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A Suitable Amount of (De) Institutionalization: Lessons from the Covid-19 Pandemic

Introduction

You do not leave a sick child in the night and you do not leave children at a time like this.

Korczak (Lifton, *The King of Children*)

Since the outbreak of the coronavirus disease (COVID-19) crisis, the situation in closed facilities, like prisons or care homes, has shown how quickly overcrowded institutions can become a breeding ground for an infectious disease. Many international organizations involved in fighting the pandemic have called for public action towards reducing overcrowding in closed settings, with the argument that, besides undermining hygiene, health, safety and human dignity, it constitutes an insurmountable obstacle for preventing, preparing for or responding to COVID-19 (World Health Organization 2020).

Children residing in alternative care institutions and orphanages around the world are facing difficult conditions. In majority of cases, the number of caregivers has been reduced because of actual infections, public transport reductions or because of lockdown and social distancing measures, which means that staff that are not living in the premises are not able to enter the insti-

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tutions. For similar reasons, numerous residential institutions for children are being closed in result of pandemic. The authorities understand that when most orphanage staff are unable to work, it is not possible to provide adequate care to children living in the institutions. Therefore, many local governments took decisions to send children from orphanages back to their families and communities (CRIN 2020). This provided renewed arguments and raised voices for the deinstitutionalization reform around the globe. The most disturbing aspect is that children appear to be sent back to their communities without proper consideration of where they will reside, how their transition will be supported, and whether their safety will be monitored.

Although the present situation has essential differences with the times in which Janusz Korczak (born Henryk Goldszmit) lived and worked, there are also important similarities. As Agamben (2020b) stated, it is not surprising that we talk about the virus in terms of war since the emergency provisions effectively forced us to live under a curfew. Furthermore, as in Korczak's time there is a tendency to use state of emergency as a normal paradigm for government with the consequent limitations on freedom (Agamben 2020a).

In this context, due to the varied nature of his work and his revolutionary ideas about children's rights, referring to Korczak's philosophical and pedagogical heritage is mandatory. Even if, as Odrowaz-Coates (2018, p. 129) maintains, Janusz Korczak did not intend to produce long-lasting philosophical or pedagogical thought and perhaps was more engaged with children's upbringing in his own time and space, as sharp critique of society and adult-children relations, Korczak's thoughts are of high relevance to current social and political issues and suggest an interesting point of view regarding the life of children in institutions. It should not be forgotten that, many years before Foucault's (1975) studies about the use of architectural space and power, Korczak's work demonstrated a profound interest in institutional care and its role in society.

The aim of this paper is to explore current tendencies towards deinstitutionalization of children based on measures issued to combat the COVID-19 pandemic, and contrast them with Janusz Korczak's ideas about children living in institutions during ruthless times. The paper will show that children's institutions are still necessary and that they will regain the paramount importance in the aftermath of the crisis. However, following his ideas, some points

will be made regarding the exceptional cases in which a child should be institutionalized and how his or her life at the institution should be.

Deinstitutionalization reform

Deinstitutionalization tendencies are not new. An appalling record of abuse and neglect in orphanages and in other forms of residential care has caught the attention of the international community during the last decades (CRIN 2018) and has motivated the development of alternatives to institutionalization. These alternatives may include supporting children to be cared for by their own families or communities by means of cash transfers or special programs, family reintegration, adoption, kinship care, foster care, kafalah, and other forms of family-based care.

A number of countries are in the process of progressively closing orphanages and reintegrating children in their families and communities, a process known as “deinstitutionalization reform” (Save the Children 2012). The main argument behind this process is that institutions are costly and can be harmful to children’s wellbeing (Goldman et al 2020). Likewise, due to the pandemic, human rights advocates have been calling for “emergency deinstitutionalization” and immediate provision of housing and support in the community for children who live in institutions (Basharu 2020).

However, institutional care proliferates. The reasons are varied and complex, and are not the object of this paper. Probably, the persistence of children living in care institutions is a result of lack of political commitment, the financial challenges of implementing new programmes, the unscrupulous use of children as international commodities and misconceived good intentions of humanitarian and development agencies and donors.

Historically, alternative care institutions have provided a political safety valve for governments that are unable – or unwilling – to tackle the complex social and economic factors driving families to place their children into care (Csáky 2009). In most countries, the approach to child rights has been dominated by the idea that poor families were incapable of giving their children adequate upbringing. As the result, childhood welfare policies were shaped both as paternalistic and as part of the system of patronage.

Implicitly, these legal frameworks attribute the responsibility for poor conditions in which children live to their families, often resulting in the separation of children from their parents and their placement in some form of institution, whether they are large-scale orphanages or smaller homes, substitute families, external foster – community – or family homes (*Innocenti Research Centre* 2003). Meanwhile, the real structural reasons behind poverty – those that relate to political and economic decisions – remain hidden.

Moreover, research has shown that long-term institutionalization of children in large institutions can be harmful in many ways. To begin with, there is a serious risk of developmental damage, where children under 3 are particularly vulnerable. According to Browne (2009), young children in institutional care are more likely to suffer from poor health, physical underdevelopment, deterioration in brain growth, developmental delay and emotional attachment disorders. In consequence, these children are supposed to have reduced intellectual, social and behavioural abilities compared with those growing up in a family home. Especially, the lack of positive adult interaction from consistent carers can limit children's ability to develop personal confidence and key social skills (Csáky 2009).

