



JOINT RECOMMENDATIONS FOR THE EU STRATEGY ON THE RIGHTS OF THE CHILD

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hope and homes
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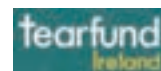
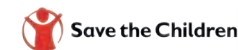
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INTRODUCTION

Millions of children around the world live in institutions – including so-called “orphanages”, residential special schools and reception centres¹ – that expose them to a catalogue of human rights abuses and enhanced risk of violence, and which cannot meet their needs.² Institutional settings are a breach of human rights enshrined in a number of international policy and legal instruments. This includes the Convention on the Rights of the Child (UNCRC) and the Convention on the Rights of Persons with Disabilities (UNCRPD), to which all Member States are parties. In the case of the UNCRPD, the EU itself is a party. Moreover, the EU has committed to the transition from institutional to family- and community-based care (also known as deinstitutionalisation) in several policy initiatives and funding instruments.

The upcoming EU Strategy on the Rights of the Child that the European Commission intends to publish in 2021 presents a unique opportunity to further mainstream children’s rights, and more specifically to **strongly reaffirm the EU’s commitment to the transition from institutional to family- and community-based care for children across its internal and external policies and instruments.** In order to effectively protect the rights of all children **and implement the 2019 UN Resolution on the Rights of the Child³,** the vulnerable and often invisible group of children living in institutions or at risk of being institutionalised must not be forgotten in the strategy.

This paper contains joint recommendations on **how to include children’s right to family- and community-based care in the EU Strategy on the Rights of the Child (hereafter Child Rights Strategy).**

INSTITUTIONALISATION OF CHILDREN

There are numerous definitions of the term ‘institution’.⁴ The Common European Guidelines on the Transition from Institutional to Community-based Care define institutions for children “as residential settings that are not built around the needs of the child nor close to a family situation, and display the characteristics typical of institutional culture (depersonalisation, rigidity of routine, block treatment, social distance, dependence, lack of accountability, etc.)”.⁵

Children who grow up in institutions can experience attachment disorders, cognitive and developmental delays, and a lack of social and life skills leading to multiple disadvantages during adulthood.⁶ Long-term effects of living in institutions can include severe developmental delays, disability, irreversible psychological damage, and increased rates of mental health difficulties, involvement in criminal behaviour, and suicide.⁷



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Supported by Lumos, Dima is now Isus’s foster parent. After years in Bulgaria’s notorious Krushari institution, he now has a mother and a loving home.

IMPACT OF COVID-19

The COVID-19 pandemic, and the accompanying measures put in place to control it, are having a dramatic impact on the most vulnerable children, families and communities, compounding existing structural weaknesses in child protection and welfare systems.⁸

In the long-term, the socio-economic impact of the crisis, coupled with strained government services, will test the capacity of vulnerable families to care for their children. Ultimately the number of children at risk of separation, in need of additional support, or in alternative care is likely to increase.

As older adults are particularly at risk from the virus, grandparents will be less available to step in to care for their grandchildren. In some cases, parents and other primary caregivers may be able to rely on other family members and relatives to care for their children; in other cases, alternative care arrangements will be needed.

In this context, it is essential to pre-emptively scale up the capacity of quality family-based care and social protection systems to enhance family resilience and prevent unnecessary family separation and recourse to residential care.

It should also be ensured that child protection systems are more inclusive and children in migration can access such services, with a particular focus on mental health services for adolescents and services for survivors of sexual exploitation and abuse.

The extraordinary situation imposed by the COVID-19 outbreak should therefore be taken into account while drafting the Child Rights Strategy and enhancing family resilience should be one of its guiding principles.



When the Coronavirus crisis hit and the access to family strengthening services at the Community Hub stopped, Valerie had no means of providing for her children. Thanks to emergency support, the family received essential food and hygiene supplies.

© Olivier Umukura

Georgi spent the first six months of his life alone in an institution in Bulgaria. Thanks to specialist support, he was reunited with his parents.



