its system of reform, its direction remained constant. This was tremendously important. It was refined through years of experience, and activities changed within projects, but the goal remained the same. In addition, USAID had consistent or overlapping staff that knew the history of projects and people, the

mistakes that had been made, and that worked hand in hand with Romanian leaders toward reform.

Develop a holistic view. Systems are in homeostasis and need intervention in more than one place to change. Institutions cannot be closed without new services in place; new services cannot be put in place without government reform. Working in policy to create services at the national as well as local levels increases the likelihood of change. Child welfare reform will falter unless there is an understanding of public administration and the laws that govern the field.

Partnership is key. Forming a true partnership with stakeholders is critical and involves shared program development, control and decision-making. Building trusting relationships is the single most important factor in influencing government policy. If transfer of power is the ultimate goal, then sharing power is the penultimate goal. Bringing host country officials and NGO nationals into the planning, budgeting, monitoring and evaluation process brings political will, sustainable budgets, and sustainable activities.

What could have been done differently?

In retrospect, the following steps might have been anticipated or considered.

Increase the scope of the program and extend reform to special needs children in institutions operated by the Ministries of Health and Education.

Increase public awareness and public pride in child welfare. NGOs have not developed support from their communities, and average Romanian citizens still do not see community child welfare as a personal issue. This could be a critical failure.

Develop a cross cutting activity. Child welfare reform could not have happened without the concurrent reform of local government delivery systems. Democracy and child welfare sectors within USAID were natural partners. Closer collaboration might have made a difference.

The Way Forward: What remains to be done?

Romanian child welfare still needs advocacy. Communities and civil societies must be organized to support children and families. NGOs must develop issue-driven constituencies to support themselves either with money, political support, or both.

Romanian mayors and local councils need to be educated on the new legislation that further decentralizes the responsibility for child welfare. Mayors and local councils need to be aware of their roles and responsibilities and in addition, they need enhanced skills in assessment and strategic planning, budgeting, monitoring and evaluation for use on their communities' behalf.

The entire system needs more prevention programs to alleviate abandonment and to prevent child abuse and neglect. An increased number of services in general are needed at the community level; more people need services than there are services available.

Capacity within the social work profession should be increased by continued training of both professionals and non-professionals and by providing advanced training for professional social workers.

Remaining institutions should be assessed in order to ensure that no children remain in deplorable conditions**.**

The Region Outside of Romania

Neighboring countries could benefit from the Romanian experience. Many of Romania's neighbors have child welfare systems that are built around massive institutions; the Romanian reform should be a model for her neighbors.

The CMTIS system should be shared with other countries. USAID's case record and case management system in Romania is a model for Eastern Europe.

The Romanian experience should be shared with the PEPFAR countries. The President's Emergency Plan for Aids Relief (PEPFAR) provides funds for countries affected by HIV/AIDS. In the countries targeted by PEPFAR, an ever-increasing orphan population threatens to overwhelm existing child welfare systems. A crisis response by overwrought government officials is likely to result in large orphanages. Once these systems are in place, they become self-sustaining players in local economies and are difficult to close. Romania's experience, having closed such institutions, and having created alternative childcare systems in their place provides both a warning and a ray of hope.

Summary

Romania now has the foundations of a modern child welfare system in place. Where once it had only institutions, it now has community services and the worst institutions have been closed. USAID could not develop an entire child welfare system but the USAID legacy can be found in every pillar necessary to develop a child welfare system.

USAID made significant contributions to the profession of social work, the NGO sector, the legislative framework, community development, child welfare services, and delivery systems. It has trained thousands of Romanians: from volunteers to social workers to high level officials in the Romanian government. When USAID leaves Romania in 2008, it will leave a solid foundation upon which the GoR will continue to build. The problems are not fully resolved and there is still a lot of work to be done, but the human resources, methodologies and political will are present. It is now up to the Government of Romania to assure that the system will continue to grow until all children are assured of their rights and are able to develop their full potential.

INTRODUCTION

In 1990, the name 'Romania" became inextricably linked with the word "orphans" when cameras cast their lights on children warehoused in cavernous Romanian institutions. Doors opening to reveal emaciated children, heads shaved, listless, and tied to their beds, shocked the world.

Large orphanages, sometimes housing hundreds of children, were a communist legacy to the region. Romania was not the only country to use them. Neighboring countries—Russia, Belarus, Ukraine, and Bulgaria—had a similar history. In Romania, however, it was more highly publicized. Orphans, together with children whose parents either could not or would not care for them, were removed from society and held in dormitory settings until they were ready to enter the workforce. For some children, such "brood factories" were the only home they ever knew. These "child welfare" institutions were among the worst problems confronting the newly established Romanian democracy in the early 1990s.

In the early 1990s, shocked by the conditions of these children, Americans demanded action and their representatives responded. USAID began funding humanitarian aid projects to alleviate the crisis. As it became clear that Romanian children needed more attention, USAID established a child welfare reform project in 1998. It was the first time that USAID had undertaken such a project, and it became an essential component of the U.S. foreign aid package for Romania.

Recent reports have renewed Americans' concern for Romanian disabled children and today, more than fifteen years later, those first images still haunt many Americans and Romanians.

What is the status today?

The situation of children in Romania has improved in no small part through USAID's efforts. European officials have acknowledged that in seventeen years, Romania has gone from being a country notorious for mistreatment of institutionalized children, to becoming an Eastern European model for child welfare policy and practice. Many of the large institutions are closed, but not all of them. Many of the children, who were or would have been in those institutions under the communist regime, are now sustained by community services in their own families or cared from by their extended families or in family-type environments. The numbers of street children are reduced, but still there are child beggars on the corners.

The U.S. contribution has been pivotal to this progress; this paper will trace the course of USAID's contribution to child welfare reform in Romania and assess this reform. Is Romania now an exemplary environment for children, or is it only improved? What happened between 1990 and 2006? What was done? How? And by whom? What did USAID have to do with it and what remains to be done?

Overview, Statistics, and Charts

From 1998 to the present, USAID has had a consistent strategy to reduce the number of Romanian children in institutions and to increase the number of community services and children using them. Current USAID goals, implemented through the ChildNet project, are to reduce by half the number of children in institutions during 2001-2006, and to increase the number of community based services so that they will address 75 percent of the children who need assistance.[1]

The ChildNet Project, a partnership between USAID, World Learning, and the National Authority for Child's Rights Protection (NAPCR), has almost met its targets. The number of children in institutions in June 2005 has decreased by 22,555 (down from 48,363), and more than 50,000 children – 68 percent of those in State care – benefit from community services. ChildNet expects to meet all USAID targets by the end of the project. In the areas targeted by USAID, the results indicate success.

A chart from the National Authority for the protection of Child's Rights demonstrates the dramatic change in the number of children in institutions since USAID launched its strategy to reduce the institutional population in 1998. The only variation in the downward trend occurred in 2000 when the institutions previously managed by the State Secretary of Handicapped and the Minister of Education were moved under the county authorities, causing a temporary increase in the number of children residing in institutions.

Gherla, An Example of Change
from the personal journal of L. Correll

Site Visit, 1999. In May 1999, over 150 children lived in the Gherla, Cluj County Placement Center. They slept in three big rooms, 25 bunk beds in each. There was no other piece of furniture -no lamps, no chairs, and no dressers. Children did not own specific clothes but were handed garments from the central laundry room on the first floor once a week. They did not even have assigned beds.

School was in session, but the children swarmed around visitors, like worker bees around a queen. They clutched the stranger's knees. They wanted to be picked up, and then screamed as they were put down. They asked to be taken to the visitor's home. There was strong evidence of attachment disorders.

Site visit, 2004. By October 2004, facilities in larger cities were much improved. USAID worried about more rural places, not so easily visited. An unscheduled visit to Gherla addressed that question.

It was the same decrepit building, but inside it was different. There were only 50 children in the Placement Center. Two-thirds had been re-integrated, or moved to foster care with relatives or professional foster care providers. Bedrooms had been converted into smaller units with as few as four children and as many as ten children to a room. The children no longer attended school within the placement center; they attended the municipal school.

Here is the most important point: five years earlier the children exhibited extreme symptoms of unattached behavior. In this visit, they were oblivious to the visitor's presence; they were so engaged in various arts and crafts activities with Italian volunteers. They had personal belongings in their rooms, and they had their own clothes. The Director was another example of how things had changed. She explained that the children have food, clothes and a place to live, but they need relationships. So when donors want to contribute, she discourages toys that will be gone in a short time and suggests spending time with the children.

[1] USAID Romania Strategy, 2001-2006

HISTORY: UNDERSTANDING THE PROBLEM

Background: USAID in Romania and in Child Welfare

USAID in Romania

USAID came to Romania with funding from the South East Europe Development Fund (SEED). SEED was developed as a short-term measure to assist Southeastern European (SEE) states to transition to democracy. Funders initially assumed that USAID would only be in Romania for two years. The country had roads, water treatment facilities, power lines and telephones; infrastructure, although frail and decrepit, was more or less in place and the people were educated. In 1989, literacy in Romania was greater than 90 percent and many literate Romanians spoke multiple languages.

