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COMPARATIVE ANALYSIS

current knowledge on child abuse and neglect in institutions.

ITALY ROMANIA IRELAND GREECE

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1.Premise

The key question is how many children are really in trouble due to institutional abuse, requiring intervention from social, healthcare or judicial services? How is it possible to detect correctly this kind of abuse?

According to the approach adopted in SASCA project, the focus is essentially on institutional abuse happening in residential care, then the phenomenon results strictly correlate to the process of institutionalization and, on reverse, of deinstitutionalization.

Analysis of trends suggests the numbers of children in residential care are reducing, but there is little evidence to indicate that children are provided with better services when at risk of family separation, and in particular for eastern Europe and central Asia, trends clearly show that children with disabilities are increasingly over-represented in residential care (Transmonee, 2016).

there was a general call for more rigor in data collection and analysis, as well as better translation of findings and creativity in its dissemination. There was concern that children in alternative care are not being counted in relation to Sustainable Development Goals (SDGs) and especially SDG 16.2, and that such children are also left out of surveys such as MICS and Demographic and Health Surveys (DHS) due to their focus on household populations only (Gale, 2016)¹.

Italy, Ireland, Greece and Romania are four countries with an important tradition of institutionalization; in Italy the phenomenon has a long history because the first experience of orphanage was established since the XV century (e.g. Istituto degli Innocenti in Florence).

The comparative analysis is mainly focused on the experience of Italy, Romania and Greece where is more less developed a process of public disclosure of the institutional abuse that was, and maybe it is still, perpetrated against the children that grew up in institutions, currently defined as residential care.

The three countries, even if in different periods of time, experienced a process of slow change in the systems from an organization aimed to control a social problem to a system finalized, at least formally, to achieve a better child's well being and aimed to respond to child's developmental needs. Dealing with the survivors of institutional abuse in such settings, means trying to understand their needs, how to give them justice for the violence they suffered, which lessons we might learn for preventing the phenomenon. Ireland has given a special contribution in this last aspect of the issue.

The Irish experience, in our opinion, represents a possible path for defining a model of intervention. The partner has supported this first phase of the project through the description of the process of disclosure and public awareness raising concerning the stories of the Magdalenes.

¹ International Alternative Care Conference (Geneva Oct 3-5 2016)

2.The issue of institutionalization of children and child abuse: the magnitude of the phenomenon (Italy, Greece and Romania) and the knowledge and awareness in relation to the problem of child institutional abuse

2.1 The issue of institutionalization of children and child abuse

Table 1- Synthesis

Country	Regular statistics on children removed from home	Regular statistics on children victim of CAN	Specific laws on the organization of services for children	Regular data on institutional ill-treatment
Italy	yes	no	Yes	no
Greece	no	no	no	no
Romania	yes	yes	yes	Partially (some specific researches)

In **Romania**, according to the recent report “Young people in care”², in the year 2015 were 52350 the looked after children (reduced with 12% compared to 2014); one third have light, moderate or severe disabilities; 18.000 (34% of the total) are children that are in the system since they were babies and 9.100 (17%) since they were 1-2 years of age. The majority of them is in foster family (66%), 17% of the children live in the small units and family type; the remaining 17% in more traditional Residential settings.

The management of children residential care was initially under the responsibility of the State (communist state care institutions), later on, after the revolution, associations and ONGs became responsible of some children’s home.

“Children in orphanages are state children. Their father is the state and their mother is the whole of worker-peasant society” (Lunacearski, in Carter, 2004)

Institutions had large numbers of children (150-400), living often in inadequate buildings (including old castles); the units for severely disabled children were placed in small communities, which were inaccessible to visits and controls; absence of plumbing in many units and insufficient heating, lack of fuel and electric power. The authoritarian educational style was predominant, with the frequent use of physical punishment within the residential care, even for children under the age of 3, the personnel was used to discourage the relationships of parents and relatives.

After 1990 there were the first changes in the system: slow shift to smaller institutions, major involvement of International and National NGOs, development of social and health services. In the period 1989-2000, Romania was confronted with a large number of children under 3, placed in medical type residential care and other institutions. An important reform came into force in 2004 stating that children under the age of 2/3 cannot be placed in residential homes; parents must receive the support by social services. The reform pushed the growth of family foster care.

After 2000 there were several reforms which tried to facilitated a reduction of the number of children in institutions and the decrease of the rate of abandonment, but they had scarce effects, in particular on the reduction of poverty. The reform of child law, instead has promoted a

² UNICEF, World Bank, 2016 http://www.mmuncii.ro/j33/images/buletin_statistic/copil_an2015.pdf

reduction of family violence against children, also through the law prohibiting spanking, behaviours in some way culturally normalized.

