

# RESEARCH BRIEFING

**GOING HOME FROM RESIDENTIAL CARE:**

**AN EXPLORATORY STUDY OF THE SEPARATION AND  
REUNIFICATION EXPERIENCES OF YOUNG PEOPLE  
AND THEIR FAMILIES IN MOLDOVA**



# GOING HOME FROM RESIDENTIAL CARE: AN EXPLORATORY STUDY OF THE SEPARATION AND REUNIFICATION EXPERIENCES OF YOUNG PEOPLE AND THEIR FAMILIES IN MOLDOVA

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## WHY IS THIS STUDY IMPORTANT?

For many years after becoming an independent state in 1991 the Republic of Moldova carried the Soviet legacy of placing children in residential institutions as an exclusive child-protection measure. The absence of developed community-based family services, the country's sweeping poverty, and high migration rates, which ensued after the collapse of Soviet Union in 1991, led to residential care being largely used by social services and communities to look after children who could not be taken care of by their own families. Reforms in this care system began in 2006 when the National Strategy for the Reform of the Residential Institutional System 2006-2012 was launched. This led to the closure of many child residential institutions and a wave of family reunifications across the country. Despite such drastic reforms only a few studies and evaluations of these reunification practices were undertaken - mainly by the country's major NGOs. Deinstitutionalisation reforms and practices raised important questions: What it was like for children and their families to be reunited? How did the families function at and after reunion? What support was available to help them in this process?

This academic study focuses on children's and mothers' experiences of children going in and out of care to be reunited with their families. Following a qualitative approach, the study aims to provide an in-depth understanding of separation and reunification experiences and processes in their continuity and complexity. It uses a rigorous Grounded Theory methodology to build theoretical insights into the lived experiences of families experiencing separation and reunification. It gives voice to marginalised and stigmatised groups (care experienced young people and their mothers) ensuring their views are minimally biased by the researcher.

## AIMS OF THE STUDY

The study has the following aims:

1. To understand the circumstances around children's entry into care and how mothers and children experienced being separated, managed life in separation and further reunification
2. To scrutinize similarities and differences in how mothers and children in the same families experienced reunification
3. To learn about and compare family support needs at reunification as seen by families and professionals

## HOW WAS THE STUDY DONE?

Forty in-depth semi-structured interviews were conducted to collect retrospective accounts of separation and reunification experiences of children and young people aged 13-16 (n=20) and their parents, who were predominantly mothers (n=20). In recognition of the significance of power differentials in research with young people, additional participatory research methods (photo-elicitation, concentric circle, and road maps) were employed to further engage them in the research process. Young people (10 male and 10 female) were placed in residential care as children at ages 5-7 and stayed in residential care on average for 3-6 years. All families were interviewed 1-3 years post-reunification. Five focus groups were conducted, involving 19 social services and NGO professionals, to understand their perspectives on the needs and support offered to families post-reunification. The study utilised a rigorous Grounded Theory methodology to create theoretical insights deeply grounded in the data.

## KEY FINDINGS

### The context of separation

*'With tears in my eyes, I brought them there [residential school]. Like puppies. Like puppies. I had no choice...'* (Mother A)

Mothers felt they had no other choice than to place their children into residential care as there were no alternative forms of child out-of-home care or community-based support. They faced pressure from local authorities or social services to send children to residential homes and were stigmatized in their communities as 'bad' or 'failing' mothers. In many instances, mothers and children felt they were not involved in the decision-making process. Placing children into residential care was a highly distressing and confusing experience for both mothers and children during which they were not offered adequate support.

### Life in Separation

*'I thought about him... because I was thinking like any other mum.'* (Mother B)

*'It turns out that that the [residential] school was like my home, my family - all I needed in life. I had everything there.'* (Child P)

The study revealed the processes that helped these families to adapt to life in separation, whilst preserving

their sense of family membership and continuity. Having to work abroad to ensure their family survival, mothers did not see their children for long periods of time. Yet, they continued 'part-time' parenting at distance. In spite of a limited physical presence and contact, mothers kept their children psychologically present in their lives. Extended family and families' communities played a crucial role in their lives by helping children and mothers retain a sense of family identity and membership. Most mothers and children highly praised residential care as providing children with safety, comfort, and education they could not enjoy in their families and communities. When residential schools were closing down, families were not prepared to take children back. They felt they were forced to make this decision.

### Reunification

*'I think they see me like a stranger... When I try to talk to them and they bear grudge against me ...I know that I am guilty.'* (Mother J, struggling group)

*'I can't tell my mum things important to me...If I was a mother and had a daughter, I would share everything with her. But I didn't have that.'* (Child G, struggling group)

Reunification was a complex process contingent on a multitude of factors present both at the time of reunion as well as preceding it. Analysis of the reunification processes revealed two groups— 10 surviving families (stable reunion) and 10 struggling families (multiple risks present, unstable reunion). The key factors for the stability of reunion were: family continuity expressed by a commitment to family membership; ongoing positive contact between children and parents, and both the parents' and the child's willingness to reunite and determination to make reunion work. Where families lacked family continuity and coherence earlier in their lives, they were struggling to adjust to life together after the reunification. Ten families in the struggling group still experienced an emotional disconnect, ongoing violence between parents or directed towards the child, child's unresolved trauma, and poverty some years after the reunion.

