Research article

Implementation of deinstitutionalization of child care institutions in post-soviet countries: The case of Azerbaijan

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ABSTRACT

Institutional care has proven to be detrimental for child development. This study examined the status of the State Program on Deinstitutionalization and Alternative Care (SPDAC), a public policy aimed at transforming 55 institutions covering 14,500 children during 2006–2016 in Azerbaijan. The success of this public policy was crucial for the country's entire child welfare system. The study used a crosssectional, descriptive, exploratory, and qualitative method. Data were collected through in-depth, semistructured interviews and archival resources. Twenty key informants were selected through a purposive sampling strategy. They led projects or were heads of departments related to implementing the SPDAC at government agencies, national or international nongovernmental organizations, UNICEF, or as social workers in newly established alternative services. Interviews were analyzed in TAMSAnalyzer. Themes supporting possible explanations such as lack of political will, weak child protection systems, weak civil society, illequipped human resources, absence of alternative services, and low levels of knowledge of children's rights emerged in the analysis. The findings could contribute to research on child welfare reform and reflect hidden factors behind policies to guide practice in former Soviet Union states and countries rich in natural resources such oil, gas, and minerals. The primary finding of a lack of political will raises the question of how to create political will and how to motivate government officials to invest in the welfare of children.

1. Introduction

The institutionalization of children in large-scale facilities such as orphanages, boarding schools, and similar residential care facilities (UNICEF, 2005) is typically neither built around the needs of the child nor does it resemble a family situation. It displays the characteristics of institutional culture: depersonalization, rigidity of routine, block treatment, social distance, dependence, and lack of accountability (Eurochild, 2014). The negative impact of institutional care on children's health, development, and life chances has been well documented. Children in institutions are at risk of being deprived of basic care and support and are exposed to harsh living conditions and disciplinary practices (Ismayilova, Sswemala, & Huseynli, 2014; Meese, 2005; Zeanah et al., 2003). Institutional care is frequently associated with poor health outcomes, inadequate nutrition, exposure to environmental toxins and infectious diseases, and limited cognitive stimulation (Eapen, 2009; Meese, 2005).

1.1. Former Soviet Union Republics

Over 2 million children live in institutions worldwide, including 1.2 million children in the former Soviet Bloc (UNICEF, 2015b).

In the late 2000s UNICEF, along with global children's rights organizations, started promoting the deinstitutionalization of children. Governments of former Soviet Bloc countries have taken measures to end an era of institutions and replace them with family-based alternative services (Ismayilova et al., 2014). Seventeen years have passed since the dissolution of the USSR, but progress is very limited, especially in the former Soviet Union Republics (FSUR), most of which have shown little or no progress in deinstitutionalization (UNICEF, 2015b). Among reasons for the lack of progress in FSUR countries, in addition to limited knowledge on the part of officials and a lack of viable alternative services, the lack of financial resources has been identified as a major obstacle (Anghel et al., 2013; Ismayilova et al., 2014). However, the resource-poor Republic of Georgia has eliminated almost all its residential institutions and established a system of alternative care (Greenberg & Partskhaladze, 2014). Resource-poor Moldova and Kyrgyzstan also have shown relatively better progress in the deinstitutionalization process than the resource-rich FSURs (UNICEF, 2010). On the contrary, six countries—Russia, Ukraine, Azerbaijan, Turkmenistan, Uzbekistan, and Kazakhstan—rich in natural resources such as petroleum, natural gas, and minerals and better financial resources have shown no or limited progress in the deinstitutionalization process (UNICEF, 2015b). These noticeable differences in the progress of these countries raise the question of whether financial resources are the major obstacle for success in deinstitutionalization. As a resource-rich FSUR, Azerbaijan offers a useful case study because it exemplifies the problems of the other FSURs and provides easy access to data for the lead researcher.