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KEY PRINCIPLES

In order to reach its full potential, we advise that the Strategy should be built around a set of key principles. The Child Rights Strategy should:

- Be underpinned by the UNCRC and the UNCRPD;
- Be aligned with the UN Sustainable Development Goals and the 2030 Agenda;
- Be aligned with other internal and external EU policies, including the EU Action Plan on Human Rights and Democracy 2020-24, the European Parliament's Resolution on the Rights of the Child, adopted in November 2019, the New Pact on Migration and Asylum, the post-2020 Strategy for Disability, the post-2020 Initiative for Roma Equality and Inclusion, and the Action Plan on Integration and Inclusion;
- Have a long-term vision (10 years, in line with the 2030 Agenda) but be reviewed mid-term (in 2024 at the end of this European Commission's mandate) to adjust the priorities of the Strategy from 2025 to 2030;
- Be action oriented: the Child Rights Strategy should include key actions for the European Commission, the Council, EU Member States, the European External Action Service (EEAS) and partner countries, making the Child Rights Strategy an action-oriented framework. A Child Rights Action Plan, accompanying the Child Rights Strategy, should be drafted to articulate timelines and milestones for implementation, based on a thorough needs analysis;
- Be properly financed: EU internal and external funding instruments as well as national budgets should support the different priorities and actions of the Child Rights Strategy.

RECOMMENDATIONS

The Child Rights Strategy should:

1) Condemn institutionalisation as a harmful practice and explicitly recognise children in institutions as a vulnerable group

Over 80 years of research from across the world has demonstrated the significant **harm caused to children in institutions who are deprived of loving parental care and who may consequently suffer life-long physical and psychological harm.**⁹

Research consistently demonstrates that the majority of children in institutions are not 'orphans',¹⁰ but are placed in institutions due to reasons such as poverty, disability, marginalisation, migration, a lack of family support services in the community or as a result of trafficking.¹¹

When parents feel they cannot meet their children's needs, for example due to poverty and a lack of support, or the public authorities decide to place the child in care, this may lead some to believe that placing one or more children in an institution is a positive choice that will provide their children with a better future.

Children with disabilities are even at greater risk of being institutionalised, due to the lack of support services available to the family, and a lack of inclusive education in the community. With a little additional support, these children can grow up in birth, extended or foster families: part of the community.¹² Similarly, children with minority, ethnic or recent migrant background are overrepresented in institutions.¹³

Over the years the EU has **embedded its commitment to promoting deinstitutionalisation within EU law, policy, and its use of funds.**

In 2010, the EU ratified the UN Convention on the Rights of Persons with Disabilities (UNCRPD). In doing so, the EU and Member States have committed to ensuring that everyone, including children with disabilities, are given the right to live independently and be included in the community (article 19 and 23 UN CRPD, UNCRPD General Comment 5).

The EU also introduced the **ex-ante conditionality on social inclusion 9.1 in the European Structural and Investment Funds Regulations in the 2014-2020 programming period, with a dedicated investment priority on the transition from institutional to community-based care.**¹⁴

This commitment has been further reaffirmed with the introduction of enabling conditions in the draft Common Provisions Regulations (CPR) for the 2021-2027 programming period,¹⁵ and by identifying deinstitutionalisation among the priorities for investments in Cohesion Policy Funding 2021-2027 in the 2019 country reports (annex D)¹⁶.

Moreover, in 2018, the European Commission showed high political commitment for deinstitutionalisation globally, by proposing a Regulation establishing the Neighbourhood, Development and International Cooperation Instrument (NDICI) that prioritises the promotion of the transition from institutional to community-based care for children, both within its geographic and thematic programmes.¹⁷ This proposal is supported by the European Parliament and the Council.¹⁸

Despite this strong track record, the EU has not yet explicitly recognised the harm of institutional care nor articulated its commitment towards the transition from institutions to family- and community-based care for children into a comprehensive policy framework, applicable to both EU internal and external action.