Secondly, when institutions are closed and isolated, children are vulnerable to abuse and exploitation, such as systematic rape and other forms of sexual abuse, trafficking, physical harm (beatings and torture) and psychological harm (isolation, denial of affection and humiliating discipline). Some cases concerning abuse and neglect of children in orphanages have reached the European Court of Human Rights. As an example: *Scozzari and Giunta v. Italy* (2000), *Saviny v. Ukraine* (2008), *Nencheva and Others v. Bulgaria* (2013), *Câmpeanu v. Romania* (2014). In those cases, States were found responsible for violations of Article 8 (right to respect for family life), Article 2 (right to life), Article 9 (separation from parents) and Article 13 (right to an effective remedy) of the European Convention on Human Rights.

Thirdly, unwanted social consequences may occur. For instance, where care institutions are cut off from communities, children are probably prevented from developing social networks that are essential for later life. Children residing in institutions are not used to exercise freedom of choice and may be accustomed to following instructions without questions, which makes them dangerously unaware of their rights as citizens.

Finally, in addition to other concerns, many children in large-scale institutions face additional problems of neglect caused by poor quality standards. This includes –but are not limited to–malnutrition, poor hygiene and health care, lack of access to education and lack of physical and emotional attention. The extent of the damage in this regard is directly connected to the interrelation of two factors: the number of children residing in the premises and the number and professional skills of staff members.

All in all, there is a consensus about the use of institutional care only as a last resort. With the right kind of support, many families would be able to keep their children and when it's not possible for a child to live with his or her parents, there are other family and community-based options where they can be cared for and protected. That would be true in an ideal world, however in present times – dominated by poverty, disease, disability, conflict, disasters, and discrimination, all of which are aggravated by the pandemic – “the right kind of support” could be something impossible to fulfil for governments and communities.

Additionally there are cases where children are removed to a place of safety because of parents and families that are judged as abusive, neglectful or incapable of meeting children's physical and/or psychological needs, which makes it evident that there the need for institutionalization will continue, so there is a need to investigate more progressive ways to treat children in out-of-home care.

Notes on Korczak's ideas about children's institutions

Caregivers have an obligation to skilfully arrange conditions under which children may freely develop in the fullness of their rights.

Korczak (*A Child's Right to Respect*)

According to Vucic's research (2020), Korczak believed that there would always be a requirement for residential care options for children and youth beyond the family model due to incompatibility in temperament, needs and behaviour of both adults and children. She contends that even though the dein-

stitutionalization movement in Poland was initiated in 1908 by the Orphan's Nest program – which operated as a foster family model in villages – and was sponsored by the famous writer Maria Konopnicka (admired by Korczak as his “teacher” in his civil work), he did not abandon his lifelong institutional model (Korczak 1942/1978, p.210, cited in Vucic 2020, p. 251).

However, his ideas about children's autonomy – “(t)here are no children, just people but with a different conceptual scale, different ranges of experience, different urges, different emotional reactions” (Korczak 1967, p. 204) – and about the basis and essence of protection rights – “(c)hildren are foreigners, ignorant of the language, of where roads lead, and of laws and customs. Often, they prefer to explore for themselves, asking for directions and advice when they find themselves in difficulty” (Korczak, 2017, p. 31) – shaped characteristically *Dom Sierot* [the Orphan's Home] and *Nasz Dom* [Our Home], the two institutions he co-managed with his collaborators, mainly Stefania Wilczyńska and Maria Falska. As Vucic (2017, p. 162) maintains: “(t)he way in which institutions are organized and the actions taken with children, reflect how children are thought of, valued and how their completeness perceived”.

In this regard, Janusz Korczak devoted much attention to the democratic organization of the two homes. He strove to create a model of a self-governing community whose members-both children and adults- consciously and responsibly participated in working for this community. Children at both of his homes had their own self-government and a court of their peers that – based on the law code developed by Korczak – solved conflicts and could put adults on trial as well, propitiating a healthy accountability system. Children participated in preparing meals, maintaining order, caring for their younger friends and organizing free time (Lifton 1988, p. 120; Polin 2018, p. 223).

Discipline was important but allowed children to exercise their freedom: Korczak embraced pluralism, with the children attending local schools and exploring the neighbourhood (Vucic 2017, p. 171). According to Lifton (1988, p. 120), the orphanage and the residence were radically progressive in a period when children were beaten in many institutions but, at the same time, appeared highly structured by contemporary standards.

There is a large, beautiful house in Warsaw on Krochmalna Street where orphans reside. The orphans are very happy there, not only

because they have enough food and drink, they live in a beautiful house, they sleep in large rooms in squeaky clean white beds. They are happy because they are being looked after by people who love them dearly and do everything to raise them wisely and beautifully (*Tygodnik Domu Sierot* [The Orphans' Home Weekly], W. Słońcu, 1916, no. 4, 1 December, p. 117).