Another big problem for Romania is the care of children with mental disabilities. According to the more recent statistics, there are 7,000 children with mental disabilities who live in social care centres. Here they do not receive any real support by untrained staff, but is only a place where they stay even for 12 hours a day without learning basic skills that would help them live an independent life.

In **Greece** there is no unified source of data available that can be used for recording and monitoring purposes on the number and status of children in residential care in Greece. In the recent (2011) Non-Governmental organizations' report retrieved by the website of the Greek Deputy Ombudsman in charge of Children's rights in *Application of the United Nations Convention on the rights of the child*, it is stated that about 6,000 people with disabilities are accommodated in institutions, most of them for many years and some for their whole life

It is even more difficult to estimate the exact numbers of children in institutions in Greece. According to estimations by the Roots Research Centre, in 2005 there were approximately 3,200 children (200 of them with disabilities) placed in institutional care, but these data seem rather outdated. Moreover, church charities, for example, do not provide data about the children under their care. Over the years, the orphans and abandoned children tended to be fewer while there has been an increase of children who needed to be removed temporarily or permanently from their families, due, most often, to abuse or neglect, family crises, problems, illness / disability or inability of the parents. These children are usually placed in residential care. In Greece, there are two main categories of childcare institutions, institutions for children with no health problems, and institutions for children with chronic illness or disabilities – mainly mental ones. Regarding refugee children, nowadays there are about nine detention centres – public and NGO-operated – accommodating up to 350 minors.

A review of available information of the situation regarding Child Abuse and Neglect (CAN) in Greece concerning the magnitude of the problem, the national legal framework related to CAN and the child protection system in Greece indicated (1) the inaccurate estimation of the magnitude of the problem in Greece due to a great lack of primary data from epidemiological field studies and a lack of systematically collected data from organizations, (2) the insufficient legal framework concerning CAN, the lack of a law solely dedicated to CAN as well as the limited enforcement of the existing provisions, and (3) the non-existence of a structured Child Protection System in Greece, resulting in confusion regarding child care and child protection procedures in cases of CAN as well as focusing mainly on harm reduction and tertiary prevention practices instead of primary or secondary prevention practices.

Sometimes, children are also placed in various units according to their age; there are however institutions where children remain until they reach adulthood; in the cases when adults are residents in the same institution with children, there is danger of physical and/or sexual abuse of the older towards the younger residents. For adolescents with behavioural or severe emotional problems, drug-related problems or juvenile offenders' special programs are not provided except for a program initiated by SOS Children's Villages, which due to lack of financial support has closed down (ENOC, 2011).

It is a fact that, there is no discrete Child Protection System in Greece with specifically define regulations and services for both the beneficiaries and the staff; there are very few shelters for abused children, as well as few specialized therapeutic and support services for children victims and their families. A similar fragmentation equally applies to the NGO sector as well. Regarding the professionals that are in contact with children, the current legal framework is obscure, as they

don't know which cases they should report to the authorities, which are these authorities and under which conditions they are obliged to report.

The situation of vulnerable children in Greece has been seriously exacerbated by the impact of the financial crisis and the austerity measures imposed as a result. From the beginning of 2015, Lumos has worked in partnership with the Athens-based Institute of Child Health, Department of Mental Health and Social Welfare (ICH-MHSW), to better understand the current situation and promote good practice in reform.

In **Italy**, the data and information on the phenomenon of children removed from home are derived from the Region through the monitoring of the Italian National Childhood and Adolescence Documentation and Analysis Centre. The quality of information provided is very diverse according to the region because only in 2018 the Italy will introduce a common system of registration of children out of home.

At 31 December 2014 were estimated 30.026 children removed from family, of them 15.427 living in residential facilities for children, the others living in foster families.

There are no national statistics on minors reported to and assisted by the local healthcare and social services, and unfortunately Italy has not a national surveillance system of child abuse.

Some information can be drawn from the judicial statistics and the recent national sample survey on the abuse of children and adolescents in Italy, which has been promoted by the National Ombudsman for Children in collaboration with ISTAT-CISMAI and Terre des hommes (2015).

The sample survey promoted by the Ombudsman for children with Istat, TDH and CISMAI, estimated a total of 457,453 children and adolescents in care to the local social services, that is 47.7 of minors out of 1,000 resident minors. Of these, 91 272 (9.5 minors every 1,000 resident minors) were taken in charge for a form of child abuse, in particular 47,1% for neglect (material and / or affective), 19,4 % for witnessing violence, 13,7% for emotional abuse, 8,4 % for pathologies of care (i.e. dyscuria), 6,9% for physical abuse and 4,2% for sexual violence.