Key actions for the Child Rights Strategy:

- **Explicitly condemn institutionalisation as a harmful practice**, including the increased risk of abuse and trafficking, and highlight the consequent need to promote the transition from institutional to family and community-based care.
- **Specifically mention and address children in institutions as a vulnerable group**, e.g. under the Inclusion pillar, alongside other vulnerable groups such as children with disabilities and children with a migrant background. In order for the strategy to deliver on all children's rights, it should acknowledge the individual needs and risks faced by children from marginalised, discriminated and vulnerable groups.

2) Mainstream children's rights and promote deinstitutionalisation and care reform across all relevant internal and external EU policies, initiatives and funds

The EU has taken a leadership role in promoting care reform for children in EU Member States (see above). Many EU countries have adopted strategies or action plans to shift away from the use of institutions, even though there are still areas where further progress needs to be made.

The 2018 research report of *Community Living for Europe: Structural Funds Watch*¹⁹ informs that approximately 2.7 billion euros of EU funds have been allocated for reforming care systems in 12 EU Member States during the current funding period 2014-2020.

However, **institutionalisation is a global problem and the EU's commitment to deinstitutionalisation has not yet fully been translated into its external action.**

While the EU provides support to countries in the process of implementing child care and child protection reform which includes a focus on family and community-based care, many funded projects working on related issues do not take into consideration the need to ensure a commitment to, and vision for, the overall transformation of the care system.²⁰

On the other hand, within Europe, institutionalisation is often wrongly perceived as a challenge of only Eastern and Central European countries, whereas institutions also exist in Western Europe.²¹ The Strategy could thus play a role in highlighting that institutionalisation of children is a breach of human rights across all countries in Europe and beyond without exception, which can be addressed by transforming care systems.

Equally critical is for the **EU to commit to exclude investments in institutions, regardless of the size, including investments for the refurbishing, building, renovating, extending of institutions or improving energy efficiency of the settings**, etc. The EU has committed in various documents not to use European Structural and Investment funds to support institutions during the 2014-2020 period. For instance, the European Commission Draft thematic Guidance Fiche for Desk Officers for the 2014-2020 period stated that "building or renovating long-stay residential institutions is excluded, regardless of their size".²²

The Commission reiterated this commitment in its 2015 reply to the list of issues of the UN Committee on the Rights of Persons with Disabilities (para 81).²³

Yet, over the last few years a number of cases have come to light, including the Tophaz institution in Hungary²⁴ and Tantava institution in Romania,²⁵ where EU funds have been used to refurbish institutions in which the human rights of residents were allegedly breached.

Experience from previous funding periods has shown that **investments in institutions have a detrimental effect on the transition from institutional to family- and community-based care, as they disincentivise the closure of institutions and slow down the development of family- and community-based care and services.**²⁶

Furthermore, since the volume of EU funds cannot cover all the investments needed, it is essential that they are used to focus on the most important aspects, namely to prevent institutionalisation, support the reintegration of children in their families, and develop family- and community-based services.

Key actions for the Child Rights Strategy:

- **Mainstream children's rights and the transition from institutional to family- and community-based care across all upcoming internal and external EU policies, actions and programmes** (legislative and non-legislative) that may affect children directly or indirectly. This concerns in particular the European Child Guarantee, the post-2020 European Disability Strategy, the post-2020 Initiative for Roma equality and inclusion, the Action Plan

on Integration and Inclusion and the New Pact on Migration and Asylum.