Korczak believed in the power of children living together in favourable conditions to build a new type of society, one based on the principles of respect and cooperation. A rich child – “a child of the drawing room” (Korczak, 1906) – is powerless because he or she is forced to spend his time with adults. Moreover, a child who is deprived of the companionship of people of his or her age is impoverished: if a child is forced to be alone, he or she would be bored; thus, unhappy.

In this regard, social distancing measures represent an interesting opportunity for institutions. As staff may not be allowed to travel, they may be required to stay in the homes for long periods of time. This may collaborate in building trust and cohesive bonds between children and their caregivers. In addition, since lockdown measures restrain the possibility to go out, the residences could be very stimulating playing fields. Having the possibility to spend time with your equals is a privilege in these times.

In fact, as reported by Lifton (1988, p. 124) during the first days of the German occupation in Warsaw, Korczak was urged by childcare authorities to send the children back to their relatives because of the difficulty of providing for them. However, he would not consider disbanding the home. He insisted that children were safer remaining together with him and Stefa (Stefania Wilczyńska).

He not only valued the power of the group but also understood that caring for children was not only dealing with bodies but also souls. These ideas were mixed with his concerns about child development based on his training as a medic: “a child has the right [...] to grow up and mature” (Korczak 2018). Besides struggling to find the necessary food and supplies for his children, human dignity was one of his main concerns.

In his last days, when the danger was imminent, Korczak was still reluctant to jeopardize the welfare of any of the orphans. Just as he could not bear

the thought of a child being punished in a dark closet or a cellar, so more he could not bear to imagine the children being hidden from the Nazis in dark places (Lifton 1988)

At this point, the comparison is inevitable. This crisis has demonstrated that men and women have become so used to living in conditions of permanent crisis and emergency that they do not seem to notice that their lives have been reduced to a pure biological condition – naked life – one that has lost not only any social and political dimension but even any compassionate and emotional one (Agamben 2020b).

Therefore, following Korczak's ideas, the risk of a senseless life, without a community of peers, without the love and the guidance of committed caregivers and exposed to ill treatment is worse than the risk of physical damage. Despite the discussion about if it is in the best interest of the child in a certain case to live with his or her relatives, there is no evidence about how living in a clean, organized facility would place people living in it – adults and children – at risk of becoming infected with coronavirus. On the contrary, social distancing – which is easy to achieve in a closed institution in relation to the rest of the society – and hygiene is, at the moment, the only measure effective against the virus.

Provided appropriately, to a high enough standard and in the best interests of the individual child, may mean that not all care institutions are harmful to children. Furthermore, small group homes, can play an important role in meeting the needs of certain groups of children. Paraphrasing Vucic (2020, p. 414), rather than deinstitutionalizing as such, the aim should be the provision of the greater possibility of freedom.

What is worrying is not so much the present but the aftermath. The dismantling of institutions will reduce options for care for the large number of children who will undoubtedly find themselves orphaned or homeless after the pandemic.

As Agamben (2020b) warns it is very likely that there will be attempts to carry on pursuing, even after the medical emergency is over, many of the measures that governments hadn't been able to implement, in the same way as "the legacies of wars on peacetime have included a whole range of nefarious technologies, from barbed wire to nuclear plants".

Conclusions

Placement in residential institutions must be the very last resort. In the few cases where children simply cannot receive the care they need within their family, family and community-based alternatives must be sought.

The underlying reasons for decisions to place children in care in the first place; such as poverty, family breakdown, disability, ethnicity, inflexible child welfare systems and the lack of alternatives to residential care, must be addressed with a holistic response that identifies families at risk, addresses their needs and prevent the removal of their children. The ethical and practical challenge that we face is to ensure that families – with special emphasis on women who are increasingly heads of household – have the support they need to nurture and raise their children and effectively assume their parental responsibilities (Csáky 2009).

The rights of the child are to be effectively safeguarded in all such cases, and certainly also when children are placed in such institutions, as a priority. In this regard, the Convention on the Rights of the Child sets an overall framework for the consideration of this reality, acknowledging that the family is the natural environment for the development and well-being of children. Moreover, it is the parents who have primary responsibility for the upbringing of their child, and that the child has, as far as possible, the right to know and be cared for by his or her own parents. At the same time, it foresees the appropriate use of substitute care for cases where children are deprived of their family environment or if their best interests cannot be achieved in that environment. In such situations, it anticipates institutional placement but seen as a measure of the last resort.

Finally, the COVID-19 pandemic offers an unprecedented opportunity for children. During the war, power positions are usually disputed and reclaimed by new groups (women, the elderly) because the hegemonic group (men) is absent or eliminated. In a similar way, under the right circumstances and with support this new disease that, at least for now, appears to be kind with young people, may allow children to conquest new spaces and gain different position in society. The challenge might be to find the exact point to reach – paraphrasing Nils Christie (2004) – a “sensible amount of deinstitutionalization”. The point which would guarantee the rights of children not to be separated from

their families and communities without infringing on their protection rights and while ensuring that any child who has to live in an institution is treated “as a resident, a citizen, a human being” (Korczak 2008).

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