There is not an awareness on the issue of institutional abuse in general and, particularly in residential care, then there are not information and data, even if several stories on such situations are well known.

In Italy there is a rich frame work of laws concerning the protection of children form CAN and also the removal from family in case of danger, nevertheless there are frequent problem in the coordination of the intervention, which can lead to an institutional victimization of the child who should has been protected.

2.2 The knowledge and awareness in relation to the problem of child institutional abuse

In Romania there are some researches that since 2000 have been studying the effects of institutionalization on children and investigate conditions of institutional abuse. The *Survey on Child Neglect and Abuse in Residential Care Institutions (Stativă et al.2000)* surveyed 3164 children and analysed 18 case studies, more 9 focus groups. The **results highlight that** 48.8% of children had experienced beating as a punitive practice, 38.1% were aware of situations when children were forced to have sexual relationships. Children in traditional institutional settings were more vulnerable to beating, the probability of being punished was higher for boys than for girls; and having no siblings in the institution increased the odds of being punished several times (Rus et al., 2013; Rus et al., 2016). The research of Zeanah and colleagues (2005) explore the impact on the attachment processes. They examined 136 institutionalised children and 70 community children; the results identify serious disturbances of attachment that seemed to be the rule rather than the exception in children raised in the relatively socially deprived context of institutions for young children in Romania. More recently, the survey *Violence in Romanian Institutionalised Children* (Gavrilovici, Groza ,2007) pointed out the issue of violence. The researchers collected 448

questionnaires from children in institutions in Iasi Country. The information depicted a problematic situation: 68 % of male and 63% of female children were victims of threats in the institutions in the previous year; 71% of male, 69% of female children were witnesses of violent threats in the institutions. Council of youth in residential centres and Hope for children (2016) revealed that problems persist in residential cares till today. The authors conclude that young people in placement centres do not learn self care and self determination skills, they wish for a family, and lack social support.

In Greece there are no formal information and data about child abuse and neglect in the institutions. There isn't any research in this issue and most of the times when an incident occurs the responsible of the institutions choose not to communicate this in the public. The responsible prefer to resolve the issue within the institution either by removing the child or children or by placing the professional to another position.

The state of the art indicates (1) the inaccurate estimation of the magnitude of the problem in Greece due to a great lack of primary data from epidemiological field studies and a lack of systematically collected data from organizations, (2) the insufficient legal framework concerning CAN, the lack of a law solely dedicated to CAN as well as the limited enforcement of the existing provisions, and (3) the non-existence of a structured Child Protection System in Greece, resulting in confusion regarding child care and child protection procedures in cases of CAN as well as focusing mainly on harm reduction and tertiary prevention practices instead of primary or secondary prevention practices.

The lack of coordination among Judicial authorities, health services, police and social services, often leads to the re-victimization of the already victimized children and their families who also run from organization to organization without receiving the necessary help.

Lumos is an international non-profit organisation founded by J.K. Rowling, dedicated to ending the institutionalisation of children. Lumos supports local civil society partners in Greece and the Greek Government to promote deinstitutionalisation of children's services, by providing international experience and assistance on this issue.

On December 2011, probably the biggest case ever of the child sexual abuse in Greece was revealed; a children and adolescents' team basketball coach has been accused of abusing sexually 97 or more boys during the last decade. In relation to institutional abuse, on November of 2014 a report of BBC "The disabled children locked up in cages" referring on a public institution for disabled people in Lechaina, attracted the attention of local and international authorities about the abuse and violation of human rights going on in the particular institution.

The phenomenon of institutional abuse, in particular in residential care, is widely under- evaluated in **Italy**. It has never been a focus for research and policies even if in Italy there has been a strong movement for the process of deinstitutionalization. The main perspectives from which the issue has been dealt are:

- the institutional abuse as secondary effect of mistakes and difficulties in dealing with the protection and assistance of children victim of violence (e.g. delays in the intervention, the pressure and mistakes in judicial proceedings, etc.);
- the institutional abused linked with scandals in the Catholic churches concerning pedophile priests.

Only in recent years, some cases of violence in residential care, have drawn the attention also on this aspect.

In Italy the issue is discussed mainly from three perspectives:

- As causes and effects of different forms of child abuse happening in "institutional settings", that is association, churches, services, hospitals, etc.

- As dysfunctions related to the procedures for protection of children victim of violence or on charge to public services in social, judicial or health sectors
- As violence happening specifically in residential care

There are not specific researches on this issue in Italy, some information derives from the interventions of taking care of children or survivors of violence happened in institutional setting. The main element of knowledge are the results of disclosure of adults. The book "IL PAESE DEI CELESTINI – Istituti di assistenza sotto processo" edited by Bianca Guidetti Serra and Francesco Santanera, published in 1974, remains one of the few book related to an investigation on the living conditions of children in Institutes, then one of the few publication concerning institutional abuse. At the end of Sixties new approach for dealing with social exclusion and mental and physical disabilities favoured the disclosure of dramatic situation of neglect and violence inside places that were thought to be protective for children, adolescents and young mothers.