- Call on EU Member States to **develop comprehensive national deinstitutionalisation strategies**, in line with the enabling condition 4.3 of the Common Provisions Regulation. (CPR) 2021-2027. The strategies should focus on preventing unnecessary family separation, facilitating family reunification, ensuring the closure of institutions, and developing family- and community-based care and services.
- As outlined in the EU Action Plan on Human Rights and Democracy for the period of 2020-2024, **assist partner countries in building and strengthening child protection systems. Support the development of quality alternative care and the transition from institutions to quality family- and community-based care** for children without parental care.
- Commit to **directing EU Funds disbursed internally (e.g. ESF+, ERDF) and externally (e.g. IPA III, NDICI) to promote care reform, child protection and social protection systems strengthening.** Ensure that EU funding is not used for activities that may lead to social exclusion or segregation. **This includes explicitly excluding EU funds' investments for the refurbishing, building, renovating, or extending of institutions.**
- Promote the elaboration of a set of Guidelines on the transition from institutional to family- and community-based care in the EU's external action.



The Early Child Development day care service at the Community Hub in Rwanda helps to keep the family of Keza and Shema together.

3) Include the views and opinions of children and young people in the preparation and implementation of the Child Rights Strategy

Article 12 UNCRC states that all children have the right to participate actively in decisions about their own lives and in society as a whole. This is explored in more depth in General Comment no. 12 of the UN Committee on the Rights of the Child, which gives guidance on how this article should be implemented across a range of different settings and situations, including in the family, in alternative care, in health care, in education and school, in judicial and administrative proceedings, and in public decision making.

When preparing the Child Rights Strategy, it is essential that the European Commission consults children and young people, as they themselves know best what they need to access their rights and to flourish. In order to get an accurate picture of the different risks and needs children and young people might face, child participation should be set up in such a way that the 'harder-to-reach' children are also involved.

Therefore, **children growing up in institutions or with a history of institutional care should be enabled to feed into the Child Rights Strategy.** In order to achieve meaningful child participation, children and young people should be involved throughout **the whole policy cycle of drafting, monitoring and evaluating the Strategy.**

Efforts should be made also to capture the experience of children and young people from other regions of the world.

Key actions for the Child Rights Strategy:

- Include the views and opinions of children and young people, **including those living in institutions or who have grown up in institutions (care leavers).** In order to facilitate this, we recommend to produce more child-friendly and inclusive material (taking into consideration e.g. the needs of children with disabilities) and to create accessible tools and platforms that would enable the full participation of children and young people in the elaboration of the new strategy and that would be incorporated in resulting activities at the Member State/partner country level. Moreover, we recommend cooperating with civil society organisations, who could play a key facilitating role in reaching different groups of children and young people.
- Develop a sustainable mechanism to ensure **the participation of children at all stages of the implementation** of the strategy and at all levels, facilitating the active participation of the most marginalised and vulnerable groups of children.
- **Introduce a mechanism that will secure children's and young people's meaningful involvement with the Strategy's monitoring and evaluation.**
- **Support the participation of children in the Conference on the Future of Europe in both online and offline consultations.** Support the participation of children in all EU policies that affect them directly or indirectly.

4) Establish efficient coordination and consultation mechanisms

We welcome the European Commission's intention to create a Child Rights Strategy which places existing activities and initiatives concerning children's rights under one big umbrella. When this is done in an effective manner, it has the potential to improve policy coherence and consequently better deliver on children's rights.

However, it is of utmost importance that efficient coordination mechanisms are in place to make sure that the Strategy will be enforced throughout the European Commission, and in collaboration with the European External Action Service and EU agencies.

Moreover, at Member State level a mechanism for intersectoral coordination will be needed.

Furthermore, it is essential that civil society organisations are involved at all levels of consultation, implementation, monitoring and evaluation for the Child Rights Strategy, and that they are equipped with the resources to do so. Civil society organisations working on child rights are often in close contact with hard-to-reach or vulnerable children and have strong network and local expertise of the needs of specific (vulnerable) groups.