However, as they would soon find out, infrastructure and literacy were not enough to transform. The difficulty of the transition from a communist central economy to a democratic market economy was a surprise to many. Communist experiences of more than 40 years still influenced the behavior and attitudes of Romanian citizens, and given that the reforms in Romania began at the top, the diffusion of democratic free market ideas to the local level was still incomplete. This was especially true in rural areas.

Child Welfare Initiative in Romania

USAID's prior experiences in child welfare had been confined to humanitarian aid in Africa, Asia, and Latin America. In its decision to take on child welfare system reform, USAID developed specific goals that it believed would produce the greatest overall improvement for the greatest number of children; namely, to establish alternative services to alleviate the need for institutional placements, to enable the reintegration of institutionalized children into society, and to close institutional child placement facilities forever. These were new goals for USAID and the Government of Romania (GoR).

Background to Child Welfare in Romania

Child protection in Romania was driven by communist attitudes and goals. Nicolae Ceausescu, the Romanian Head of State—after visits to China and North Korea—embarked upon a "great leap forward." He sought to create a modern industrial economy that would supply hard goods to the communist world. Romanian workers were his primary resource for this endeavor.

In this new ideology, a worker was regarded as the fundamental unit of society. Families and family ties were fragmented, and no value was placed on the maintenance of traditional family

structures. Villages were razed to make way for mechanized agriculture. Extended families were scattered as they were relocated into block housing in diverse locations. Husbands and wives were assigned to job sites far apart. Birth control and abortion were forbidden. Every woman's patriotic duty was to produce children for the state. Fragmented and isolated, nuclear families had children they could neither care for, nor feed, and there was no one to care for the infants.

The difficulty of working and rearing children simultaneously made it acceptable for parents to relinquish parental responsibility to the State. Parents were encouraged to believe that not only could the State provide for the children, it also could raise the children as well or better than they could. Some doctors and some nurses co-conspired with collapsing families to place children in large institutions that—it was said—provided a better option. If parents could not care for the children, why not leave it to the State?

The state of institutionalized children was appalling in the Ceausescu years, but it became even direr when the entire communist economy collapsed. Throughout central Europe and the former Soviet Union factories were closed and shipping was shut down. Romanian unemployment, unknown in the Ceausescu years, grew to an unofficial 40 percent.

When the central state undertook to solve all child welfare problems, local authorities abdicated their roles. The role of the Mayor, the protector and guardian of children, has been longstanding in Romanian law, and has its roots in Roman law, but during 40 years of communism this authority was all but forgotten. There was no community-based social service and no civil society involvement in child welfare, so the State became the sole provider of child services.

At least five different governmental agencies shared responsibility for children: (1) the Ministry of Labor and Social Protection, (2) the Ministry of Health, (3) the Ministry of Justice, (4) the Ministry of Interior and (5) the Ministry of Education. Several of these ministries operated large institutions with sizeable physical plants and numerous staff.

The institutions housed children in huge common spaces, with no special social or remedial services. Special needs children with severe disabilities were placed in isolated rural institutions that received little or no public scrutiny. In ministries such as Health and Education, where child welfare was ancillary to the ministries' primary mission, such institutions were largely forgotten by central administrators.

No reliable data on children existed; data collection counted apples and reported oranges. No two counts measured the same thing. One organization might count 170,000 institutionalized children and another 100,000. There were substantial differences, and each organization used different definitions. Under these circumstances, how could improvement be measured?

Although NGOs brought needed technical skills and information, these were undervalued. Bribes and other payments to officials were alleged to be common as a precondition for allowing the NGOs to work. NGOs provided goods to the institutions and their staff, cars to County Departments for Child Protection, and helped refurbish buildings. However, not only were these

contributions consumed with limited measurable improvements in conditions, in the end, they were negative incentives to the closure of institutions.

It was widely believed that domestic NGOs sprang up all over Romania to take advantage of the customs tax treatment, which allowed organizations registered as NGOs to receive favorable tax treatment for bringing goods and vehicles into the country. It was alleged that some groups formed NGOs to take advantage of these tax laws without the intention of providing needed services. Romanians heard of foreign money flowing into Romania, and they saw jobs and cars going to NGOs with marginal impact on their lives. As a result of this corruption, NGOs developed a bad reputation – an association that still haunts them today.

Presenting Problems

As USAID first encountered the child welfare disaster in Romania, an estimated (but uncounted) 100,000 children were residents in 650 child welfare institutions. Fewer than three percent were orphans; some were room and boarders, whose parents could not or did not care for them; and some were abandoned as infants in the maternity hospital, to be raised by the State.

Changing beliefs and mindsets takes more than a generation

Many families continued to expect the State to take responsibility for children when they themselves were unable or unwilling to do so. By 1989, many new young parents had themselves been raised by institutions, without the benefit of positive role models. They knew no other way than to turn their children over to the State. As unemployment rose and poverty increased with privatization and market reforms, these young parents did as their parents had done—they abdicated.

> Even today in Romania, maternal abandonment of new-born children is still a problem. Many say that this is the core problem that must be attacked in Romanian society and that this abandonment is caused by poverty. But, while there is an obvious connection between poverty and abandonment, it is not the only important link. Albania, one of the poorest countries in Europe has a low abandonment rate. Bosnia, beset by war and poverty, has a low abandonment rate. Thus, another perspective on this situation is that abandonment is a remnant of the communist legacy that encouraged mothers to abandon their children and their communities to turn a blind eye.

Change must occur simultaneously in multiple sectors at multiple levels

A child welfare system must be viewed within the context of systems of government and finance. Before institutions can be closed, service delivery systems have to be created, and responsibility must be assigned at county and local levels of government. The incentives that maintain a system must be examined and adjusted before a system can be changed. A county official might have a difficult time closing an institution when his budget from the State was based on the number of children in institutions and staff in his organization. A local government cannot close an institution without some better alternative for the children who live there. Furthermore, the process of systemic child welfare reform in Romania was entirely dependent upon reforming the administration and developing democratic processes.

APPROACH: DEVELOPING A PLAN FOR WHAT COULD BE DONE

A sound child welfare goal for Romania was to help families to nurture and rear their own children within a society that encouraged a "best interest of the child" analysis in every situation. The old system had to be sustained while the transition took place and children could be moved into more familial environments. The USAID target was an innovative and sustainable continuum of services developed by the government in cooperation with NGOs and public service providers. Staff and training were needed to provide newly created services.

The Pillars of a Child Welfare System

Several pillars, or supports, are prerequisite to a system of child welfare services:

Pillar 1: Political Will, Policy and Legislation
Pillar 2: Child Welfare Services
Pillar 3: Service Delivery System
Pillar 4: Coordinated Programs and Funding
Pillar 5: Community Development and Participation

It is also necessary to develop a system of monitoring. When USAID took on child welfare reform in Romania in 1998, none of these pillars were in place.

Political Will, Policy and Legislation

At the local government level, there was no trained staff, budgets, nor processes for raising local funds. The *judets* (counties) and local governments had no role in operating children's institutions. Government officials, doctors, and educators, trained under the old system, continued to send children to institutions; they knew no alternative. Even worse, they had no motivation to create alternatives, because the institutions represented jobs and economic activity in the local community and therefore had constituent support.

In 1997, a new law created the National Department of Child Protection (DPC) in Romania. Based on prevous experience with NGOs, it made a commitment to community based services and to the devolution of child welfare responsibility to the county. This was the beginning of linking public administration and democracy reform to child welfare reform in Romania. County and local governments suddenly found themselves with responsibilities they neither asked for nor wanted. Both child welfare and local government actors needed to be trained and to learn the processes associated with moving forward.

Child Welfare Services

In the 1990s, children's services were synonymous with institutions; there were no other public services. Therefore, with the push to reform the Romanian system, services had to be built from scratch. For example, in 1997 in the child protection department of Dumbovita County, almost all of the human resources worked in institutions. Only six out of 304 staff worked in a community service for preventing child abandonment.

Service Delivery System

All social workers, psychologists and speech therapists in Romania had been trained before 1969. There were no university programs to train social workers or other related helping professions to bring contemporary theory to the dying professional community. Public service delivery networks were basically non-existent. Government positions essential to services delivery had to be created and trained.

Coordinated Programs and Funding

At first, there was substantial duplication and some work at cross purposes among donors working on child welfare. Over time, donors, NGOs, and the GoR worked out a coordinated strategy. In 1996, USAID, along with UNICEF, led the move from humanitarian assistance to child welfare reform, which supported the decentralization of child welfare services and the creation of a modern legislative framework. USAID's strategic framework from 1998 included a comprehensive plan to fund child welfare reform. By 2000, all the major donors—USAID, the European Union (EU), the United Nations Children's Fund (UNICEF), Soros, World Bank, and the Department for International Development (DFID)—and many large and small NGOs and CBOs were involved in child welfare reform.

Community Development and Participation

The community had no awareness of the situation of their institutionalized children. They believed and their medical professionals believed that institutional care provided the safest and best care for children, but once the children entered the institutions, they disappeared from view. Children were hidden in self-contained institutions and educated within the building. There were no fieldtrips where children would be visible even to immediate neighbors. Romanian citizens who are by nature warm and caring for children were unaware of and dissociated from the children in their midst.

