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## **Vulnerable children in Ukraine : impact of institutional care and HIV on the development of preschoolers**

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# Chapter 1

## **General Introduction**



## Introduction

Institutional care for orphaned children has a long history and is widely spread; it has been used in countries with different ethnic, cultural, economic, and political backgrounds. Throughout its existence institutional care served various purposes. On the one hand, it provided shelter, food and education to children who otherwise would often be doomed to extreme poverty, homelessness, and even death (Boswell, 1988). Some poor parents and single mothers considered institutional care as a temporary shelter or boarding school that gave their children a chance for education and better prospects. The state used institutional care to prevent infanticide and impose order, discipline and control over the poorest parts of the population, and, in some instances, it was even used to breed desirable citizens (Carp, 1999; Hacsı, 1998; Ransel, 1988). Socialist and feminist movements favored collective institutional care as a means to facilitate economic and social involvement of women and a solution to gender inequality (Engles, 1902/1972; Firestone, 1970; Taylor, 1983).

On the other hand, the criticism of childcare institutions may very well have been as deeply rooted and widely spread as its pragmatism and use. The high costs, the presumable encouragement of child abandonment, and frequent rearing failures have been mentioned as the major drawbacks. Especially since the early 1940s a number of studies presented a wealth of empirical evidence of the adverse impact of early institutional rearing on the development of children (e.g., Freud & Burlingham, 1944; Goldfarb, 1944; Goldfarb, 1945; Levy, 1947; Spitz, 1945). The decline in the use of institutional care in western countries is to a certain extent associated with the influence of Bowlby's (1969/1997) attachment theory (e.g., Colton & Hellinckx, 1994; Johnson, Browne, & Hamilton-Giachritsis, 2006). The attachment theory originated from a report on the mental health of homeless children in postwar Europe and the effect of institutional care on children's development. It was delivered to the World Health Organization in 1951. The main conclusion of the report titled *Maternal Care and Mental Health* was that the deprivation of a maternal figure for whatever reason in the early years of life is detrimental to the development of the child. Later Bowlby formulated his attachment theory which "regards the propensity to make intimate emotional bonds as a basic component of human nature, already present in germinal form in the neonate and continuing through adult life into old age" (Bowlby, 1988, p.120). Subsequent research demonstrated that this innate propensity in infants to become attached to a specific caregiver(s) is universal and emerges in any cultural or rearing niche (Van IJzendoorn, Bakermans-Kranenburg & Sagi-Schwartz, 2006; Van IJzendoorn & Sagi-Schwartz, 2008).

Despite long existing and recently growing awareness of its negative impact on the development of children, institutional care still remains prevalent in many

parts of the world. In some countries the number of institutionalized children even continues to rise. Thus, in Ukraine the rate of children per 100,000 under the age of 17 years who are reared in residential institutions has increased from 225 children in 1989 to 509 in 2004. At the same time, alternatives to institutional care of children in the region have developed slowly (UNICEF, 2006). In Ukraine, apart from economic and social reasons, the high numbers of institution-reared children appear to be related to a lingering conviction that institutional care can be beneficial for children and the state. This conviction seems to have deep historical roots in the entire region (Carter, 2005) and deserves special attention.

### **Institutional care in Ukraine: a brief historical overview**

The history of institutional care in Ukraine is closely related to developments in Russia because of the geographical and cultural connections between these countries. In the region child care institutions are mentioned for the first time in the beginning of the 17th century (Gorshkova, 1995). In the late 17th and early 18th centuries tsar Peter the Great not only addressed the problem of child abandonment by issuing a series of decrees, but even envisioned a special future for institutionalized children. Considering them as “raw material for his expanding military forces and construction projects” (Ransel 1988, p.28) he reserved a special function for them in the development of the state.

Subsequent development of institutional care in Russia in the 18<sup>th</sup> century, in general, coincided in many aspects with the history of foundling care in Western Europe (Gouroff, 1829; Gorshkova, 1995; Pullan, 1989; Ransel, 1988). However, the Russian project, inspired by the ideas of the Enlightenment, was more far-reaching: the foundling homes were envisioned as incubators of an entirely new type of individual, and as the breeding ground for people who would be especially useful to their nation. Children were to be made completely different from their parents, filled with enlightened morality, work ethic, civic-mindedness, patriotism and respect for constituted authority (Gorshkova, 1995; Ransel, 1988). Therefore, even legitimate not orphaned children were welcome in the growing net of the institutions.