Key actions for the Child Rights Strategy:

- **Establish efficient coordination and consultation mechanisms,** for example by having a mid-term assessment of the strategy and by using existing mechanisms to take stock of implementation (e.g. the annual Child Rights Forum, the Annual Day of Persons with Disabilities, the European Development Days, etc.).
- **Include a mechanism for the continuous involvement, consultation and support of civil society organisations** working to protect the rights of

all children, including their right to family-based care. Civil society organisations, at the local, national and international level, help empower the most vulnerable children to stand up for their rights and have their concerns and interests represented. In order to achieve the full implementation of the strategy and to involve the hard-to-reach children, the continuous partnership with and expertise of civil society representatives from different world regions is crucial.

5) Address the needs and risks of migrant and refugee children and their right to receive the necessary care

While migrant and refugee children arriving on European soil should have their rights protected in the same way as European children, the reality has been very different. **It is alarming to observe that institutional care facilities, which includes reception centres, are used for unaccompanied children in many EU Member States.**

Lumos' research, conducted in partnership with UNICEF, UNHCR and IOM, which assessed the forms of care provided to unaccompanied migrant, asylum-seeking and refugee children in six EU Member States, found that there is an over-reliance on institutional care provision.²⁷ While positive examples of quality care were identified, the majority of unaccompanied children have been accommodated at some point within an institutional setting, and many remain in institutional care for extended periods of time.

Institutions fail to meet the needs of children; their structure and size prohibits individualised support, the centres are designed around the needs of the institution rather than the child, while inadequate supervision and overcrowding expose children to risk of harm or abuse and negatively impact their development and well-being. In addition, research points at unaccompanied children who go missing after having been placed in institutions before they have been registered by authorities, making them easy prey for traffickers.²⁸

There is a notable focus on developing small-scale residential care in response to unaccompanied migrant, asylum-seeking and refugee children, instead of investing in alternative family-based care. As they are particularly vulnerable and often have experienced trauma in their countries of origin, during their journey and upon arrival,

they would particularly benefit from the one-to-one care, attention and nurturing that only a family can provide. Residential facilities also lock financial resources into buildings, rather than responding to the individual needs of children, and are likely to be a more expensive approach to care.

Transforming care takes time and must be carried out carefully to ensure that children's safety is central to the process, but migrant and refugee children should have equal and non-discriminatory access to family- and community-based care as all other children.²⁹

Key actions for the Child Rights Strategy:

- Promote equal access to quality **alternative care for unaccompanied migrant, refugee and asylum-seeking children as all other children already in the country – with a focus on promoting family reunification and providing family- and community-based solutions.** Ensure equal treatment and respond to individual needs, including access to a guardian, child friendly³⁰ migration procedures and the right to live in a loving and safe family and community for all children. Moreover, children on the move should be provided with life-skill and education support, particularly adolescents who may age out of care.
- **Call on EU Member States to ensure unaccompanied migrant, refugee, and asylum-seeking children have equal access to the mainstream child protection system,** with a view to refrain from institutionalising children on the move and provide them with the necessary care and access to basic services, including psychological support.



Support from Hope and Homes for Children in Bosnia and Herzegovina, means experienced foster mother Navenka and her family can continue to provide a safe and loving home for Ali, a baby with epilepsy, and four-year-old Minel (pictured), through the pandemic.

6) Protect children from the risk of trafficking

In recent years, the emerging exploitation type known as **'orphanage trafficking'** has come under increasing scrutiny. This is generally defined as the trafficking of children from vulnerable families into residential institutions for the purpose of financial exploitation.³¹

In some cases, children are actively 'recruited' into orphanages, often using false promises of education and food.³² Once inside the orphanages and other institutions, children can be further exploited, whether sexually or by being forced into labour such as begging on the streets and dancing for tourists to earn money, or through illegal adoption.

Some 'orphanages' in countries such as Haiti, Cambodia, Nepal and Uganda are profit-making ventures and exist to attract the lucrative international flows of volunteers, donations and other funding.³³ Additionally, a lack of basic child protection procedures in many residential institutions creates an environment that can be taken advantage of by those with harmful intentions.