The events happened at the children home Il Forteto have a particular relevance in this framework. In September 2015 a Florence judge sent Rodolfo Fiesoli to trial on new charges of child sexual abuse. Fiesoli, who founded a rural institute for troubled kids in the Tuscan valley of Mugello called Il Forteto in the 1970s, had been sentenced in June 2015 to 17 and a half years in prison for child sexual abuse, cruelty to children, and group violence. Also, another Forteto ideologue, Luigi Goffredi, was sentenced to eight years on the same charges in a trial of first instance. The convicts "imposed cruel and arbitrary rules on the minors placed in their care," the judges wrote in their motivation for those verdicts. The survivors describe a true "parallel world". It is a story that has seen the collapse of the entire system of protection through serious negligence and some possible collusions as a result of what has been termed a "suspension of state laws."

For Italy, another particular issue is the sexual abuse inside Church. The issue has been more openly addressed in Italy by state and church institutions. the President of the Italian Episcopal Conference, Cardinal Angelo Bagnasco, acknowledged that it was "possible" that bishops in Italy had covered up abuse, whilst his deputy said that in the past decade 100 Italian priests had faced church trials in connection with the sexual abuse of minors.

The Irish experience. From the foundation of the Irish Free State in 1922 until 1996, at least 10,000 girls and women were imprisoned, forced to carry out unpaid labour and subjected to severe psychological and physical maltreatment in Ireland's Magdalene Institutions. These were carceral, punitive institutions that ran, commercial and for-profit businesses primarily laundries and needlework. After 1922, the Magdalene Laundries were operated by four religious orders in ten different locations around Ireland. The last Magdalene Laundry ceased operating on 25th October, 1996. In 2011, the Fine Gael/Labour government established an Inter-Departmental Committee to establish the facts of State involvement with the Magdalene Laundries (IDC). Although this inquiry failed to draw conclusions regarding the State's responsibility for abuse or failures to prevent it and was not an independent, thorough investigation into the abuse itself, the Committee's 1,212-page report revealed significant new information regarding the State's interactions with the institutions. It also provided some statistics about the number of girls and women who entered the Laundries, and their ages and routes of entry and exit – although these were hampered by gaps in the nuns' records, and the original data was not made available for examination outside the Committee.

In JFMR's experience, Magdalene survivors (and their family members) fall into five main categories: firstly, those who have spoken out and demanded justice; secondly, those who continue to live in silence; thirdly, women who are still living in institutional settings under the

control of religious orders; fourthly, those who died both inside and outside the laundry; and finally, the family members of women incarcerated in the laundries, including adopted people. *Magdalene Institutions: Recording an Oral and Archival History* is a Government of Ireland Collaborative Research Project funded by the Irish Research Council which was led by Assoc. Prof. Katherine O'Donnell of University College Dublin (UCD). The overall objective of this study is to contribute towards a better understanding of the Magdalene Laundry through the gathering and study of testimonies from people who are directly or indirectly related to these institutions.

Many survivors expressed the need for counselling to help in coming to terms with what happened to them. Most women are unaware that they can contact the National Counselling Service for help and will not always feel able to make an approach for fear of being rejected and/or out of concerns about confidentiality. Other survivors have medical issues which prevent them from travelling for counselling. Many survivors have severe medical problems and find themselves on lengthy waiting lists for treatment. In many cases it would appear that their medical problems arise as a direct result of their time in the Magdalene Laundries. There are other survivors also in need of disability supports.

Most survivors in contact with JFM expressed the need to be in contact with other women who were incarcerated in Magdalene Laundries.

The Magdalene Laundries abuse continues through the State's failure to implement many elements of the Redress Scheme

3. Legal framework

The situation of the legal framework is quite diverse in the four countries despite the common belonging to the EU and the ratification of the United Nations Convention on the Rights of the Child and the majority of the all significant international and European treaties related to the protection of children. The legal actions pass through penal, civil and administrative measures which sometimes are not coherent among them.

In **Romania**, the national law on the protection and promotion of children's rights (Law No 272/2004) sets forth clear provisions related to child protection from all forms of violence and prescribes the obligation for any individual or legal entity to notify relevant authorities when such cases are identified so that effective protection is provided to the child.