PROCESS: USAID AND ROMANIAN CHILD WELFARE DEVELOPMENT: 1989 TO 2006

Between 1989 and 2006, Romanian child welfare efforts evolved from humanitarian assistance and isolated pilot projects to systemic reform with a continuum of services and an all encompassing project which addressed all of the pillars. USAID began humanitarian aid to children in institutions in 1991. In 1998, when USAID launched its child welfare system reform program, it targeted the specific goal of a system of community services to provide alternatives to institutions. By 2002, USAID was mentoring a complex system of government and NGO collaborative efforts. Each new project was informed by the previous one.

Major USAID implementers in child welfare 1991-1997

USAID funded numerous NGOs such as PACT, Catholic Relief Services, Project Concern Intl., Holt International, World Vision and others. (See Appendix C)

Milestone: Essential Humanitarian Assistance, Isolated Pilot Projects: 1991-1997

Media exposure resulted in a public and private U.S. emergency response to a crisis situation. The donor community, including USAID, poured enormous amounts of funds and dedicated great effort to improving conditions for children in Romania by refurbishing the orphanages. Early responses focused on child survival efforts, emergency medical aid, food, clothing, and structural repair of orphanage facilities.

USAID funded a variety of activities responding to repeated crises, beginning with food and improving the conditions in the institutions, and ending with funding to NGOs to provide a range of pilot projects in health, education and life skills. These pilots increased the capacity of the NGO providers and were good practice models, but they had little impact on the larger system, because the governmental infrastructure was unprepared to provide services (see Appendix C for a list of funded activities).

It rapidly became clear that these efforts would be unending. Contributions of food, clothing and medicine, new paint and new carpets were required continuously. This flow of donor dollars and goods into the system reinforced the continued use of massive institutions. These were inimical to children, and diverted donor and Romanian resources to band-aid solutions.

During the period 1991-1997, USAID advisors offered technical assistance to the government through the National Committee for Child Protection (CNPC). This technical assistance was crucial to the GoR's reorientation from humanitarian aid to systemic reform.

The most important thing that happened in this era was a change in philosophy both at USAID and in the GoR. The United States entered this period offering humanitarian, non-development aid to child welfare. The GoR entered the period seeking aid in the name of the children and

feeding the institutional system on the proceeds. By the end of the period both governments had come to an understanding: the system had to change. Systemic child welfare reform was an integral part of USG aid to Romania. The EU played a central role by making child welfare reform a political criterion, and therefore a pre-condition to open negotiations for Romanian entry into the EU.

Lessons Learned

- Systemic change was needed.
- Institutions will never be a wholesome place to raise children.[2]
- Putting models in place and increasing NGO capacity did not result necessarily in the closure of institutions.
- Isolated pilot activity does not make a great impact.
- Pilots had to be cost effective and affordable to the community. They could not be premised upon the idea of a never-ending flow of foreign public or private donor funds.

Major USAID Implementers in Child Welfare, 1997-2001

- World Vision and Bethany
- Holt International Children's Services
- World Learning TRANSIT
- U.S. Department of Health and Human Services

Milestone: Targeting Systemic Reform, 1997-2001

The Beginning of Systemic Reform

The year 1997 was a turning point for child welfare in Romania. Support for residential institutions was curtailed, and USAID's efforts were focused on development of community-based alternatives and the closure of institutions. USAID assisted in many other target areas, (e.g., children with HIV/AIDS, juvenile delinquents, Roma children, and street children) but other donors were addressing those issues and USAID's main objectives were directed toward systemic change and accomplishing the greatest improvement in the lives of the greatest numbers of children.

Government of Romania's First Steps toward Systemic Reform

In January 1997, the GoR created the Department of Child Protection (DPC)[3] which replaced the previous CNPC and passed legislation to decentralize child welfare. The DPC had responsibility

[2] Conclusions from the literature regarding the effects of institutionalization are that " severe deprivation can result in cognitive, social, behavioural and emotional delay " and that "even good institutional care can result in social, behavioural and emotional difficulties." Preventing harm to children through early institutionalization, European Union Daphne Programme Project, 2003, K. Browne, C, Hamilton-Giachritsis, R. Johnson.

for the majority of children in placement centers in Romania, but a significant number of children remained under the jurisdiction of the Ministries of Health and Education and the Secretary of State for the Handicapped. For these children, improvements came slower or not at all.[4]

Although decentralization was legislated in 1997, it was slow to happen in the field. Child welfare was the first sector to be decentralized. Essential links between services and delivery systems (between child welfare and public administration) had to be created.

Decentralization put the responsibility for managing and financing the large institutions and for the delivery of child welfare services with the county and local authorities. County and local authorities did not know their roles, responsibilities or how to implement the concomitant financial functions, such as collecting taxes. The pieces were not in place to make a smooth transition.

Results in Romania could not be measured with the data collection system then in place, and so an assessment began of the potential for a child tracking system.

The Need for Clarity

At the beginning of the World Vision – Bethany project in 1998, USAID presented a symbolic $6M check to the GoR to announce the first child welfare reform effort to the public. This resulted in a period of misunderstanding between USAID and the NAPCA. The symbolic act was widely misinterpreted as funding to be given directly to the GoR. Throughout this program, counties expected to be given cars and material goods, and the GoR wanted an accounting of the $6M. County officials did not value technical assistance from the NGOs, and wanted material goods instead. Collaboration at the national level was hampered because USAID and World Vision did not submit financial reports to NACPA. This misunderstanding affected the entire project.

USAID First Steps toward Systemic Reform

In 1998, USAID funded four-year activities by World Vision, Bethany and Holt to pilot a community continuum of services in three counties: Iasi, Cluj, and Constanta. The services were to include: (1) family support or preventive services, such as parent education, daycare, family counseling, family planning; (2) family preservation services, involving crisis counseling, intensive family interventions, parental assistance, and emergency financial aid; (3) protective services, referring to assessment of abuse and neglect and subsequent planning and interventions;

[3] This agency went through several iterations. It was renamed by subsequent legislation as: National Committee for Child Protection (CNPC), Department for Child Protection (includes the Romanian Committee for Adoption–1997–Governmental Decision 16/31.01.1997); National Agency for Child Protection and Adoption, National Authority for Child Protection and Adoption (2001 – Emergency Ordinance 12/2001, Law 252/2001); National Authority for Child Rights Protection (2004 – Governmental Decision 1432/2004) See also, Law 274/2004 –regarding the creation and function of the Romanian Office for Adoption.

[4] Only in 2000, did county authorities take over some institutions managed by the Ministry of Health or the State Secretary for Handicapped for disabled children and institutions for children with special educational needs managed by the Department of Education. Disputes about ownership of property delayed even these transfers. In 2006, they are not yet completed.

(4) temporary substitute care, including foster care, permanency planning, family reunification and mothers' shelters; and (5) permanent substitute care, including adoption, foster care and group homes. The GoR continued to fund the institutional system while the alternatives were being developed. The idea was that as alternatives were developed, the government funding would shift to sustaining the new community based programs and large institutions would decrease.

The implementers developed Memoranda Of Understanding (MOU) with the county authorities stipulating that the county authorities would take over the USAID funded activities at their conclusion. At the end of the project, counties did not have funds to sustain all the project activities because the central budgeting system did not allow for the expenditures in the county budget.

As the three international NGOs began to experience success in re-integrating of children into the community, resistance formed. Some officials became uncooperative, and accusations were made that officials were foot-dragging because the project interfered with the existing funding formulas which were based on the number of children in institutions and the number of institution staff.

Early Successes

Between 1996-1998, USAID/World Learning Transit arranged for the travel of high-level civil servants and secretaries of the County Council (in charge of child welfare at the county level) to the United States for a one-month study tour. They were introduced to systems that used community services and public-private partnerships to prevent institutionalization. Participants visited government agencies at the federal, state and local levels to see how the structures and services worked together. Participants returned with a vision for potential change and began implementing what changes they could make without receiving any additional funding. Most of the County Secretaries still hold their positions today and continue as reformers.

One county secretary said about the U.S. training:

I have been in training projects before and after, but that one brought about a revolution in my mind. I expected that programs would be presented, but along with seeing the program, the process by which the program had been developed was presented, the failures they experienced and the problems they had encountered. It was a place where I could present a problem that I was having and get information.

The training changed his view. He saw young people in charge of important projects; he grew to understand the role of civil society; he first saw the contracting out of services; and he realized the importance of multi-year budgets and of flexibility within that budget. He saw foster care programs which cared for severely disabled children. He returned from the training on October 31; in November, he funded 80 foster parents and in December, he closed two orphanages without receiving any additional USAID funds. His county now has only one remaining residential institution for severely disabled. However, it has a department for emergency services, child abuse and neglect, foster care and adoption.

Another success during this period was training and expanding the number of

"rural" social workers. World Vision started a small activity to train a group of non-professional staff, called social referents, who worked in the *communa* and villages assisting the mayors. World Vision hired the referents with the understanding that the mayors would fund their salaries after 6 months. The activity was so successful that mayors began paying the salaries as promised on time or sooner. This made it possible for World Vision to hire and provide training for others. Mayors not in the activity zone asked to be included. What began as a small pilot was replicated in a wide swath of the country. A critical component of this program was the coordination and mentoring provided by World Vision's specialized social workers, located in the capital of each county, who were able to travel to provide support when necessary. This served to create a network of rural social workers.

The start of volunteer programs was also noteworthy during this time. "Volunteer activities" had not been voluntary under the communist regime and people who lived through that time recoiled at the idea of volunteering. World Vision began a new era of volunteerism in Romania by engaging young people, mostly students, as volunteers to work with children.