Furthermore, children in institutions are at high risk of becoming victims of onward trafficking, and child victims of trafficking are often placed (back) in institutions by the responsible authorities, creating a vicious circle for trafficked children and additional risks to their peers in institutions.³⁴ Lumos' new research *Cracks in the system – Child trafficking in the context of institutional care in Europe*³⁵ identifies four main ways in which trafficking is linked with institutions for children, referred to as "institution-related trafficking":

- Children are recruited and trafficked into institutions, solely for the purpose of financial profit ("orphanage trafficking"), and other forms of exploitation;

- Children are trafficked from orphanages/ institutions into other forms of exploitation;

- Child trafficking victims and unaccompanied children are often placed in institutions for "protection", which can put them at risk of trafficking and re-trafficking;

- Care-leavers are more vulnerable to exploitation and trafficking.

Weaknesses in child protection systems and a lack of accountability structures in institutional care leave children at increased risk of abuse and trafficking, from staff, volunteers, other children/ residents and visitors.

Issues with definitions of exploitation, variance in child protection systems and a lack of accountability in these systems, particularly for children in alternative care, provide the "perfect storm" in which child abuse and trafficking can occur – and can go widely unchecked and unreported. Trafficking in this context will likely continue, particularly while there are no specific laws, policies and targeted programmes designed to address it.³⁶

Key actions for the Child Rights Strategy:

- **Recognise 'institution-related trafficking' and the specific vulnerability to exploitation of children in or at risk of institutional care.**
- **Acknowledge the harm of volunteering in orphanages and other forms of institutional care and recommend that it should be explicitly outlawed by the European Solidarity Corps 2021-2027 and other EU programmes.** Its wording should also reflect **the link to the risk of child sexual abuse, exploitation and trafficking** and raise awareness amongst prospective volunteers in particular.
- **Encourage research** to better understand how the European Union, via humanitarian aid programmes and the activities of its citizens and companies, specifically contributes to the issue of 'orphanage trafficking' and propose specific solutions that will protect children from harm.



Lumos helped Diego in Haiti (pictured right) to return home to his family after being trafficked into an orphanage.

7) Address the importance of inclusive education

The UN Convention on the Rights of the Child (UNCRC), the International Covenant on Economic, Social and Cultural Rights (ICESCR), and the Universal Declaration of Human Rights all recognise the right to education for everybody, and the UN Convention on the Rights of Persons with disabilities (UNCPRD) emphasises that inclusive education is key to achieving the right to education for all.³⁷

Nevertheless, across Europe and around the world, a significant number of children with disabilities still live in residential 'special education schools,' often far from their home, due to a lack of inclusive education.³⁸

Inclusive education is a key resource to counter exclusion, it benefits all learners without discrimination towards individual or group, and in doing so is one of the main vehicles towards social inclusion. Inclusive education is also a key pillar of the deinstitutionalisation process; through establishing inclusive schools in communities, families can be kept together, and the institutionalisation of children can be prevented.

Key actions for the Child Rights Strategy:

- **Address the importance of inclusive education** and support the work of expert organisations who cooperate with schools and authorities to guarantee the full right to education for children with disabilities.
- **Ensure that projects supporting inclusive education and innovative and accessible models of distance learning** for vulnerable children are prioritised by the Erasmus+ programme.

8) Highlight the relation between gender-based and ethnicity-based discrimination and institutionalisation of children

Discrimination is one of the drivers of the institutionalisation of children.³⁹ Over 2.5 billion women and girls around the world are affected by discriminatory laws and the lack of legal protections.⁴⁰ Those discriminatory laws make it more difficult for families, and in particular single-mother households, to raise a child.