1.2. The case of Azerbaijan

Azerbaijan is one of the leading oil and gas exporting countries in the world. Oil and gas revenues constitute about 60% of the gross domestic product, and it is one of the fastest developing economies among FSURs (World Bank, 2014). Over the past 2 decades Azerbaijan has changed from a struggling newly independent state to a major regional energy player (BBC Monitoring, 2017). The government of Azerbaijan has recognized the detrimental effects of institutionalization on children and in 2006 endorsed the State Program on Deinstitutionalization and Alternative Care (SPDAC) for 2006–2016 (Ministry of Education of Azerbaijan Republic, 2015; UNICEF, 2009b). The adoption of the SPDAC was a milestone in the broader child welfare reform process, and its effective implementation was key to the success of the entire reform. The major focus of the SPDAC is reducing the number of children placed in institutional care and establishing a sustainable system of alternative child care and family support services such as foster care, small group homes, respite care, day care, and rehabilitation centers to replace large-scale institutions.

In Azerbaijan, the plan was to phase out institutional care gradually and move towards more family-oriented community-based services. Whenever possible, the SPDAC has also tried to transform existing large-scale institutions into community-based services, such as rehabilitation, day care centers, and inclusive education schools based on local community needs (UNICEF, 2009a). The program also aimed at retraining over 3000 employees working in 55 institutions, including teachers, teaching assistants, psychologists, and speech therapists to place them in the newly established system (UNICEF, 2009a). The main implementers involved in this process are the Ministry of Education; the Ministry of Labour and Social Protection of the Population; the Ministry of Health; the State Committee on Family, Women and Children Affairs; and UNICEF (2009b). Civil society has also mobilized to support effective implementation of the SPDAC, but it has gone slowly. The system of alternative services has not been established, and institutions have not been transformed as planned. Only eight out of 55 institutions have been affected by the SPDAC, and the number of children in institutions decreased only from 14,500 to 10,000 between 2008 and 2014 (UNICEF, 2015b). Institutions remain the major providers of care services for orphans, social orphans, and children without parental care.

The aim of this exploratory, qualitative study was to use in-depth interviews and thematic analyses to explore the reasons for this slow progress by investigating insiders' perspectives and exploring reasons offered by key informants in Azerbaijan to draw conclusions about this phenomenon.

2. Background

2.1. Azerbaijani context

Azerbaijan is an upper-middle-income country, ranking 76th out of 187 on the Human Development Index by the United Nations Development Programme (2007); World Bank (2016). It has a population of 9 million, 3 million of whom are children (State Statistical Committee of the Republic of Azerbaijan, 2012). The number of children with disabilities is 60,000, and street children number between 2000 and 4000 (Ministry of Labor and Social Protection, 2011; UNICEF, 2015a). As in all post-Soviet countries, in Azerbaijan the national child care system is characterized by large-scale institutions such as orphanages, boarding schools (*internats*), and special schools for children with disabilities and behavioral problems (UNICEF, 2009b). When the SPDAC was adopted, 55 institutions cared for 14,389 children, both resident and nonresident (UNICEF, 2009b). The main reason for institutionalization was poverty (47%; UNICEF, 2009b). The need for special education for children with disabilities was the second main reason (30%). Single parenthood (28.2%), poor living conditions (24.2%), parental divorce (20.6%), and parental sickness and disability (19.6%) were other leading reasons (UNICEF, 2009b).

Out of 14,389 children, only 4055 (28%) resided in institutions (children's homes, orphanages, homes for juvenile delinquents, infant homes, and homes for children with severe mental disability). The rest were sent by families for education, spending either every night or every weekend at home as institutions provided food, school supplies, and medical services, which families were hard pressed to afford. Forty percent of those children had both biological parents living in the home, and 45% had one (Ministry of Education of Azerbaijan Republic, 2009). In terms of sex, 72% were male and 28% were female (UNICEF, 2009b); this disparity could be explained by patriarchal values—the preference for educating boys, with girls staying at home to help with household chores—and