From 1996-2000, World Vision, Bethany and Holt made a significant contribution to child welfare reform, by expanding the case management model, whereby a social worker develops a plan of action for a family and coordinates community resources to fulfill the plans. Program results were numerous and included providing services for 3,755 individual cases, reintegrating 693 children from placement centers into their biological families, and counseling 1,599 families in medical units who were at risk of abandoning a child. A study by KF Greenwell reports that the three target counties averaged 21 percent less institutionalization than other counties in the period from 1997 to 2000.[5] The project had a large training component and trained 1,527 social assistants, 491 rural social workers, 91 supervisors, 956 case managers, 1,086 professional maternal assistants, and 819 volunteers.[6]

Lessons Learned

- Creating a vision is the first step. Decision makers need to know where they are headed and need to see it working. With political will in place, changes will move forward.
- It takes more than a MOU to ensure that a program will be funded by the government authorities. Plans should be developed jointly and expectations clear. This lesson informed the development of the next USAID funded activity in 2001.
- The community, including the institutional staff, has to be considered when attempting to close an institution. It is important to talk of transitioning rather than closing an institution. Transitioning is a process of retraining and planning for staff, as new activities for children replace the old institutional ones.
- Corruption in international adoption was a huge negative factor in the attempted reform.

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[5] Greenwell K. (2001), *Child Welfare Reform in Romania: Abandonment and De-Institutionalization in Romania, 1987-2000*, P. 129

[6] Child Welfare and Protection Project: World Vision/Bethany Cooperative Agreement No. 186-A-98-00103-00; Holt International Cooperative Agreement No. 186-0016-A-8112-00 1998-2002.

- Understanding local and central government procedures and rules is essential knowledge to child welfare reform.
- When an activity is "right," the community will demand more: the training for rural social workers was a needed activity and thus, more was requested.

Milestone: Partnership, Shared Goals and Community Development: 2001-2006

2001 -2006
Major USAID Implementers in Child Welfare

- World Learning ChildNet partnership project
- U.S. Department of Health and Human Services: CMTIS.

The period from 2001 to 2006 was a period of rapid progress, characterized by a clear understanding and a good working relationship between the Romanian national child welfare authorities (NAPCR and NACPA), USAID and World Learning/ChildNet. Most persons responsible for child welfare at the national level remained in place; persons who had been a part of the reform replaced those that left. USAID's goals remained basically the same but were adjusted to reflect a concern for quality services and standards. There was an emphasis on partnership and community development.

The major donors were in agreement on the main goals of child welfare reform. USAID, the World Bank, UNICEF, EU and others had coordinated program components focused on closing down residential institutions and developing alternative community service programs.

In 2001, USAID launched the $15M ChildNet grant with a MOU with the Prime Minister's Office. Since the Child Protection Authority had changed several times in the past years, all partners wanted an agreement that would survive reorganization changes.

ChildNet is a partnership between World Learning, GoR and USAID. It is a voluntary collaboration to achieve mutually desired objectives. From the beginning, this was a different sort of partnership characterized by:

- **Written Agreement**. The ChildNet MOU and partnership agreements stated the partners' agreed objectives, assigned responsibilities and established conflict resolution procedures.

- **Mutually Desired Objectives.** The objectives for ChildNet were derived from an analysis of the strategic objectives of both USAID and NACPA. ChildNet objectives were those found in both strategies (see Appendix C).

- **Shared Decision Making**. A coordinating group consisting of representatives of each of the three partners met regularly to make decisions and plan activities. This was difficult, not only for the NACPA but for USAID as well. Being a partner with the national government does not always mesh with USAID rules, and national governments are not accustomed to negotiation. All parties had to give up some control to the partnership.

- **Consensus Decision-making.** All ChildNet decisions were made by consensus, a strategy not stipulated in the partnership agreement but adopted by virtue of necessity. Consensus was essential to ensure that NACPA would not feel disadvantaged in a voting process controlled by USAID and its grantee.

- **Flexibility.** ChildNet anticipated that activities would respond to experience. Activities were flexible and thus, ChildNet was able to respond to unforeseen needs, such as testing all institutionalized children for HIV or expanding successful activities such as the Mayors' training.

- **Frequent Meetings.** All project decisions were made at weekly or bi-weekly meetings for the first several years of the project. Partners from the National Authority for Child Protection, World Learning, and USAID met to draft RFAs, to review proposals, to award grants, and to review monitoring reports. Frequent meetings were necessary for the many decisions that had to be made but they also played an important role in bringing people together regularly to reinforce common visions, shared values, processes and trustworthiness.

- **Transfer of Resources.** Staff from NACPA worked on ChildNet projects as team leaders and ChildNet staff work on NACPA committees as well. Often sub-committees or work groups were formed consisting of USAID, ChildNet, National Authority, county DPC and independent consultants. Through NACPA's participation in ChildNet, which funded NGOs as implementers, the NACPA grew to value the role of NGOs and their partnership with local government partners. NACPA used this model in later Programs of National Interest (PIN) as a result of this. PINs are NACPA grants to create services that are part of the NACPA's strategic goals. This is very similar to the U.S. model, but it was a first in Romania.

The partners were able to influence one another and to get important work done. Donor coordination, orchestrated through the partnership, ensured that international donor programs were complementary to each other and non-duplicative. NACPA was invested in the success of the ChildNet/USAID program because the objectives were determined jointly and NACPA was pledged to help achieve USAID results.

Planning for Graduation

Romania's accession to the European Union became more assured in 2002 and with that assurance, came the knowledge that USAID would leave Romania in the near future. As closure approached, the project tightened its focus on NGO sustainability and civil society development. ChildNet and the coordinating committee became more sophisticated and purposeful. There was a renewed determination to fund Romanian NGOs and CBOs, to sustain NGOs, and to encourage government support of NGOs. The ProChild Romanian Federation of Child Welfare NGOs was supported as the successor for advancing child welfare after USAID departed.

Over half the ChildNet funding was allocated to NGO sub-grants and almost 100 sub-grants were awarded, taking into consideration geography, type of service being provided, and gaps that

needed to be filled. These sub-grants were directed to targeted areas such as life skills, services for the disabled, and NGO capacity development. Sub-grants provided services to 19,160 children (3,712 of whom had special needs), integrated 1,420 children into biological and extended families, placed 616 children in foster care, facilitated 340 national adoptions, provided life skills to 2,118 adolescents aging out of institutions, and prevented over 1,400 cases of child abuse and neglect. They also developed 300 services and trained 6,239 child welfare professionals.

In many of these sub-grants, public officials provided the staff and other major components of the service because they had developed a project that they needed in conjunction with the partner NGO. There was no doubt but that the services would continue after completion of the USAID funding, and, indeed, reports from a selection of completed projects collected during this study indicate that most services have been sustained.

One of the initial sub-grants included a component to develop Community Boards in two counties. Community Boards were authorized by the Mayor and local council and composed of community volunteers who agreed to help families and children who were experiencing difficulties. Board members provided a variety of services from advice, to hard goods, to advocacy for a policy change.

Mayors not included in the original group began to request technical assistance to establish the Boards in their jurisdictions; in some counties the county council requested the Boards be created in every *communa*. The popularity of community boards became so widespread that finally, the GoR passed legislation requiring the establishment of these Boards nationally. This was a major step toward the community taking responsibility for children in difficulty.

The Mayors' training which had begun under an earlier USAID program (World Learning TRANSIT program) was expanded under ChildNet, and ultimately mayors were trained in 34 counties. This was an extremely relevant training because it clarified the mayors' roles and responsibilities for child welfare. It was the training that "created the vision" for the mayors.

The Mayors had always held the guardianship authority, but after the training they understood that their responsibilities were:

- To control and guide the manner in which parents fulfill their rights and obligations in relation to the child and its belongings;
- To make decisions in relation to respecting the best interests of children in families; and
- To submit cases to court when there are problems relating to the child's best interests (decisions in divorce cases, declining of parental rights, putting the child on probation, etc.). In some cases, hearings of the guardianship authority in court are compulsory.[7]

In different parts of Romania, there were innovative, efficient programs and procedures, but often these were not widely known in other areas. For instance, while one county might not

[7] "Assessment of Child Care System Reform in Romania," Institute for Marketing and Polls (IMAS), 2004. http://www.unicef.org/romania/resourses.html, p. 36

believe that it is possible to hire foster parents to care for disabled children, another county might be using that exact staffing pattern. A "Best Models" conference was organized by ProChild, and funded through a ChildNet sub-grant, to increase awareness of innovations and to provide a boost in self esteem to Romanians working in child welfare. The conference recognized positive aspects and gave awards to excellent public and private programs. This competition was transparent and the selection was made by a representative committee. After the conference, additional USAID funding was provided to roll out the "best practice" models to other interested communities.

Lessons Learned

- The partnership in ChildNet was a key factor in moving child welfare reform forward. Expectations of the partners were clear, and there were no misunderstandings. Trust and relationship-building were very important factors.
- Flexibility mattered. The ability to respond according to the current situation allowed ChildNet to be the "most effective' donor according to an official at the NAPCR.
- USAID procedures and the ChildNet process for sub-grants were much appreciated and compared very favorably to other granting procedures.
- Training of local government officials had a great impact on child welfare services.
- Donors played a mixed role with NGOs. They helped NGOs develop capacity and funded services through them. On the other hand, NGOs responded to donors' stated needs rather than a community base.
- Ultimately, NGOs must meet community needs and have community support for real sustainability.
- System changes and implementation of reform occurs more quickly and consistently when training and technical assistance is provided.