Research has shown that mothers that raise children on their own experience higher rates of poverty compared to dual-parent households.⁴¹

This makes it more likely for these women to be compelled to leave a child in an institution, as they might feel they cannot adequately care for the child. It also happens that single mothers see themselves forced to migrate in order to find a job, and consequently children are left in institutional care.⁴² Moreover, policies originally designed to sustain, protect and support families are not always sufficiently adapted to the families of today such as single parent households, which are mostly led by women globally (84.3%).⁴³

Also, based on our professional experience with children with a history of institutional care and their families, there are cases where single mothers abandon their children at birth because of discriminatory attitudes within the community or society towards them. This is evidenced for instance in Sudan, where EU funding is training and empowering child protection professionals to respond to the needs of vulnerable women, set up new prevention and quality alternative care services and reduce the stigma and discrimination towards single mothers, pregnant women and women who give birth outside wedlock.⁴⁴ Violence against women within families can be another reason why children eventually end up in institutions, and so can be unwanted teenage pregnancies.

Ethnicity-based discrimination is also a key driver of institutionalisation. Children with a Roma background are over-represented in alternative care and institutions across Europe, particularly in Central and Eastern Europe. Though overall research and data is limited,⁴⁵ some research shows that, while only 10% of the population in Hungary, Bulgaria and Romania is Roma, up to 60% of children in State care are of Romani origin in the former ones and up to 20% in the latter.⁴⁶

Key actions for the Child Rights Strategy:

- **Highlight the relation between gender-based and ethnicity-based discrimination and institutionalisation** of children and include activities which contribute to a gender-responsive social protection system.
- Conduct a Europe-wide review of national child protection systems as they relate to Roma children and other groups at risk of ethnicity-based discrimination.



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Maria was born with cerebral palsy in Moldova, the poorest country in Europe. After leaving an institution, she now lives with her foster mother.

9) Ensure that all children are counted

For donors and governments to protect the lives of vulnerable children and meet their human rights obligations, they need to know the scale and the scope of the problem. However, at present there is very limited data about the world's most vulnerable children including those living in institutions, on the street, trafficked or separated from their families as a result of conflict, disaster, forced labour, discrimination or disability.

This kind of invisibility has real life repercussions for millions of children and can effectively hinder the achievement of the Sustainable Development Goals (SDGs).⁴⁷ If these children are not included in the data, they are statistically invisible, won't be included in any monitoring mechanisms and they are at serious risk of being left behind. It is therefore crucial that the global monitoring framework includes mechanisms to assess the most vulnerable and hard-to-reach populations.⁴⁸