However mortality rates in the children’s homes went up to 98% (Langmeier & Matejeek, 1984), and, according to contemporary observers, children who survived early institutional upbringing looked reticent and disobedient, and later became involved in crime (Ransel, 1988). Despite the poor results, the conviction that in a carefully controlled institutional environment, by applying progressive pedagogical techniques, the outcasts of society could be transformed into loyal and conscious citizens was broadly accepted by the educated elite. This became a basis for the educational politics well into the twentieth century.

By the end of the 19th century and the beginning of the 20th century there was a short lived shift in the policy of the government, aiming to support families in their parenting role (Ransel, 1988). Subsequent historical changes, the Bolshevik Revolution, and the emergence of the new Soviet State, however, revived the utopian ideals of institutional rearing. After the October Revolution in 1917, when the Bolsheviks came to power, all children were declared to be State children and their rearing was to be unified (Oslon & Holmogorova, 2001). Adoption was outlawed, and it was not until 1926 that it was restored (Stolee, 1988). The new Soviet policy makers “expressed a wish that all families would be destroyed as soon as possible, so that there would be as many abandoned children as possible and the state would raise them in much greater numbers” (Lunacharsky, 1927/1991, p.10). At the time Children’s Homes for orphans and homeless children were viewed as a “wonderful rearing laboratory”.

The twentieth century was marked by several waves of homeless children and orphans, flooding the country as a consequence of war, famine, poverty and disease. Despite the poor state resources, the overwhelming majority of these children were to be raised in institutions with the conception that the upbringing of the Soviet children could be best done by the state. In this process the family was only given a secondary role. New concepts of child rearing in the institutions based on Makarenko’s theory of personality development “in the collective, by the collective and for the collective” (Bronfenbrenner, 1970, p.51) emerged in the 1930s and became a cornerstone of Soviet education.

This vision was once more reinforced in 1956, when the Communist Party leader N. Khrushchev expressed a necessity to establish new boarding schools for all children, in order to bring up “the constructors of the new society, people with a good heart and lofty ideals of utter devotional service to their nation” (Khrushchev, 1956, p.2). Plans were made to increase the number of the institutionalized children up to at least 2.5 million by the year 1965 (Khrushchev, 1959).

The new settings, often referred to as “schools of the future”, were again expected to raise model citizens, trained for specific occupations; to perform a welfare function by providing educational opportunities for children from underprivileged families or groups; and to enhance the social and economic freedom for women. The voluntary cession of children by their parents was encouraged again (Dunstan, 1980). To fulfill the Party’s ambitions to institutionalize the highest possible number of children, schools and Children’s Homes were reorganized into boarding schools (*internats*), and new facilities were built. *Internats* were to house about 400 children and often had to be equipped with small factories or farms where children could work and develop their skills (Bronfenbrenner, 1970; Dunstan, 1980).

It was not until the 1960s, when it became clear that the Soviet state was unable to cope with the challenges of institutional child-rearing. The state had

to reconsider the role and the responsibility of the family in child upbringing, returning that responsibility to the families. By the 1970s the development of residential education slowed down and practically stopped, the standards in these schools deteriorated, and boarding schools were turned into schools for “difficult” children, children deprived of parental care or lacking the conditions for family upbringing (Dunstan, 1980). The public care system for orphans and children deprived of parental care established in the 1960s is still prevalent. This system is differentiated according to the age and physical condition of children and structured in such a way as to maintain children deprived of parental care from birth to young adulthood (Figure 1).

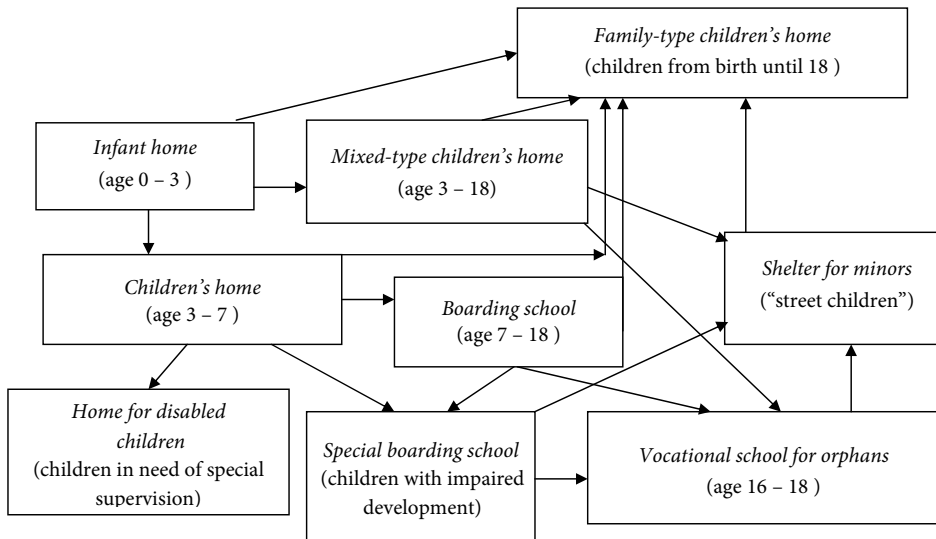


Figure 1. Public care system for orphans and children deprived of parental care (Source: Ukrainian Institute of Social Studies, 2001, p.8)