The Child Monitoring and Tracking Information System (CMTIS)

In 1989, reliable tracking of the children was impossible; when a child was placed in an institution, the central government could not tell if this child was a new entry into the system or if the child had moved from one institution to another. When a child left an institution, central government could not tell if the child had been moved, returned to the family of origin, gone to live in the streets, or been adopted. As services developed, service providers could report the numbers of children serviced. However, neither the central system nor the service providers could be certain if the provider counts were multiple services to one child or single services to multiple children.

Based on a World Bank funded pilot project, USAID funded a remarkably spare and streamlined child monitoring and tracking information system (CMTIS) that established a unique identifier for each child in the system to identify the child's family and siblings and to track the services provided. The CMTIS model is expandable and can incorporate health, education, and police records. It is unique in Eastern Europe and can be a model for replication in many countries.

A Meta-factor: The Politics of International Adoption

There has not been a more controversial issue in Romania than international adoption. In 1998, a point system was designed "to promote the worthy objective of encouraging donations from adoption agencies and adoptive parents and thereby providing funds or services for child welfare programs."[8] The system allocated "points" to NGOs which provided child welfare services. Accumulation of points enabled the holders to participate in international adoptions and exchange points for children who could be adopted. The official and unofficial charges collected from adoptive agencies and parents generated money both for the NGOs and for the child welfare system. In most cases, the fees collected were used legitimately to increase funds for needed services, but there were allegations of funds being used for less worthy purposes, such as gifts for officials.

The counties benefited from NGO services and from the influx of cash from adoption agencies and prospective adoptive parents, but this also meant there had to be children to offer in exchange for the points. This system provided little incentive to prevent placement of children in institutions and to keep children with families and in the community. It failed to ensure that decisions about children would be separate from the influence of monetary contributions. (Please see the Coburn and Ambrose report on Adoption referenced below for more details).
Rather than attempting to correct the system and allow a full range of options for children in need of families, Romania took another avenue and stopped all international adoptions.

Romania initiated a temporary moratorium on international adoptions in 2001. Law 273 made this permanent in 2004. Current law permits international adoptions only in the case of a grandparent wanting to adopt his or her grandchild.

Improved Transparency in Funding

In 1999, the tension between adoption corruption and child welfare reform was unspoken. USAID learned of it through NGOs implementing the USAID Child Welfare Reform project (1998-2002). According to the implementers, as the project began successfully to reintegrate children with biological families and place other children in foster care, there was an outcry from the institution directors and county officials. The complaint was that officials were losing large sums of money or services that adoption agencies would pay in exchange for children.
USAID and the U.S. Embassy were one of the first international actors to express concern and to bring the point system under investigation. In 2001, USAID commissioned a study, which determined that the point system made international adoption very susceptible to corruption and that funds designated for improving child welfare could easily be misappropriated.[9] They did not conclude that international adoption should be stopped but rather made recommendations for how to improve the transparency and ensure that appropriate procedures were followed.

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[8] Report on Intercountry Adoption in Romania, Anna Mary Coburn, Mike Ambrose, and United States Agency for International Development, 2001.

[9] Intercountry Adoption in Romania, Coburn, et al.

Many countries have systems of international adoption which both support child welfare programs and operate in the best interests of the child. Adoption programs cost money to administer and some successful international adoption programs charge a fee to cover these costs in a very transparent manner. Several models of good practice in international adoption were mentioned in the Coburn and Ambrose report. Romania, however, did not elect to use these models.

A Political Distraction

Had child welfare professionals addressed the international adoption issue, adoption would have continued on case-by-case determinations of the "best interest of the child." But the issue was not decided by child welfare professionals. Rather, it became a political issue. The Rapporteur for the EU took a hard stance against any international adoption, and the United States took a hard stance in the other direction.

The disagreement hinged on the concept of "permanency." It was U.S. policy that children need permanent living arrangements. In the view of the U.S., foster and institutional care are not acceptable permanent solutions. The Western European view is more accepting of indefinite out-of-home placements. The EU also observed that Romania had a declining birthrate and it had to support substantial social benefit packages for an aging workforce. Ironically, the interests of the individual child were being subordinated once again to the State's need for workers. Romania was caught in the middle, but it was negotiating for EU Accession, so it leaned in the European direction.

The resulting controversy diverted time and energy that should have been directed to child welfare reform. Caught between its two major child welfare donors, Romania was frozen. Donor coordination was imperiled, and NGOs, supported by one behemoth or the other, became polarized. Legislation was delayed while opposing sides edited and re-edited drafts. Through ChildNet, USAID was developing adoption standards, which were placed on hold, waiting for the legislation to be finalized. Since these adoption standards applied to all types of adoption, domestic as well as international adoption was stymied.

It is clear that the type of unregulated international adoption that took place in Romania created a system which encouraged the abandonment of children. However, the current ban on international adoption leaves some children without hope for a permanent family, and denies the opportunity for a true appraisal of what is in the best interest of the child. It is a testament to the good faith and determination of all parties that they ultimately were able to agree to disagree and to proceed with child welfare system reforms that would try to keep children in their families or in familial environments whether or not international homes were available.

APPRAISING THE LEGACY: HOW WELL DID USAID ADDRESS THE PILLARS OF A CHILD WELFARE SYSTEM

USAID funding supported hundreds of activities in Romania from 1991 to the present. Many of them resulted in outcomes that remain and form the foundation of future progress in child welfare. These outcomes are the USAID legacy, and the legacy is visible in every pillar of the child welfare system.

Political Will, Policy and Legislation

Political will was built through training and technical assistance. USAID contributed by preparing the field and training the decision makers through study tours, and by offering technical assistance at all levels.

USAID and the GoR collaborated to draft and adopt legislation, engage central, regional and local governments in the design and implementation of programs, and create Romanian pride and ownership, assuring strong political will and assiduous implementation at all levels.

Fourteen child welfare standards were developed and passed into law; 1,000 mayors from 34 counties were trained in their responsibilities in caring for children at risk or in need of protection. These trainings simultaneously built local political will and capacity. These trained mayors became the early adopters of Community Boards, a USAID innovation.

Community Boards eventually became a preferred practice, and in Law No. 272 of 2004, the GoR promoted the use of Community Boards as support to local government child protection programs. The single most important training activity was World Learning Transit, which in 1998 brought Ministers, high-level civil servants, and some NGOs to the United States to observe the operation of a continuum of community social services, public private partnerships, and cooperating federal, state and local governments. The participants are part of today's reformers.

Child Welfare Services

USAID funds contributed to creating a system of community-based services to replace the institutional system. Foster care, day care, life skills, rehabilitation for the disabled, and centers for at risk mothers exist in almost every county. Demand still exceeds supply, but seedling services are everywhere.

Services and referral services were built. New services were developed in pilot programs. Civil officials and NGO implementers developed their skills, building confidence and trust. Best practices were identified and widely replicated.

Supported by USAID and UNICEF, the public and private child welfare community developed fourteen standards for the newly created services. The process was broadly inclusive, using conferences, workshops, and work groups in a yearlong process which trained the participants as they worked. By the time the final standards were promulgated, most of the child welfare community already had adopted them in practice, having been involved throughout the process.

USAID supported the Child Development Institute to provide services in Romania and to serve as a regional resource for the SEE. The Center provides services such as evaluation and rehabilitation services for post-institutionalized children, referral services for parents who need assistance, and training for pediatricians, child psychologists, and speech and physical therapists. The Bucharest local government has committed to integrate the Institute into its child welfare organizational structure; it is a regional resource.

Service Delivery System

Simultaneously with the creation of a child welfare services system, USAID supported creation of local government systems to deliver services, trained government officials and trained a corps of social assistants. The trainees, in turn, worked with county governments to establish the first social service departments with community services.

USAID funded training for the following categories of people: social workers and managers in county Departments of Child Protection and NGOs; rural social workers to work with mayors and local government to provide services to families; mayors; and volunteers.

USAID built the social work profession by supporting the Federation of Social Workers and the College of Social Work and by developing a code of ethics for social workers. Training materials were developed in case management and case work practice.

USAID introduced the concept of public/private contracting between local government and service providers, creating a flexible, responsive, competitive and creative service delivery model. Current GoR figures estimate that by 2008, 40 percent of all child welfare services will be provided through outsourcing to private organizations.

USAID built a child monitoring and tracking information system (CMTIS) that is a model for the region. For the first time, Romania can track the number of children receiving services in child welfare. The system is capable of expansion to include other areas.

ProChild was created initially as an information link to acquaint local level NGOs with new legislation, but it evolved into a federation that supported the NGOs with information, trainings, workshops, a very successful list serve, and advocacy services.

Coordinated Programs and Funding

USAID participated in donor meetings and coordination of the major donors and National Authority. The ChildNet partnership was particularly successful at coordinating activities.