Law No 272/2004 on the protection and promotion of children's rights sets forth clear provisions on the obligation of reporting child abuse, neglect or exploitation for all practitioners, individuals or authorities with relevant competencies. Regarding the existence of a child abuse reporting system, the guidelines for the implementation of the Law no. 272/2004 regarding the protection and the promoting of children rights³ gives details and examples

GD No 49/2011 approving the framework methodology for the prevention of and intervention in instances of violence against children and domestic violence through a multidisciplinary team and network and the methodology for the multidisciplinary and interagency intervention in cases of

³ The manual for implementing Law no. 272/2004 regarding the protection and promoting of children rights, UNICEF Romania and ANPDC, Ed. Vanemonde, 2006

exploited children and children at risk of child labor, child victims of human trafficking, as well as Romanian migrant children identified as victims of other forms of violence in other states.

Some offences against the child committed within the family are considered separate crimes in the Penal Code, and others are included in other types of criminal acts. Thus, separate crimes are considered to be incest, family abandonment, maltreatment of minors, refusing the observation of the child's placement.

The criminal law imposes more severe penalties in case of offences against life, corporal integrity and health, against personal freedom, related to sexual life, offences which affects social cohabitation and family life, if these are committed against relatives or family members, in the presence of a minor within the family.

For children in residential/institutional care, they have the right to complain if their rights are not respected, but the guidelines are not sufficient to give children time and means to inform a trusted person about experiences of violence. As the Center for Legal Resources (CLR⁴) reported, the regulations are not strong enough to protect children in residential care from violence committed by staff or other young residents, nor for making sure that reporting is heard and responses are protecting children.

Identified limitations/gaps in other CAN related laws/ policies:

- The lack of efficient safety measures such as restriction order in case of domestic violence (forbidding for the perpetrator to return to the family home) and child abuse (forbidding for the perpetrator to approach the child outside of the family home)
- Participation to rehabilitation programs for aggressors is not mandatory
- There are no penalties in case of violation of presidential ordinance

In Romania Mayor's administration and social services have the responsibility for supporting poor parents to care for their children. The resources of local social services and local communities are extremely small. The decentralization of social services introduces large inequalities in the functioning of local services. The main tendencies of the policies in his sector are:

- Decentralization, responsibility left at local level
- Shrinking of mammoth residential care for children
- Numerous new small family type units
- Guidelines developed for child protection services
- Children with disabilities left in large or family-type residential care units

In order to fulfil really the children's needs, the system would need: monitoring the services for children's rights; diversify the access of public to information addressing children's rights; strengthening parental capacity to prevent abandonment; giving children identity papers, if they have been deprived of this right; maintaining family relationships; monitoring mass media to avoid negative image of children; involving children in decision-making and in monitoring their rights; diversifying the modalities to maintain the ethnic and religious identity of children in child protection; improving health care for children in child care; improving rehabilitation services for children with special needs; improving school performances and education level of children in care (mainstream education); diversify informal learning and free time; improving early intervention; improving the system of initial qualification/formation and continuous education of professionals.

In **Greece**, under the Greek Constitution childhood and the youth explicitly fall under the protection of the State as separate legal rights safeguarded (Greek Constitution, Article 21, paras 1 & 3). Actions are commonly initiated when there is a referral to the local social services or the District's Public Prosecutors Office or the police or the school or a child hospital. The legal

⁴ The Romanian name of CRL is CRJ (Centrul pentru Resurse Juridice)

<http://www.crj.ro/userfiles/editor/files/summary-report%20-%20eng%281%29.pdf>

framework at this stage consists of the Civil Code, Penal Code, Penal Procedure Code, Civil Procedure Code, and Law 3500/2006 on combating domestic violence, along with laws or presidential decrees describing the role of the social worker, the psychologist or the doctor.

Measures can be taken in a temporary basis or in a permanent one. The penal procedure is initiated when the child has been a victim of abuse or serious neglect in accordance with crimes provided in penal laws. The civil procedure is evoked when there are problems with the role and capacity of parents or the child has been abandoned.

All crimes related to sexual abuse or sexual exploitation against children are prosecuted even if the victim does not report the incident or withdraws his/her statement. In the Code of Criminal Procedure it is stated that any person who realises that a crime has been committed, then he/she has to report it to the District Attorney or the Police (art. 40).

In civil court procedures the victim may seek for compensation primarily according to article 932 of the Civil Code on the grounds of the moral damage caused by the unlawful act committed against him/her, especially if his/her health, honour, integrity or personal freedom was infringed. In penal court procedure the victim may act as "civil plaintiff" and demand a compensation and restoration of the damage caused by the crime, as well as "financial satisfaction" on the grounds of moral damage or mental anguish (art. 63 Code of Criminal Procedure). Finally, the Greek Authority for Compensation of victims of intentional crimes of violence, department of the Ministry of Justice, provides compensation to victims of criminal acts committed in Greece, who live in Greece or any other Member-State or of acts committed in another member state and the victim lives in Greece. All the aforementioned apply equally for children and adult survivors, as long as they are within the provided deadlines.