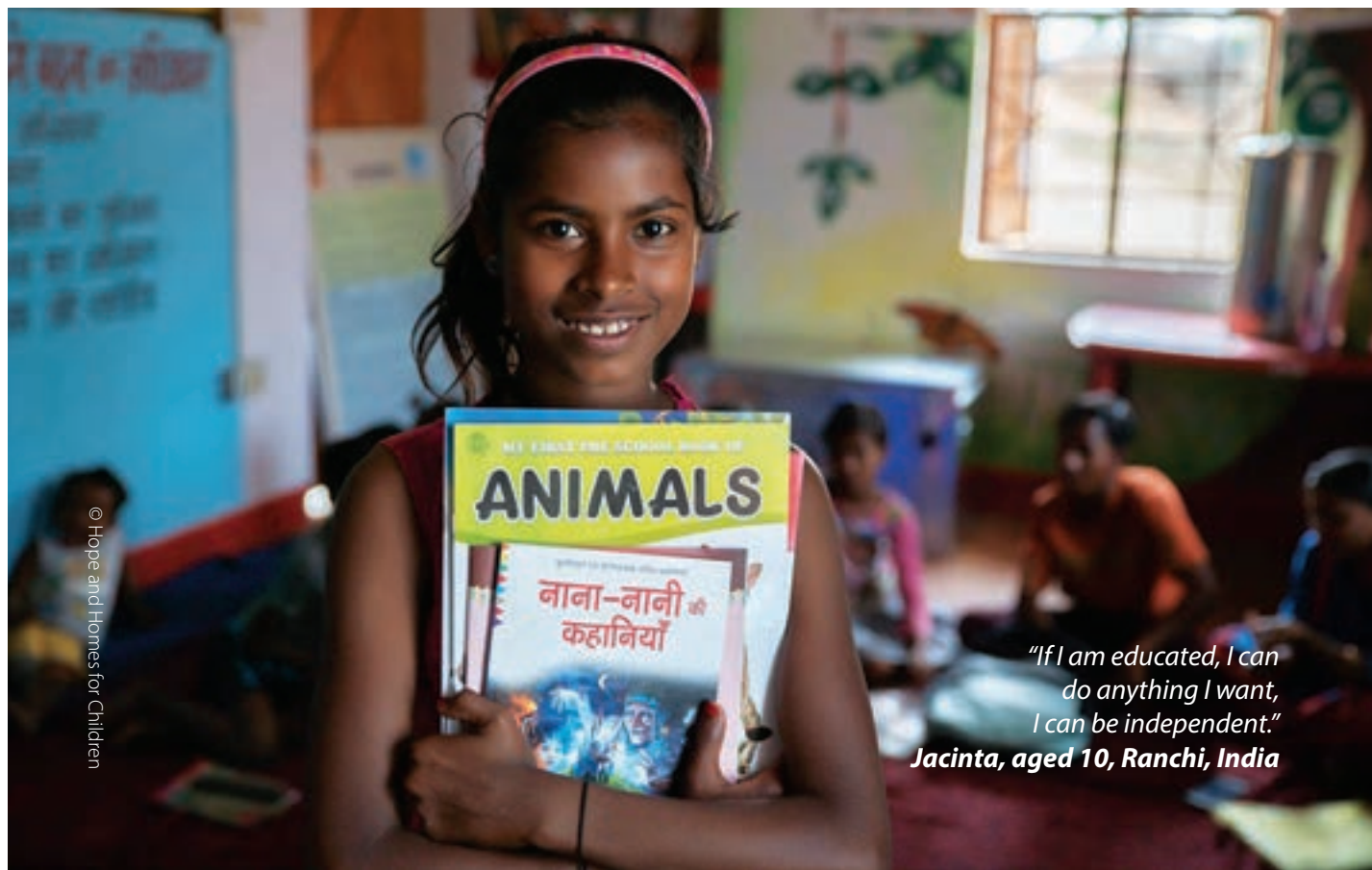
Furthermore, data disaggregation by care-giving setting/living arrangement is key to tracking progress for all children, particularly regarding SDGs 1, 3, 4, 8, 10 and 16. This is critical to a) analyse how trends differ between children living outside households and/or without family care and the general child population; and b) ensure that programmes and policies prioritise the most vulnerable children.

The need to address the data gap surrounding children outside families was highlighted in the 2019 UNGA Resolution on the Rights of the Child, sponsored by the European Union, which urges States to improve data collection, information management and reporting systems related to children without parental care in order to close existing data gaps and ensure that quality data guides policymaking.⁴⁹ This is echoed in almost all concluding observations of states parties to the UNCRC, that they should have clearly disaggregated data specifically on children in alternative care.⁵⁰



Key actions for the Child Rights Strategy:

- Commit to addressing the **need for children living outside households and/or without family care to be represented in disaggregated data**, for instance by supporting EU Member States and partner countries to close existing data gaps, develop national and global baselines, and invest in quality, accessible, timely and reliable disaggregated data related to children living without parental or family care in all settings and situations such as in the SDG indicators framework. This also includes applying unified mechanisms, for each country and for the entire European region, regarding indicators' record-keeping, monitoring and reporting.
- **At EU level, the strategy should recommend that Eurostat** includes an indicator on children temporarily or permanently living outside households and families.



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"If I am educated, I can do anything I want, I can be independent."
Jacinta, aged 10, Ranchi, India

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