While EU funding or programs helped to transition old institutions into family type placements, as well as other interventions, USAID focused on creating community services for children and families in lieu of institutionalization. Whereas the EU funded county authorities, USAID funded NGOs to implement services. USAID and UNICEF cooperated to develop the fourteen service standards, assess institutions and plan for disabled children's services. USAID recognized that NGOs brought more funds to Romania than the USG contributed. Thus, USAID supported ProChild to coordinate NGOs and to maintain consistent quality and avoid duplications.

Community Development and Participation

USAID introduced the use of Community Boards to advise and monitor child welfare service delivery at the community level. The government now encourages expanding the existing 2,700 community boards throughout Romania.

USAID supported the Special Olympics which engages young people with mental disabilities in challenging activities in their community, and which organizes and mobilizes civil society volunteers, donors, and family members.

USAID trained public social workers to provide adoptive services for children, families and potential adoptive parents. This has increased the number of parents wanting to adopt Romanian children.

USAID worked exclusively through international and local NGOs, which according to the IMAS report,[10] were the most successful at implementing programs. The implementation of programs through NGOs has proven to be the most efficient approach. NGOs were more flexible, had faster transfer of expertise and know-how, and resources were better directed to beneficiaries. It is worth noting that international donors introduced the novel idea of monitoring program implementation, an idea that had not existed previously and which may improve quality and service development.

Lessons Learned

Reform is an evolution. Each project is built on the progress of the previous endeavor. Looking back to speculate if a different action might have been more effective is difficult because even actions that certainly would have been better might not have been possible. The Romanian experience provides many lessons learned.

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[10] "Assessment of Child Care System Reform in Romania," Institute for Marketing and Polls (IMAS), 2004. http://www.unicef.org/romania/resourses.html

What Was Successful?

1. **Creating a vision for key decision makers.** Creating a vision and communicating that vision to a critical mass of decision-makers is the most important first step. The initial information tour in the United States for high and mid-level child welfare officials showed a cadre of professionals how U.S. child welfare systems were built. They were energized and, on their own initiative, formed a reformers' group to discuss and comment on each participant's plans. Reform began immediately upon their return, before another dollar of U.S. assistance was spent. In the ensuing years, the group has met for reunions to discuss their accomplishments. As other USAID pilots and projects rolled out, the first adopters were counties where the county secretaries understood the program's vision.

2. **Sustaining and extending the vision.** From the beginning of USAID social sector involvement in Romania, USAID played the part of child welfare technical advisor to the GoR. From the time USAID embarked on its system of reform, its direction remained constant. This was tremendously important. It was refined through years of work, and activities changed within projects, but the goal remained the same.

   USAID had consistent staff that knew the history of projects and people, the mistakes that had been made, and the things that had worked. USAID provided technical assistance to the GoR from 1993 to the present. USAID advisors participated in each iteration of the National Authority for Child Protection from the CNPC, the DPC, and the NAPCA to the NAPCR. Each USAID staff person overlapped with her predecessors. This continuity meant that the USAID vision remained consistent over time, and it was consistently communicated to the GoR. This culminated in the ChildNet partnership where the two agencies worked hand in hand.

3. **Developing a Holistic View.** Systems are in homeostasis and need more than one *intervention to change. One cannot close institutions without new services in place, and one cannot put new services in place without government reform.* Attempting to bring about a system change by an isolated pilot is apt to fail. Isolated pilot projects are important for testing the waters, creating public awareness and demonstrating the basics of reform, but they alone will not have systemic impact.

   Child welfare reform will falter unless there is an understanding of public administration and the laws that govern the field. The financial and political incentives of institutions and international adoption had to be understood and accounted for. Some early projects could not be sustained because county budget planning (which had to be based on the prior year's budgets) was not done in time. In USAID's later iteration, ChildNet, a county budget decision to fund an activity became a mandatory part of the application procedure.

4. **A Group Equals More Than The Sum Of Its Parts.** USAID consistently pushed for donor coordination and meetings to bring donors together. All the major donors and

financial institutions agreed on the same goals and together ensured that the closure of institutions would happen much more quickly. USG and EU offered carrots of NATO and EU membership. World Bank extended credit. Altogether, they insisted on Romanian child welfare reform. USAID was successful in Romania, but all those who pressed for reform ultimately share the credit.

5. A Memorandum of Understanding Does Not Make a Partnership. Building trusting relationships is the single most important factor in influencing host government's policy. This process is related to staff longevity, because trust takes time to develop, and to consistent national authorities who need time to digest and adopt child welfare reform goals. It also is related to spending time together and learning about each others' values and beliefs, in order to form these critical partnerships with the host government.

If transfer of power is the ultimate goal, then sharing power is the penultimate goal. Bringing the host country officials and NGO nationals into the planning, budgeting, monitoring and evaluation process is the only way to sustain political will, budgets, and activities.

6. A Partnership Requires Mutual Investment And Joint Project Development. ChildNet partners discussed and agreed on all expenditures of funds. Activities were responsive to needs as perceived both by USAID and by the GoR. Funding was flexible allowing for responsiveness to imminent needs and client demand (e.g., the Mayors training and the community boards). This flexible, shared decision-making model was replicated in the sub-grant process, where each proposal had to feature a partnership between the sub-grantee NGO implementer and local or county authorities with a shared cost. This worked well to sustain the sub-grant activities.

What Should Be Done Differently?

1. Establish jurisdiction of reformed child welfare agencies. The benefits of child welfare reform have been late to come to disabled children. The National Authority for Child Protection, which had control of the institutions targeted by USAID projects, did not have control over the hospital houses, administered by the Secretary for Handicapped or over the special boarding schools administered by the Ministry of Education. As noted earlier, these ministries, for whom child welfare is ancillary to other issues, have not embraced child welfare institutional reform. In 2000, legislation was passed placing all institutions for child protection under the auspices of the County Departments of Child Protection and under the NACPA umbrella. Years later this move still is not completed, and there are still unacceptably large children's institutions. Plans have been developed to reach these institutions and their residents, but these have not come quickly enough. The buildings can be rehabilitated, but the children will have lasting scars. USAID and the GoR have been working diligently with the available resources, but this does not justify not making an earlier rescue of these children. These institutions should have been assessed and rehabilitated earlier and services provided for the children.

2. **Community awareness building.** Establish public awareness and public pride in child welfare. Oftentimes NGOs are confused with civil society; however, most NGO implementers in most USAID host countries reflect the values and assessments of their funders rather than of their fellow citizens. NGOs have not developed support from their communities and average Romanian citizens still do not view community child welfare as a personal issue. If the host government changes, support for reform may change. This could be a critical failure.

   ProChild, a federation of child welfare NGOs, and a notable success of the USAID program, is currently in danger of closing or merging with another child welfare federation because the NGOs who are its members cannot financially support the federation. Will this reverse the progress that has been made? Probably not, since the government and local governments have embraced the reforms, but without popular citizen support for the reform, the risk remains.

   If anecdotal reports are to be believed, abandonment may be almost as high today as it was in the 1990s. Should USAID have focused on changing attitudes about abandonment instead of closing institutions and building services? The European Commission programs funded a large public awareness campaign, "A Children's House is Not a Home," and in the spirit of donor coordination, USAID focused elsewhere. Indeed, until the community-based services were put in place, there would have been no alternative to offer children whose families wanted to abandon them. Most people interviewed believe that closing institutions and developing community-based services was the necessary first step,

   Would social support at the level of the village have made a difference to the number of children who were abandoned? It might have. Mothers leave their babies in maternities and steal away in the night; they are anonymous to the hospital staff but not to the community where they live. Here is a viable point of intervention: an earlier emphasis on community involvement might have impacted abandonment rates.

3. **Cross cutting: enlist other sectors.** As has been discussed at length throughout this paper, child welfare reform could not have happened in Romania without the concurrent reform of local government delivery systems. Democracy and child welfare sectors within USAID were natural partners. They could have collaborated better.

   Child protection was the first decentralized sector and therefore it could have been a good proving ground for democracy programs. Child welfare funds were focused on programs such as NGO capacity development, organizing civil society structures, service development to meet community needs, and training local and county authorities on roles and responsibilities. All of these things sound like democracy and governance programming. The child welfare program did these, not because they were priority child welfare issues, but because these things had to be done in order to allow the system to continue to reform.

   More collaboration between sectors within USAID and between the implementers of the sector activities could have made more of an impact. Joint strategies between health and democracy and child welfare could have produced better results. Involvement of the Health Sector and the Ministry of Health might have brought child welfare reform to neuro-psychiatric disabled children sooner. Involvement of the Democracy Sector might have built more public awareness

and support for child welfare and might have built civil society support for the NGOs who are essential to USAID's public-private service delivery model. This is part of a holistic approach: social systems, economies, governments and reforms do not necessarily fall into neat pigeonholes. Reforms need cross-cutting approaches.

4. **Politics: avoid the International Adoption Debate.** Many view the lack of an international adoption alternative as a failure. At the end of the day, one alternative for abandoned children is missing in Romania, and a huge amount of time and energy was diverted from child welfare reform. Could we have avoided international adoption becoming such a divisive political issue? It is difficult to see what USAID could have done. It was not USAID's role to negotiate on the diplomatic level, and the ongoing development program should have been shielded from the debate.

   Could the problem have been handled diplomatically between the EU and the U.S. early in 2000? Could the European Parliament have been engaged earlier? Many EU member countries are clamoring for international adoptions; it might have been helpful to engage their individual interests earlier.