Critical issues concerning the legal support to survivors of child abuse in residential settings

Most of the legal bars in Greece offer free legal aid to children and young people. There are also provisions for covering the litigation expenses in certain cases. Furthermore, NGOs may assist a victim all through the legal procedures.

It is foreseen that Police and Public Prosecution Office should inform the victim for all his/her options and services available for him/her. However, given that this hardly ever takes place, it would be more appropriate to directly refer the person to a social worker/social service, where they could provide the victim with all the necessary information. An appointment with a lawyer should be arranged in every case, regardless if the victim has expressed or not the desire to file a suit.

In **Italy**, the Juvenile Court, established by Royal Decree no. 1404 of 1934, and the Tutelary Judge, established in every Court, are responsible for the surveillance, control and assistance of minors in difficult situations.

The law 1983 No. 184, as modified by Law 149/01. states the child's right to a family: when children cannot count on their own family they are entitled to be entrusted to another family or to a single person, or rather they can be placed in a family-type community.

The various types of child abuse, including the institutional mistreatment, do not fall all into an autonomous criminal figure but can be framed in different offenses, the majority of them are criminal offenses prosecutable ex officio, then there is the obligation to report, that applies to public officials and to public service staff who, in the exercise or because of their duties or of their service, having news of a criminal offense prosecutable ex officio.

The omission of complaint is a crime punishable by imprisonment.

Every crime that has caused a pecuniary or non-pecuniary damage forces the responsible for compensation.

There can be no doubt that the victims of institutional mistreatment have suffered a damage and are entitled to claim compensation for this damage that may be a biological, susceptible to

immediate medical evaluation, but it may also be moral or non-pecuniary, for the suffering (worry of mind, short and long-term psychological damage).

Quantification varies with the severity of damage and the duration of mistreatment and abuse.

In order to exercise their right to compensation victims may act within the established criminal trial, with the instrument of a civil action that can only be done through a lawyer.

The right to compensation is linked to the prescription times of the offense. This may be a particularly critical aspect especially for crimes dating (also quite a lot) back in time, for which it is highly likely that the prescription terms mature before the judgment.

However, if the sentence of first instance comes before that the prescription terms mature, the right to compensation is guaranteed even if during the appeal the offense is declared prescribed.

In contrast, if the prescription terms mature before conviction, automatically the entitlement to compensation is lost.

In Ireland, Women and girls were confined in the Magdalene Laundries through a variety of channels (judicial system, social agencies, families, etc). The State failed to protect and defend their individual liberty and human rights; the State had duties to all of the women and girls in the Laundries (a) to prevent them from being held against their will, (b) not to exploit or benefit from their forced labour or servitude and (c) to care for these women and girls in terms of their rights to a safe workplace, to social welfare and (in terms of school-age girls) an education. The Irish government introduced a scheme for Magdalene Laundry survivors but there is a serious delay in implementing it and the government has seriously undermined Magdalene survivors' trust. The healthcare provisions as outlined in the Redress for Women Resident in Certain Institutions (RWRCI) Guide do not provide Magdalene survivors with the same range of drugs and services. JFMR is also concerned that the Department of Justice has deemed at least 40 women to lack sufficient capacity to apply to the Scheme and that these particularly vulnerable Magdalene survivors are being prevented from benefitting from the Scheme. The Minister for Justice chose not to legislate to provide these women with assistance and advocacy in applying to the Scheme, preferring to delay the processing of their applications until the Assisted Decision-Making (Capacity) Act 2015 is in operation.

4. Brief overview of child protection system

In Romania, Law no.272/2004 on protection and promotion of child rights, stipulates the organization, operation and responsibility of the institutions that are specialized in this field, on a central and local level.

On a central level, the **institution specialized in the field is the National Authority for Protection of Child Rights (NAPCR)**. It is a **regulation** authority. On the level of the Romanian territorial administrative units, respectively on the level of counties/districts (41 and, respectively, 6 districts), as well as on the level of towns, cities and communes (totalling to 3038), the public county and local administrative authorities have the obligation to guarantee and promote the observance of child rights, through the insurance of activities and services of risk prevention concerning the violation of child rights (on a local level), as well as to insure special protection for children who are temporarily or permanently lacking parental care (on a county level).

In Greece there are a number of state agencies responsible for providing to children social welfare and health services.

