

Quality of Life of Deinstitutionalized Children in Biological Families in Georgia

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Abstract:

Research Objective

Evaluation of outcomes of deinstitutionalization of child care system in Georgia suggests that quality of life of children returned into biological families is higher compared to what it was in institutions.

Literature review

Georgian child care system inherited Soviet legacy of relying on large-scale residential care for children. Soon after regaining independence, more than 5000 children resided in 46 institutions (500 per 100,000 child population) through the country. Massive evidence exists about negative consequences of institutional care affecting neurobiological, psychological, and social aspects of child's life. Priorities of the ongoing child care system reform in the country were shaped-up based on these findings and international best practices and aim at deinstitutionalization, strengthening of family support and alternative family substitute services.

Developed world considers biological families as the best environment for raising a child and puts responsibility for children on a family. However, the state is responsible to intervene when child's home is an unsafe environment. In such cases children can be placed in alternative family substitute setting. At the end of the year 2012 Georgia reduced number of children in large-scale residential care to 200 (20 per 100,000 child population). Many of these children were placed in kinship, foster or small-group home (SGH) care, establishing during last years. More importantly, about 30% of children previously residing in large-scale institutions were reintegrated back into their biological families.

In order to evaluate effectiveness of the reform and deinstitutionalization process, practitioners and policy makers need to determine outcomes for service users. Past decade in developed countries was marked with the shift from the use of only objective indicators, towards the use of subjective indicators like Quality of Life (QoL) using person's own criteria.

Methodology

Assessment used quantitative method – Quality of Life scale adapted administered with children 11 to 18 years of age. QoL measurement was based on the most frequently suggested range of psychological and social domains, incorporating subjective and objective measures, namely:

- Emotional well-being: safety, stable and predictable environment, positive feedback;
- Interpersonal relationships: affiliation, affection, intimacy, friendship, interaction;
- Material well-being: ownership, possessions, employment;
- Personal development: education and habilitation, purpose activities, assistive technology;
- Physical well-being: health, care, mobility, wellness, nutrition;
- Self-determination: choices, personal control, decisions, personal goal;
- Social inclusion: natural support, integrated environment, participation;



- Rights: privacy, ownership, due process, barrier free environment.

Individual perception of life experiences was used to assess the difference between self-perceived QoL of children in institutions and families before and after deinstitutionalization.

In 2012 a representative study of 119 children in the age group of 11-18 years reintegrated into 93 families was carried out through the country. The study assessed all children returned to their families during last 2 years, who in addition to the state reintegration package (provided in all cases), also received additional support from the donor-funded social fund.

Findings

Findings of the assessment suggest that **QoL of children returned back to their biological families is higher than in large-scale institutions**. Also, statistically reliable findings indicate that children have higher QoL after reintegration if:

- a child has spent less time in institutions (up to 24 months);
- a child is reintegrated for shorter period of time (less than 12 months);
- family members do not have health problems;
- based on social worker's assessment, family does not need psycho-social support.

In addition to assessing QoL of children in biological families, also for the first time in the Region, similar measure is also being used to assess and compare QoL of children before and after deinstitutionalization in alternative care settings, namely foster and SGH care.

Policy implications and recommendations

The aim of assessing QoL of children returned into biological families or placed in alternative care is to support informed decision-making about the preferred model of deinstitutionalization, and development of the practice methods to improve quality of life of the target group children.