   Another question to consider is whether other countries in the region have adoption procedures similar to those that existed in Romania. Without proactive measures to ensure transparent and non-corrupt procedures for adoption, the same controversy may arise in other countries, thus leading to a negative impact on children.

THE WAY FORWARD

A one-word response describing what should come next is "more." USAID began a serious attempt at system reform in 1998, and within the past eight years, an extensive system has been put into place, but it is not complete. The following issues still need to be addressed.

Within the Romanian Child Welfare System

Advocacy

- Establish public awareness and pride about children's issues. Help the community see that child rights and protection are a community responsibility.
- Support NGOs to develop community support and fundraising capabilities. NGOs have been reinforced for responding to funders, not to host community support. NGOs need assistance to develop community support and to gain skills in fundraising techniques to ensure their continued existence. NGOs must develop issue-driven constituencies to support themselves either with money, political support, or both.
- Leave in place an NGO federation to coordinate members and to advocate for children's issues.

Local Government Training

- Train mayors and local councils on the new legislation that extends decentralization. They need to be aware of their roles and responsibilities in creating primary and preventive social services.
- Teach mayors and local councils and community boards the processes of community assessment and strategic planning to help the local communities develop social services. This has been done at the county level, and now local authorities need similar assistance to develop and deliver services in municipalities, *communa* and villages.

Prevention Programs

- Alleviate the reasons for separating children from their families by integrating abuse and neglect interventions into family support service modules. Clarify the numbers of children separated from family. The data on this are uncertain because these children reside within multiple systems. This issue is reminiscent of the problems with child

protection figures in the 1990s. Today, UNICEF reports that there are 7,000 abandoned children and the GoR says there are about 2,000. Expanding the current CMTIS system to capture data on children separated from families would increase accuracy and transparency.

- Extend training and systems of abuse and neglect prevention by placing social workers who are responsible to the DPC (and not to the health department) in maternity hospitals to counsel staff and mothers who are at risk for abandoning children. This has been demonstrated to be successful in reducing rates of children separated from families. This simple solution must be a part of every maternity hospital.

Increase Capacity

- There is a high turnover rate in the public services; thus, there is a need to develop an ongoing training process for all staff working in public services for child protection and to establish incentives to keep good staff. Examine why Romania is losing its trained professionals. Are they being lost to other countries and professions, and is this due to low status or low salary?
- Continue training for social workers on new treatment techniques to facilitate change in individuals and families. Families do not magically become able to reintegrate their children; they must be helped to adopt new behaviors and cognitive processes.
- Extend the reach of community based services. Many services such as day care, counseling and rehabilitation are currently available in communities, but the capacity of the existing programs falls short of the number of community members who need such services.
- Develop a permanency planning tool and training to help social workers ensure that children move through the system from temporary to permanent solutions.
- Facilitate domestic adoption. There are now more families certified and waiting for children than there are children who have gone through the procedures to be declared eligible for adoption. Concurrently, there are children who are abandoned but who have not yet been declared eligible for adoption. The authorities must find ways to circumvent red tape and hasten these children into waiting families. In addition to trimming the red tape, more social workers must be trained to work with prospective adoptive parents, children needing to be adopted, parents wishing to relinquish their rights and post-adoptive families.

Improve System Responsiveness

- Continue decentralization from the county to the local level by increasing the number of preventive services available in local communities.
- Improve institutions for disabled children and adults. Some disabled children still live in seriously compromised conditions. Assessments and funds must be available to improve their situation. Because of donor interventions, many disabled young people are in far

better situations than they were previously, but without changes to the adult system, once they turn 18, they face a return to the deplorable situations from which they were previously rescued.

- Assess the remaining institutions and report to GoR. A recent report by Mental Disability Rights International[11] highlighted the fact that there are a small number of children in Romania who remain in need of rescue. There are institutions in the health and child welfare systems that remain decrepit and without modernization. A rapid assessment and identification of these institutions and a plan of action based on the findings should be completed as soon as possible.
- Expand the role of an ombudsman to act as a consumer advocate between citizens and their government on issues pertaining to children. This has been under discussion for some time. There are special offices for children in the Ombudsman's Office but these are not active. Expansion of such an office would be a signal of government concern for children and a helping hand for families and for those who are attempting to improve conditions for children.

Outside Romania

The Romanian child welfare development model should continue to be rolled out to neighboring countries.

- Romania's system of institutions was a natural outgrowth of a communist system. This attitude was not unique or exclusive to Romania. Many of her neighbors have child welfare systems that are built around massive institutions—"orphanages"—that treat children as inventory rather than as people. After years of progress, Romania is still in the spotlight of negative attention while other neighboring countries are in similar situations without the notoriety. In 2003, comparisons of the proportion of children under three years of age in institutions demonstrated that Romania did not have the highest proportion of children in institutions. In fact, the Czech Republic, Belgium, Bulgaria, Lithuania, and Latvia had higher numbers.[12] The Romanian reform should be a model for her neighbors.
- Share the CMTIS system with other countries. This case records/case management system built by USAID in Romania is a model for Europe.
- The President's Emergency Plan for AIDS Relief (PEPFAR) provides funds for countries affected by HIV/AIDS. In the countries addressed by PEPFAR, an ever increasing orphan population threatens to overwhelm existing child welfare systems. A crisis response by overwrought government officials is likely to result in large orphanages. Once these systems are in place, they become self-sustaining players in local economies and difficult to close. Romania's experience, having closed such institutions, and having

[11] Hidden Suffering: Romania's Segregation and Abuse of Infants and Children with Disabilities, Mental Disability Rights International, May 10, 2006

[12] "Preventing harm to children through early institutionalization," European Union Daphne Programme Project, 2003, K. Browne, C, Hamilton-Giachritsis, R. Johnson

created alternative child care systems in their place, provides both a warning and a ray of hope. The Romanian experience should be shared with the PEPFAR countries.

APPENDIX A
CHILDNET PARTNER OBJECTIVES

Strategic Objective USAID Romania

Strategic Increased Effectiveness of Selected Social and Primary Health Care Services for Targeted Vulnerable Populations:

1. Improved legal, regulatory, and policy framework;
2. Improved mobilization, allocation and use of social sector resources;
3. Increased access to quality integrated services;
4. Citizens better informed about social services, rights, and responsibilities
5. Reduced dependence on and use of institutions as a solution for children in need of protection; and
6. Development of and increased use of community-based child welfare programs.

The Romanian National Authority for Child Protection and Adoption (NACPA) - National Strategy for 2001-2004

According to the NACPA Strategy for 2001-2004, the general directions of the reform process for the protection of the child in difficulty or at risk are the following:

1. Preventing and reducing the abandonment of children by their own families, by supporting families in difficult situations;
2. Restructuring existing services and residential care institutions, including services for children with deficiencies or disabilities;
3. Improving, completing, and harmonizing the legislative framework;
4. Promoting adoption as a special measure for the protection of the child, with a special emphasis on encouraging national adoption;
5. Continuing decentralization of the system from the county to the local level;
6. Improving financial mechanisms;
7. Establishing a system of minimum mandatory standards;
8. Creating a national accreditation system for non-governmental organizations;
9. Developing and improving the professional level of human resources; and
10. Creating and developing a national system for the monitoring and assessment of the situation of children in difficulty or at risk.

ChildNet Objectives

In direct cooperation with NACPA, ChildNet is expected to contribute to the:

1. 30% reduction in the number of classic institutions;
2. 50% reduction in the number of children living in classic institutions;
3. Increase in number of community based services to address 75% of the children needing assistance; and
4. Increase in the number of standards for child welfare services to cover all the specific child welfare services provided.

APPENDIX B
CHILDNET RESULTS TO DATE

The chart below reports on the baseline data (June 2001), current results (June 2005) and final target (July 2006) for the following USAID and ChildNet objectives:

1. Number of classic state-run institutions
2. Number of children in classic state-run institutions
3. Percentage of children assisted by community services
4. Number of child welfare services regulated by standards

	OBJECTIVES			
Results	**# 1**	**# 2**	**# 3**	**# 4**
Baseline	340	48,363	52%	1
Current	226	25,808	68,6%	20
Final target	238	24,131	75%	16

Adequate progress has been achieved on all four objectives and it is anticipated that final targets will be reached at the close of the ChildNet program.

APPENDIX C
USAID FUNDED CHILD WELFARE PROJECTS

AGENCY/ORG. RECEIVING DIRECT FUNDING	AMOUNT in 000s	DATES	SUB-GRANTS	PURPOSE OF FUNDING	RESULTS
PACT* In consortium with: World Vision Relief and Development; Project Concern International	$2,022	1991-1993	*Salvati Copiii; *Romanian Committee for Adoption *HOLT International	Children of Romania: -To address immediate needs of institutionalized children by establishing systems within the Romanian infrastructure to provide physical, psychological and social rehabilitation services to children at risk. To address adoption or adoption related concerns. To provide organized teams of American volunteer orthopedic, plastic, ear-nose-throat and ophthalmologic surgeons/nurses and physical therapists to address the needs of disabled children.	The framework for community based, family and child focused services was introduced in Romania to serve as the foundation for future reform. The social work profession was re-established in Romania. -Census surveys of two types of orphanages were conducted. Over 300 children received surgery and thousands benefited from developmental evaluation and other therapeutic interventions.
PACT	$250	1991-1993	N/A	Romanian Adoption Committee: To provide the committee with technical assistance, equipment and logistical support so that children's rights could be protected in the adoption process.	The new Romanian Adoption Committee established laws and procedures to manage international adoptions.
Operation Smile	$162	1991–1993	N/A	To support the development of a Romania chapter of volunteers for humanitarian assistance to correct physical deformities, especially among institutionalized children.	Established a sustainable program that is now supported by alternative funds. Teams specializing in plastic and orthopedic surgery come annually to correct deformities that put children at risk of institutionalization.