The main authorities are the Ministry of Health (responsible for health services), the Ministry of Labour, Social Security and Welfare (responsible for assistance to vulnerable children such as orphans, children with disabilities or serious illnesses, etc) and the Ministry of Interior, which, among others, have joint responsibility for early childhood care. Ministry of Justice is also responsible for providing care to imprisoned parents' children if any other alternative is not available. Local authorities are responsible for preschools and child care services.

Public residential institutions for children are under the responsibility of the Ministry of Labour, Social Security and Welfare; the same equally applies for private ones which also are under the supervision of the local authorities. The construction and operation of these units must comply with the minimum national standards regarding infrastructure, hygiene, safety, etc., but each institution, may have its own regulations and standards.

In Italy, the Municipalities and the Local Health services are in charge of providing services which are typically the ones needed by child victims of abuse and sexual exploitation. Regional government establishes the standards for children residential care facilities. In some cities local authorities encouraged the creation of networking among professionals working with children or, as in the case of intervention adopted by the Prefectures, representatives of all the institutions involved in the judicial proceeding. The protocols are aimed to reduce the risk of secondary victimisation due to incoherent interventions.

5. Advocating towards the national and an European recognition of institutional abuse

Romania has undergone a long way on the path towards a children's rights based system, but the progress is unequal (with ups and downs, with differences between urban and rural, between different counties, and services). It has gathered research data on child abuse and neglect, including children in residential care but data are not regularly monitored and made available for research.

Monitoring does rarely include the voices of children; support and therapy have to become an essential part of the individualised plan in child abuse cases, but the professionals do not offer these services regularly.

In **Greece**, the ICH has been able to move slowly the action of the government towards the establishment of a multidisciplinary and integrated system of prevention and protection. Important efforts have been devoted to the building up of a common knowledge and language for dealing with children to determine CAN cases. The process has just started, the economic crisis did not help because the living condition of children and adults have getting more vulnerable. The issue of survivors to child abuse institution remains on a secondary position, there is a lack of awareness on the magnitude and severity of the issue.

In recent years, in **Italy** public opinion was shocked by the disclosures of several events on institutional abuse in different settings, but from they did not bring to the adoption of specific measures concerning the prevention of institutional abuse. The institutions, including Catholic Church, are reluctant to identify such events as the results of distortions inside the system instead of the mistakes of single individuals.

The main critical effects are:

- minimization of the scope and impact of the events at a social level
- minimization of the effects on the victims
- denial of assuming the responsibility of the events as institution
- lack of preventive measures

- unavailability towards cultural changes which might lead to reduction of the risks

In Italy, since now we do not observe any particular assumption of responsibilities by the public institution involved in the events of institutional abuse that, the only exception, it the action of the regional government of Tuscany in relation to the events of Il Forteto. In the years 2012 and 2015, the regional government of Tuscany established two commissions of inquiry on “The activity of residential care for children in consideration of the events concerning Il Forteto”. They were aimed at understanding what happened there and identifying the political and institutional responsibilities related to the case of Il Forteto (resolution of the Regional Council of Tuscany No 48 of 28 July 2015).

The survivors of Il Forteto need social and psychological support in order to face the effects of the abused they suffered, but they need also a social and institutional recognition of the rights’ violation as well as the violence they were victims.

The recognition of the reality of institutional abuse should mean the adoption of a strategy finalized to politicians and policy makers, professionals, the victims and public opinion, as it is recommended in case o all the other type of violence against children.

On Feb 19th 2013, there was an official State apology to Magdalene survivors from the Prime Minister , but the four religious orders have insistently refused to apologise . The Magdalene institutions were not listed as relevant institutions suitable for inclusion in the State redress scheme for institutional abuse. Justice for Magdalene (JFM) has acted in order to maintain visibility to the stories of such women and to get the recognition of public responsibilities for what happened to them.

Within the Magdalene Laundries secrecy and silence was maintained, with identities changed and friendships discouraged and punished, JFM has promoted a openly disclosure of what happened there. Most of these women remain in silence because the stigma remains, and JFM encourage the media and the public to not focus on the salacious aspects of trauma, but rather on the continuing campaign for full restorative justice. The government has never established an independent investigation into abuse in the Magdalene Laundries.

Positive achievement is the documentation of the event: the witness statements, archival materials and documentary evidence which have been gathered by JFMR offer a permanent, freely accessible archive of evidence which can be availed of by survivors, family members, researchers and members of the public.