Ideologically driven developments in the care for orphaned children were not unique to Russia, Ukraine and the former Soviet Block. The parallels can be found at different times in different parts of the world as well. For instance, in America in the nineteenth century some Protestant and state managed orphan asylums also “wanted to break children away from the culture, and often the religion, of their impoverished parents”, and Catholic or Jewish asylums, “intended to protect children’s religious and/or cultural heritage from a world that asylum managers saw as hostile to it” (Hacsi, 1999, p. 54).

There are also more recent examples of the attempts to create an alternative collective form of child rearing and to nourish a “new type” of citizens loyal to the state. Thus, Israeli Kibbutz movements strived to create collective rearing

alternatives to family care in order to discourage individualism, to liberate women from child care in order to involve them more in the socioeconomic life of the community, and to bring up persons who were better prepared to communal life (Aviezer, Van IJzendoorn, Sagi, & Schuengel, 1994).

Also in China, after the 1948 revolution, most of the functions, including child rearing, that traditionally belonged to the family, were transferred to the people's communes. By the end of 1958, millions of nurseries and kindergartens had been established in the rural communes. Families were encouraged to send their children to the institutions for similar reasons as in the Soviet Union and Israeli Kibbutz movements, i.e. to free adults and especially women from the child-rearing responsibilities and facilitate their greater involvement in the production, and to ensure the proper "socialist" upbringing of the children (e.g., Dixon, 1982; Shao Chuan, 1989).

Even though the role of the ideological principles in the promotion of institutional upbringing may not be unique and limited only to Ukraine, Russia, and the region, its persistence and scale of the influence on child welfare has nevertheless gone far beyond similar developments in other parts of the world. Ironically, nowadays when in Ukraine the state's utopian aspirations to substitute families in the process of child rearing belong to the past, the state has to deal with numerous cases of evasion of parental responsibilities. In Ukraine, only about 20% of children in institutional care are biological orphans (UNICEF, 2006), the rest are so-called social orphans whose parents are unwilling or unable to fulfill their parental responsibilities due to poverty, social marginalization, single parenthood or poor health condition of either child or parent. Such children are entrusted to state institutions that in various reports are criticized for failing to provide an optimal environment for the development of children (e.g., Carter, 2005; UNICEF, 2006).

### **Average expectable environment vs. structural institutional neglect**

Recent empirical and theoretical studies have been consistent in demonstrating that the rearing failures of institutional care are associated with its radical departure from the conditions of the so called average expectable environment (Cicchetti & Valentino, 2006; Hartmann, 1958). Depending on the child's age, the average expectable environment encompasses a range of elements, such as consistent protective and sensitive caregiving, a supportive family, as well as socialization and open opportunities for exploration and mastery of the world. The presence of the average expectable environment appears to be an important prerequisite for the normal development of the child (Bowlby, 1997; Nelson, Zeanah, Fox, Marshall, Smyke & Guthrie, 2007).



Apparently, institutional rearing falls outside the scope of the expected range of the average environment due to the risk of structural neglect that is embedded in the organization and functioning of childcare institutions (Van IJzendoorn, 2008): its regimented nature, high child-to-caregiver ratio, multiple shifts and frequent change of caregivers almost inevitably deprive children of continuous and reciprocal interactions with stable caregivers, necessary to respond to their developmental needs. It appears that the greater the deviation from the conditions of the average-expectable environment, the greater the impact on the development of children and vice versa, the better developmental outcomes institutional care secures the closer it appears in its structure and functioning to the more regular family environment (e.g., Gunnar, 2001; Van IJzendoorn et al., 2009).

Of course, the notion of the average expectable environment is as much applicable to families. Families may also deviate from the average expectable norm for various reasons (e.g., family instability, economic hardships, child abuse and neglect). This raises the question as to what may be more beneficial for the development of the child - a well functioning institution or his or her own dysfunctional family. Bowlby (1951) after reviewing several studies that compared the development of children in institutions with their family-reared counterparts from a socially disadvantaged environment concluded that "children thrive better in bad homes than in good institutions" (p. 68). However, he emphasized that this conclusion is "far from definitive and in any case all depends on how bad is the home and how good the institution" (p. 69).

