**Lithuania‘s written submission for the Day of General Discussion: “Children’s Rights and Alternative Care”, 16 - 17 September 2021“**

**High-quality alternative care**

There is wide recognition of the adverse impacts of institutionalization on child’s developmental outcomes and children’s well-being as well as on the implementation and protection of their rights. Therefore, there are many efforts implemented in the countries all over the world to reduce the numbers of children living in institutional care, such as promotion of the care in the family settings (including foster care in the family, kinship care, professional foster care and other forms of family-based care). It is often believed that when a foster care family is found for a child and child’s placement in such family is ensured this already is a success case since the child is protected from institutional care. However, Lithuania’s experience shows that the identification of the possible foster family for a child and child’s placement in the family is not the last step that must be done to ensure high-quality alternative care. It must be taken into consideration that children who are left without parental care almost always have several specific needs related to their life experience. I.e., children do have a lot of traumatizing experiences related to violence, incl. long-term neglect, abuse, other forms of exploitation, to their loss feelings (loss of their biological family and other close connections), to attachment issues and similar. All this often results in behavioral and emotional challenges in children that are a common issue in child foster care process. In turn, that can result in the breakdowns of the foster care in the family, i.e., when a child placed in the foster care family is send back to the institution or another foster care family due to the crisis or other reasons when the foster parent is not able and (or) does not want to take care of the child anymore. Therefore, we believe that it is important to see the placement of a child in the foster care/family-based care as the first step and not a final stage, since there is a need for the quality constant support of the foster care families and children placed in these families to help children deal successfully with their traumatic experiences and avoid repeated replacements of the child in care. Further, we would like to share Lithuania’s experience in the development of such support.

Although foster care, including care in family settings was in place in Lithuania for a long time, for many years only financial support was provided to foster parents plus fragmented counselling, additional trainings and group meetings performed by the GIMK trainers[[1]](#footnote-1). The discussions with the foster parents, as well as information and experience of the non-governmental organisations (hereinafter – NGOs), showed that despite the importance of the financial support, foster parents need in addition constant assistance from the professionals who can help with various challenges faced during foster care. These challenges can be related to problems with child’s upbringing, behavior, understanding child’s needs, dealing with exhaustion and similar. For these reasons, in 2015 NGOs emphasized the need to provide foster parents with the additional support next to financial support, and started to provide psychological counselling, social counselling, self-support groups, legal assistance and other similar forms of assistance. In 2018, such service became a nation-wide model, legally established in the Social Services Law. Under this law, Foster Care Centers are established as one of the service available to foster parents, adoptive parents, members of a family-based residential facilities and professional foster parents in every municipality. In addition to the establishment of the Foster Care Centers in the Law on the Social Services, their activity, roles, duties, responsibilities, other aspects were comprehensively described in the bylaw – “Description of the organization and monitoring of the quality of activities of Foster Care Center and professional foster parent taking care for a child”, developed by the Ministry of Social Security and Labour.

As of today, there are in total 66 Foster Care Centres across 60 municipalities. These Centres are also responsible for the promotion of foster care and adoption, for the organization of the GIMK programme training, identification, and selection of new foster parents (regular and professional foster parents) and adoptive parents. All foster parents are assigned to a Foster Care Centre which is required to offer support to every family who is taking care of a fostered child. However, not all families receive intensive or long-term assistance and services (this depends on the individual needs of each child and family). On the other hand, adoptive parents are not required to use the services of Foster Care Centers unless they feel that they need the support. This practice is carried out to respect confidentiality of the adoption process.

However, some challenges are still present when it comes to placements in alternative care of children with disabilities or complex behavioral problems. Therefore, solutions that meet the best interest of children must be promoted. E.g., it might be useful to implement specialized, evidence-based programmes aimed at foster parents, professional foster parents, such as e.g., Treatment Foster Care Programme based on the specialized training to care for a wide variety of children and adolescents, usually those with significant emotional, behavioral, social issues or medical needs. Cross border cooperation (dissemination of good practices and peer-to-peer learning) could be helpful too. More attention must be given to better matching of the foster families with the child (i.e., child’s needs and best interest must be the primary aspects of the placement and not the availability of the foster families), and children must be provided with child-friendly information how the matching decision was made and actively participate in it.

Given above, one of the most important characteristics of the high-quality alternative care is the access of the foster (and adoptive) families and children in their families to high quality services aimed at the solution of the specific challenges and needs faced by children left without parental care. Such support must be provided as soon as the child is placed in the foster family (this way, it will help to prevent and solve challenges related to the adaptation process in a new family) and provided consistently through the whole care process (the intensity of the services should be based on the individual needs of the child and family).

**Effective strengthening of the families and separation prevention**

To minimize the number of children in institutions, and in general, country’s dependance on the institutions, first of all, all possible efforts must be made to maintain children with their families, except extreme cases when the situation causes or can cause danger to child’s health and (or) life, and (or) development. In Lithuania, to limit the number of children in the care institutions and in care system in general, several initiatives were implemented during few last years. E.g., the system of protection of children's rights underwent a major reform in 2018, which led to centralization of the system, unified assessment of the possible violations of the rights of the child, and the introduction of new measures such as case management and mobile teams service. Mobile teams are the teams of three professionals (psychologist, social worker and a professional for the addictions treatment) under the State Child Rights Protection and Adoption Service under the Ministry of Social Security and Labour. Mobile teams provide mobile intensive work for families in crisis, where serious violations of the rights of the child have been identified, such as violence and abuse. Their aim is to solve the crisis and help to remove identified risk factors, and this way, to keep the child in the family. Case management was developed with the aim to ensure that when there is a need for complex help and assistance to family and children growing up in this family, all needed help and services are provided in coordinated manner. Case manager is a social worker, coordinating the process of the case management, who is appointed by the head of the municipal social services institution or other institution authorised by the municipality to provide social services to families within the municipality or a person authorised by the head thereof. I.e., it means that there is a specialist who can 1) perform a comprehensive assessment of the child’s and family’s needs; 2) ensure child’s and family’s active participation in the help and service providence process; 3) ensure that the child and the family receive all necessary complex support and services, and these services will be monitored and evaluated throughout the whole process. Case management helps to ensure that the child and the family receive all necessary complex support and services, that cover all important areas, i.e., social, health, education and other areas, and this way, the help provided to the family is wholesome, comprehensive, and not fragmented.