### Support

*'Attention. Not just - ok, we have taken children back and everybody forgets about you... Attention is very important... So that I feel that I am not forgotten.'* (Mother K)

The mothers spoke about multiple gaps in post-reunion support and barriers in accessing social services' support. The professionals also mentioned multiple gaps in the work of the social assistance system, the most significant being a lack of community-based family services and systemic organisational deficits. There was a disparity in views between the mothers and professionals on family support needs. Whilst mothers spoke at length and in depth about their vulnerability and needs for diverse, ongoing, and consistent support, professionals focussed on the need to cultivate families' independence from the state.

### KEY RECOMMENDATIONS FOR POLICY AND PRACTICE

#### **Need for creating community-based family services to support families and prevent children from getting into care:**

More community-based family support services need to be created, with an increased focus on preventive programs. More work needs to be done to eliminate social services' organisational deficits and build strong equal partnerships between families and social workers. The process of seeking support and further referrals within the system needs to be made maximally transparent for families.

#### **Importance of family involvement in decision-making at separation, when the child is in care and at the reunion:**

If the child is going into care, parents and children need to be more involved in decision-making and planning at all stages of separation and reunification and when the child is in care.

#### **Importance of maintaining family and community membership when children are in care:**

Where it is possible, family continuity and membership need to be promoted in practices and policies concerning children in care. Such work should go beyond the concept of contact between the child and family, and should include a much broader concept of 'being together'. Moreover, children's links to their communities need to be maintained: staying connected to their home communities equips children with strategies and knowledge about the world to which they will likely eventually return. The role of the extended family here, as a valuable resource for fulfilling a child's emotional needs, connecting them to family roots and histories, and preserving their family and community memberships must be recognised and capitalised upon.

**Need to improve reunification practices and services:**

Post-reunification services in Moldova need to be much further developed to both fully understand and meet families' expressed complex needs: financial, psychological, and practical. Reunification practices should have a multi-disciplinary focus involving a variety of services to address families' complex inter-related problems. Such support for families has to be made more widely available, ongoing and consistent and culturally accessible to all families.

One important message from the study is that not every child can, or should be successfully reunited with families. In such cases, other options should be considered (e.g. foster care, supported living) and opportunities for such alternative placements should be created.

**Need to re-evaluate the role of residential care:**

Given the acknowledged deficits of other forms of out-of-home care, and the persistent negative perception of residential care among practitioners and policy-makers in Moldova, the role and potential effectiveness of child residential care require urgent reassessment. There is a need for creating more diverse residential care for children and young people: emergency shelters, treatment hubs or long-stay shelters. Such residential care models should incorporate universal elements of good care existent in other countries: being small-scale, child-oriented, and home-like, while at the same time adapted socially and culturally to the Moldovan context.

**Importance of strengthening families' capacity and coping skills:**

One approach could be to help build up families' effective approaches to managing their lives and seeing themselves as active agents capable of change. Such work should focus on making parents aware of the resources within their own families and communities and supporting them in using them. To become more socially and economically independent, existing asset-based programs that empower families to use non-monetary assets to build up their economic and social capital could be adapted and evaluated.

**STRENGTHS AND LIMITATIONS OF THE STUDY****Strengths**

The qualitative approach gave voice and recognition to the hitherto unknown accounts of stigmatised and marginalised mothers and young people, facilitating an in-depth exploration and analysis of their lived experiences, and thus uncovering processes and accessing insights that are not possible to investigate using purely quantitative approaches. The Grounded Theory-informed methodology allowed for the creation of theoretical insights that are deeply grounded in the data. Advanced participatory research methods deepened the level of participation and further empowered young people to be involved in research, and as co-constructors of knowledge.

**Limitations and areas for future research**

As the study used mostly convenience sampling, the most vulnerable cases (e.g. broken-down reunions) were left out. Fathers' views were not included here, mainly due to sensitivities and difficulties of access with them having left the families by the time of reunification. Due to organisational barriers and financial and time constraints of the research, the views of residential care staff were not explored. Alongside further qualitative studies addressing the experiences of these groups, future studies of benefit would be those with prospective longitudinal designs, focussing on children's and families' outcomes and comparing such outcomes for different types of placements.

These study findings enhanced current understanding of Moldovan families' experiences and support needs at all stages of separation and reunification. The findings will be published in relevant journals and recommendations for policy and practice will be disseminated to policymakers and practitioners in Moldova.

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