AGENCY/ORG. RECEIVING DIRECT FUNDING	AMOUNT in 000s	DATES	SUB-GRANTS	PURPOSE OF FUNDING	RESULTS
Catholic Relief Services	$130	1991-1993	N/A	To provide humanitarian assistance to hospitals for handicapped children.	Assisted a children's hospital in Bucharest.
UNICEF	$2,000	1991-1993	N/A	Support for Abandoned Children: To provide emergency humanitarian assistance for sick and disabled children in orphanages and other institutions. Assist in establishing the social work profession.	Provided emergency help to the institutions for children-medical supplies and equipment; health education materials; training and technical assistance. Supported networking among NGOs and developed a newsletter to share lessons learned.
UNICEF	$1,086	1996	N/A	Support and Education for Children and Families Pilot Project: To develop a curriculum for pre-school education and to test a curriculum for mainstreaming handicapped children in public schools.	Families became involved with children's issues. The Romanian Ministry of Education has adopted the pre-school curriculum.
UNICEF	$775	1997	N/A	Selected Services for Children: To provide policy recommendations to the Romanian Government (GOR), NGOs and donor agencies, based on studies, pilot projects and strategies; To elaborate an operational framework for implementing a National Plan of Action for the Protection of Children.	Initiated training in permanency planning and community-based services for child protection authorities in six districts. Contributed to the development of the new Strategy in Child Protection for the GoR that led to the new law completely changing the approach in the child protection system in Romania.

AGENCY/ORG. RECEIVING DIRECT FUNDING	AMOUNT in 000s	DATES	SUB-GRANTS	PURPOSE OF FUNDING	RESULTS
Brothers Brother	$88	1991-1995	N/A	Provision of humanitarian assistance to selected orphanages and poor families through the Romanian Orthodox Church network.	A one-on-one mentorship program for at-risk children was established.
Feed the Children	$1,830	1991-1996	N/A	Renovation of Camin Spitals: refurbishing, renovating and construction of facilities for institutionalized children.	In 9 facilities, living conditions for children were improved, especially nutrition, heating and sanitation.
Project Concern International	$1,487	1991-1996	N/A	Transitional Living Center: To teach mild and moderate handicapped children basic life skills and to enable them to move from institutions to an assisted living environment or to independent living.	A demonstration group home was set up to train formerly institu-tionalized handicapped adolescents for living and working in a community. The demonstration was successful but the local authority refused to take over the initiative.
World Vision Relief Development	$1,000	1991-1996	Romanian Association Against AIDS (ARAS)	Handicapped Services/HIV/AIDS: A) Handicapped Services provided staff training for independent living programs in specialized institutions for children with mild and moderate handicaps. B) HIV/AIDS worked with ARAS, strengthening the branch in Constanta and providing support to families with HIV+ children.	Professional staff members, trained by WVRD in a multidisciplinary approach of working with handicapped children and young adults, were hired in specialized institutions for children with mild and moderate disabilities.

AGENCY/ORG. RECEIVING DIRECT FUNDING	AMOUNT in 000s	DATES	SUB-GRANTS	PURPOSE OF FUNDING	RESULTS
Support Centers of America, International	$828	1993-1995	National Association of Social Workers (NASW)	NGO Strengthening: Capacity building of local non-governmental organizations that provided social assistance to families at risk of abandoning their children. Created a professional association for people working in child welfare and social protection.	Provided training and technical assistance to 71 local NGOs. The Romanian Association for the Promotion of Social Work is still playing a role in advocacy for the social work profession, professional standards, procedures and curricula.
WACAP (World Association for Children and Parents)	$426	1993-1995	N/A	Permanency Planning in Arges/ Caras Severin: Created a Romanian NGO and strengthened its capacity to provide social services to prevent abandonment reintegrate Romanian institutionalized children with their families or assist domestic adoption.	The Romanian NGO that the project created and trained is still in existence today, providing child welfare services in Caras Severin, working with city and county officials.
Holt International Children's Services	$1,871	1992-1996	N/A	Future of Romanian Children: The project introduced permanency planning through for demonstration components - family reintegration; temporary foster care; domestic adoption; and an HIV program in Constanta and Bucharest.	These demonstrations brought a new approach to child protection. They were included in the Government Strategy (1997), as components of the new approach. Nearly 3,500 children were served: almost 1700 remained or returned to their biological family; 70 children (6 children living with HIV infection) were placed in less-restrictive environments (foster care); 20 children were adopted nationally.
Holt International Children's Services	$231	1997-1999	N/A	Pregnancy Counseling and Prevention of Abandonment: To create and develop pregnancy counseling services in the areas of Bucharest, Constanta and Mures	The new Directorates for Child Protection in Bucharest and Constanta adopted these key services to counteract child abandonment in maternity hospitals.

AGENCY/ORG. RECEIVING DIRECT FUNDING	AMOUNT in 000s	DATES	SUB-GRANTS	PURPOSE OF FUNDING	RESULTS
Holt International Children's Services	$1,063	1998- 2002	N/A	Child Welfare and Protection Project: To significantly reduce the number of abandoned children in two target counties, Iasi and Constanta. The project will develop alternative services for children at risk of abandonment, in need of protection, or abandoned in institutions.	Staff were trained and started providing quality services for children with HIV, prevention and abandonment in maternity hospitals, crisis intervention, and domestic adoption. The majority the services are in place.
Department of Health and Human Services (DHHS)	$2200	1998-2000	N/A	To promote child welfare reform, working with the Department for Child Protection and to provide training in child protection.	Technical Assistance on child welfare policy. A child welfare monitoring and tracking information system was created and is now fully functional.
World Learning	$2,750	1997-2000	N/A	Social work training, distance education project, and small child welfare grants.	Trained child welfare decision makers and practitioners; supported the professional associations of social workers develop the code of ethics; developed the first sets of child welfare standards in Romania; piloted sub-grants to Romanian NGOs.
World Vision	$167	1997-1999	N/A	Preventing Child Abandonment in Cluj and Constanta by addressing families' medical, economical and social risk factors.	Small business grants and training for families in risk of abandoning their children, support groups, health education in schools and trained community leaders to continue program's initiatives and the community support activities that were initiated in the project.

AGENCY/ORG. RECEIVING DIRECT FUNDING	AMOUNT in 000s	DATES	SUB-GRANTS	PURPOSE OF FUNDING	RESULTS
World Vision	$6,370	1998-2002	Bethany Christian Services	Child Welfare Project- To create a continuum of community based, family-focused services that will reduce the dependency on institutions in the system of Child Protection in three target counties: Constanta, Cluj and Iasi. To reduce by 31% the number of institutionalized children in the three targeted areas.	The project is ongoing and the services are in place. Results: Memoranda of Understanding were signed with all three county Directorates for Child Protection. In Iasi, one of the Placement Centers will be closed. The number of children in institutions decreased by 18.3%. –Significant reductions in number of institutionalized children are seen in all three targeted areas.
Miscellaneous Child Welfare Activities and Health	$1,000	1991-2000	N/A	Miscellaneous local NGO grants and technical assistance provided by USAID staff in support of child welfare and health.	Improved family focused, community-based services and health services in Romania.

AGENCY/ORG. RECEIVING DIRECT FUNDING	AMOUNT in 000s	DATES	SUB-GRANTS	PURPOSE OF FUNDING	RESULTS
World Learning	$16,400	2001-2007	N/A	ChildNet Program - To continue the reform of the child welfare system by creating community-based services, increasing the quality and regulations of the newly created child welfare services, improving human resource and procedures.	ChildNet provided 96 sub-grant in 38 of Romania's 41 counties. Over 19,000 children received direct child welfare services; functional partnerships were initiated in all 38 counties between NGOs and county and local authorities; Romanian small, grass-roots NGOs were trained and became more sustainable. Training was provided for a large range of professionals and decision-makers in the child welfare system. Standards were elaborated and legislated to regulate the provision of services and to increase the quality of services provided. A National Federation of Social Workers was created and supported to create the College of Social Workers, the ethical and regulatory professional body. Community Boards were piloted, legislated and expanded country-wide. ChildNet continues to be implemented at the date of the report.

PACT: Private Agencies Cooperating Together, a Consortium of USPVOs working in the field of child protection field to demonstrate alternatives to institutionalization as pilot projects.

TOTAL: $44.7 MIL.

In addition to this amount, in July 2000 USG and GoR signed a bilateral agreement allocating $14,000,000 from Romania's debt interest to the U.S. to be used for Romania's economic reconstruction. The GoR in turn allocated $14,000,000 to cover costs and debts acquired by the child welfare institutions. The amount was determined by the financial crisis generated in the child welfare system by the de-centralization of the tax collection system to the county level.