Some modern advocates of institutional care maintain that institutions of good quality can provide a sense of permanence, security, structure and camaraderie, absent in dysfunctional and abusive families, and that institutional care may be the best option for some children who are left homeless by such plagues of modern times as parental drug and alcohol abuse and AIDS (e.g., Carp, 2006; McKenzie, 1996; Seelye, 1997). A recent empirical study by Miller and colleagues (2007) suggests that in case of extreme rearing circumstances institutions can provide beneficial and for some children even life-saving interventions. Ferris and colleagues (2008) found a trend for survival advantage for Romanian HIV-infected children in institutional care as compared to children who resided with their biological families. While the debate continues, high-resource countries in the vast majority of cases tend to choose for family-based care, in the low-resource countries institutional care is still prevailing (Groza et al., 2009).

## **The topic of the study: Institutional care and HIV**

The persistence of institutional care has been shifting the focus of researchers from the impact of institutional care towards possible risk and protective factors in the development of children in institutions. In fact, empirical studies demonstrate that even when children are reared in the same institutions, and therefore presumably subject to the same caregiving circumstances, they do not show the same developmental outcomes (Smyke et al., 2007; Vorria et al., 2003; Zeanah et al., 2005). Besides, as evident from the comparisons with native family-reared children, not all developmental domains of a child are equally affected by institutional care (e.g., Smyke et al., 2007; Van IJzendoorn & Juffer, 2006). Such heterogeneity in developmental outcomes suggests the presence of certain protective and/or risk factors, which may be related to individual caregiving experiences as well as child characteristics. Identification of these factors may be highly valuable for the development of future intervention programs in child-care institutions. Therefore careful examination of the rearing environment as well as child characteristics against adequate native comparison groups is required. However, such studies are still scarce.

The current thesis focuses on individual characteristics of institutionalized children and various features of the institutional environment in order to explore how they interact with each other and to what developmental outcomes in different domains they lead. The ultimate aim of this thesis is to contribute to the development of intervention programs in institutional care for those children who are not able to experience the fruits of a transition to family-based care.

HIV-infected children are one of such groups. The rapid global spread of the pediatric HIV-infection brings more than 450 new cases every day (UNAIDS, 2007) and in many countries HIV infection becomes a growing reason for child institutionalization due to parental death or abandonment. In Ukraine, that according to UNAIDS has the third fastest spreading HIV/AIDS epidemic in Europe, about 20 percent of children born to HIV-infected women are abandoned and end up in institutional care (UNAIDS, 2007). In general, abandoned or orphaned HIV-infected children are shunned by potential adoptive or foster parents and are therefore likely to remain in institutional care, especially in resource limited countries, yet knowledge about the development of this particular group is very limited. Therefore this thesis explores the development of HIV-infected children in institutions and in their own often disadvantaged biological families in Ukraine.

## **Aims of the study**

The general aim of this study is to explore the correlates and sequelae of institutional rearing to get more insights into the potential intervention targets in child care institutions. More specifically, the study was designed to address the following research questions regarding children reared in Ukrainian child care institutions and in their biological families:

- (1) What impact do institutional care and HIV-infection have on different developmental domains of children, i.e. physical growth, stress regulation, cognitive and social-cognitive development, and organization of attachment?
- (2) How do HIV-infected children reared in disadvantaged families compare to children reared in institutions in various developmental domains?
- (3) Which individual characteristics and which aspects of the rearing environment buffer or exacerbate the impact of institutional rearing?

The main focus of chapter 2 is on the impact of institutional rearing on the physical development and stress regulation of institution-reared children in the absence of HIV infection. It also focuses on the possible role of individual perinatal characteristics and health condition of children in their development.

Chapter 3 extends the focus of the first chapter regarding the physical development and stress regulation of children in institutional care to the presence of HIV infection. Chapter 3 deals with the separate and combined effects of perinatal HIV infection and early institutional rearing on physical development, stress regulation, and cognitive and social-cognitive development of children. The role of different aspects of the rearing environment in cognitive development of children is explored.

In chapter 4 we examine the attachment relationships and indiscriminate friendliness of uninfected and HIV-infected children in biological families and institutions. We also explore the role of caregiving in the formation of attachment relationships of children in the face of institution-related and HIV-related adversities.

The last chapter summarizes the findings presented in the previous three chapters and discusses the limitations and implications of our findings for practice and future research.