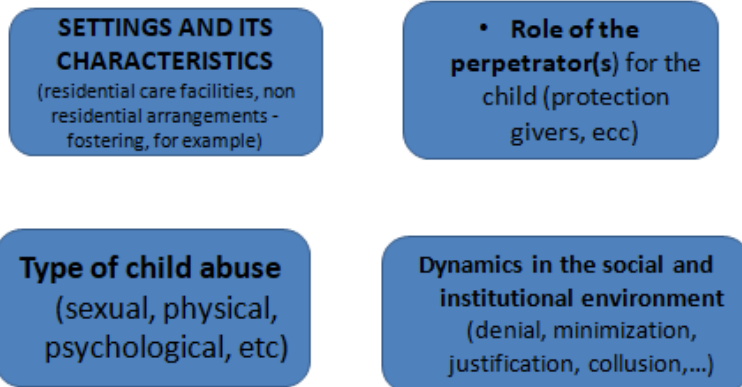
A survivor-centred ethos has underpinned every aspect of JFM’s work. The JFM proposed scheme for a public recognition of the sufferance of the Magdalenes comprised of four parts: 1) a State apology; 2) a Dedicated Unit within the Department of Justice for Survivors of Magdalene Laundries to facilitate the provision of pensions, lost wages and state services; 3) a Commission for Financial Reparation; and 4) transitional justice and preservation of the historical record.

Political lobbying is another relevant aspect of a strategy for advocating the rights of the survivors. The recommendations of human rights bodies proved to be crucial milestones in JFM campaign in order to make pressure on Irish government. In recent years new position has been adopted by the Irish government but the assumption of responsibilities remains insufficient. JFM works to reduce the isolation and marginalisation of the survivors who still perceive their past with shame.

JFM believes in the benefit of a group action, which draws on the evidence of many individuals each person’s experience sheds further light on another’s, and contributes to build up a scenario were the abuse could not anymore be considered as limited events to few cases.

6. Conclusions

Key components of institutional abuse



It is worthy to underline that the SASCA project moves from the perspective of **adult survivors** in order to understand the **long terms effects** of such events, and how their experience may enlighten **prevention strategy for the protection of children** living today in residential care.

The brief analysis of the state of the art in each country in relation to the awareness on the issue of institutional ill- treatment, highlights the following critical issue related to all the four key components of institutional abuse:

- lack of data on the phenomenon and scarce specific researches;
- undervaluation of the magnitude of the problem and its complexity;
- limited awareness on the peculiarities of the institutional abuse, in particular about the trauma it caused and the long-term effects;
- scarce understanding of the specific needs of victims of institutional abuse in residential care and in other public contexts;
- insufficient legal framework which is strongly focused on current victims and children;
- difficulties of public institutions to recognize also their responsibilities, in particular their failure to protect and prevent;
- denial of assuming the responsibility of the events as institution;
- lack of preventive measures;
- unavailability towards cultural changes which might lead to reduction of the risks.

The system tends to refuse to recognize its responsibility, the professionals tend to avoid contact with the pain of the victims, they have difficulties in accepting how much they were unable (or not willing) to “see”.

A crucial importance for the outcome of support's interventions have the political and institutional acknowledge of **public responsibility of the abuse occurred where institutions should have guaranteed the protection of victims** (Chavis eMcMillan, 1996). The victims perceive the institutions as a system that deceive them, ignored them left them without protection, erasing their possibility of trusting or hoping.

For the victims the detachment from such an experience, it is exposed without protection to the pain and humiliation of the systematic aggression suffered, along with a personal laceration that has to do also with the fact that they have been part of that community and, in varying degrees, they internalized the dominant ideas of that experience.

According to our experience advocating towards a recognition of the reality of institutional abuse should mean the adoption of a strategy finalized to politicians and policy makers, professionals, the victims and public opinion, as it is recommended in case o all the other type of violence against children (WHO, Ispcan, 2006; Smallbone, S., Marshall, M., Wortley, R (2008). Preventing Child Sexual Abuse: Evidence, Policy and Practice. Willan: Devon.). Institutional abuse of children should be considered as a key public concern. The victims of institutional abuse tend to disclosure late in their life because they have fear to be blamed, have difficulties to recognize what happened to them, suffer the long-term effects of the trauma. This fact should lead changes in the norms concerning prescription of crimes, and professionals to keep seriously late disclosure.

Institutional abuse has no single cause, and it is not the responsible of the direct author, it is often the results of entire system which colludes, covers, justifies and sometimes motivates violence against children. The issue must be the focus of public Inquiry Commissions which assume the role of coming across the responsibilities of different actors.

The laws should clearly refer to:

1. the rights of the survivors, as persons who suffered child abuse in the childhood or adolescence but they find the way to disclosure and denounce them only when they become adults;
2. The peculiarities of institutional ill-treatment and the responsibilities of the different actors of the protection system;
3. Treat the survivors, in particular those who were victims of institutional abuse as vulnerable victims of crimes;
4. Abolish the terms of prescription;
5. Identify specific judicial procedures in order to take into account the vulnerability of such victims;
6. Define a better scheme of compensation.

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