Moreover, in 2019 the system of the protection of children’s rights in Lithuania was further amended, which resulted in additional new measures such as the temporary custody of a child without limiting parental rights and obligations of the parents. Since 1 January 2020, in cases of serious violations of children’s rights (e.g., violence, abuse, dangerous behavior of the child him/herself that parents are not able to deal with or do not want to deal with, etc.), the child is initially placed in the care of relatives, family friends or other persons close to the family and the child. The placement can be of the child alone or together with both parents or one parent (the placement together with the parent/s can be applied only if there is no abuse, violence or other mistreatment of the child or the possibility of such from the parent). Such a measure can last up to 30 days and can be extended once for the same period. During this time, intensive services are provided to the family. If the child has no relatives or friends, or if the parents cannot agree among themselves who could take care of the child, temporary custody can be set up at the crisis center. In the crisis center the child can be placed either with one or both parents if this does not pose danger to the child. Such decisions are made by child rights protection specialists together with child’s parents. These and other measures seem to have an impact on the keeping the child in the family and preventing separation.

Another important step is the gradual development of preventive services to children and families, and the efforts to form public opinion that social services are not only for those families who face major risks or crisis. In relation to this aim, Lithuania tries to ensure availability and accessibility of services to all families, does not matter if they need complex services and more intense intervention, or only some support. E.g., according to the Action Plan for the Provision of Integrated Services to a Family for 2016-2020 (extended to 2023), projects are being carried out in all municipalities of Lithuania, during the implementation of which families can participate in the trainings on positive parenting, receive psychosocial support, family skills and socio-cultural services, meditation, child care and transportation services. The funding of these projects is ensured by the European Social Fund through the measure “Integrated Services for Families” of the Operational Programme of the European Union Funds Investments for 2014-2020 (hereinafter –Measure). EUR 35.86 million were allocated for this Measure for 2016-2023. Too, from 1 January 2020 case management is not only available to families where possible child rights violations were identified (as it was in Lithuania until 2020), but it can be too initiated at the request of the child’s parents or the organizations, institutions providing services/working with the child and family. The aim of all these mentioned measures is to ensure that children and families are provided with the necessary assistance and services not only when major risks or crisis are already in place, but with the aim to effectively strengthen all families and this way, prevent situations that can later lead to more serious problems, and in turn – to separation.

Another important aspect of preventing children from being separated from their families and getting into care system, is the need to not only provide usual services that were and are in place for children and families for many years, but also to assess which services are lacking and ensure the development of such services. In Lithuania e.g., for several years there is a lack of high-quality services for children and youngsters with complex behavioral challenges. Therefore, in 2020, Lithuania decided to pilot the implementation of the Multidimensional Family Therapy Program (hereinafter – MDFT Program). MDFT Program is an evidence-based, integrated, comprehensive, family-oriented behavior change program for children and young people with complex behavioral problems. The target group are children and young people aged 11-19 (in Lithuania 11-17 y.o.) who are characterized by socially unacceptable behaviors or multiple behavioral problems (e.g., alcohol or other psychotropic substance abuse, aggressive behavior, severe school problems, etc.). It is important that the MDFT program’s specialists perform intense work not only with the child / young person, but also with his/her close environment, which has a significant impact on the child's behavior, i.e. parents and other family members, school, the child's leisure activities, and similar.

**Support needed by care-leavers**

During international project “Prepare for Leaving Care”, implemented in Lithuania during 2016-2018 (involving Lithuania, Latvia, Croatia, Spain, Italy and Scotland) young people themselves named that they lack confidence, lack the courage to manage their daily life business in various institutions, do now always know how to organize different things in life, how to pursue a professional career, etc., so it is important for them to have a person to accompany them at the start of their independent life. Therefore, it is not only important to have in place services, but too, ensure the constant, individualized support of the case manager/mentor to a young person who is a care-leaver or is from family living in precarious situation who would help to learn to deal successfully with different issues related to the daily life of a young person. Too, services that ensure smooth transition from childhood to independent life must be developed – a person does not become fully independent only because the person reached the age of 18. Unfortunately, many social systems of different countries do not have in place mechanisms for such successful transition that is especially important to most vulnerable youth.

1. GIMK trainers are the specialists approved by State Child Rights and Protection Service under the Ministry of Social Security and Labour of the Republic of Lithuania to perform search, selection, training and evaluation of the possible foster parents, professional foster parents, adoptive parents. In Lithuania there is one mandatory training programme called Training and consultation programme for foster parents, professional foster parents, adoptive parents, and community-based child care home staff, in Lithuanian called in short GIMK Programme. Accordingly, specialists who can perform training and evaluation according to GIMK programme are called in short GIMK specialists. [↑](#footnote-ref-1)