UAFA Report

Trialing Gate-Keeping Systems in Azerbaijan

- ZARDABI INTERNAT, GUBA

FEBRUARY 2007
ACKNOWLEDGEMENTS

Many thanks to the Ministry of Education for supporting UAFA during the implementation of this interesting and challenging project. We hope that our experience will be valuable during the implementation of the State Program on De-Institutionalisation and Alternative Care Services.

Much reference is made to the publications and reports by Professor Anthony Bilson, a leading expert in gate-keeping. Particularly, we have referred to ‘Gatekeeping Services for Vulnerable Children and Families: Toolkit’ UNICEF/World Bank

Many thanks to all UAFA staff who contributed to this project, particularly the following:
- Zuleykha Najafova
- Maftuna Ismailova
- Gunay Ismayilova

Thank you to the following consultants for their contribution:
- Zarina Mammadova (report writing)
- Vusala Xalilova (training support)
- Gulnara Teymurova (training support)

If you have any questions concerning the information contained in this report, UAFA is ready to respond to all inquiries for assistance and consultation.

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On 29 March 2006, the President of Azerbaijan, Ilham Aliyev, signed the State Program on De-Institutionalisation and Alternative Care Services. This program comes at a time when Azerbaijan’s economy is one of the fastest-growing economies in the world, and many other related reforms are under-way. There simply is no excuse today to keep children in institutionalized care when alternatives can be developed and families supported through improved wealth re-distribution systems.

The main goal of the Program is ‘to provide the formation and effective operation of the mechanisms of placing children in families and organizing alternative care to child institutions taking into consideration the importance of the child’s upbringing in the family environment – in the atmosphere of happiness, love and understanding for the holistic and harmonious development of the child’s personality according to the Convention on Child’s Rights.’

The implementation of de-institutionalization stipulates appropriate actions in the following priority directions:
- taking preventive measures against the placement of children in child institutions and reducing gradually the number of children in state institutions on the basis of poverty reduction and improvement of social and economic conditions in the country;
- improving the network of child institutions and boarding-type child institutions;
- transferring state child institutions into family-based support centers;
- creating the system of alternative services (community and family-based services, guardianship, trusteeship, fostering, adoption);
- implementing mechanisms of expanding and stimulating the opportunities of giving children to families (biological or alternative);
- creating the system of reorientation of the child institution staff and training of social workers.

Recently, the government conducted several monitoring visits to institutions around Azerbaijan in order to develop appropriate strategies for program implementation. This is exactly the time when research and practical experience of pilot de-institutionalisation projects can become an invaluable resource to the government.

UAFA has worked consistently on the issue of De-Institutionalisation and the Creation of Alternative Care Services since 1998, when we first visited one of the Internats in Shuvelan. We started by improving living conditions for these children which was soon followed by supporting their education and development.

Research:
This experience made us interested in the conditions facing all children placed in institutionalized care so we initiated a 7-month period of research in 1999 which involved personally visiting more than 40 institutions in Azerbaijan, including Nakhchevan. This research is entitled ‘Situation Analysis of Children’s Institutions in Azerbaijan’.

Our main conclusions from this research which was published in 2000 were that:
- Individualized case management system must be implemented
- 64% of children leave the institution during the holidays, indicating that many families are able to provide for their children at some level
- The sense of fear which pervaded most institutions hinders change
- Attitudes towards and care for children with special needs must be focused upon as these are the most disadvantaged children in this sector

Further research on the reasons for institutionalisation, in 2002, found that the main reasons for children institutionalization are poverty and family breakup. Disability also plays a key role in the permanent institutionalisation of children. The results of this research suggest that poverty eradication and family unity are two issues that have to be addressed by the government in order to commit to the de-institutionalization process.
Finally, in 2004, UAFA completed a revision of the original ‘Situation Analysis of Children’s Institutions’ and visited 28 children’s institutions. A telephone survey was carried out for 61 institutions. Our research led us to the following recommendations:

- Each institution has a different function. This function does not necessarily correspond with its official name or role according to the list of six institution types. De-institutionalisation strategies must not be generalized but look at each institution individually
- Of the 28 institutions visited, 80% of children only attended for education and food. They returned home every day or at weekends if parents lived too far away. Therefore, these children are not ‘institutionalized’ and de-institutionalisation strategies must reflect poverty alleviation and transportation issues

Practice:

Based on our extensive research, UAFA has developed a number of models that can support the de-institutionalisation process:

**Institutional Reform for children with/without disabilities:** the long-term goals of UAFA activities are to transition each institution from residential care to offering day-care & respite services, community-based services and small group home facilities for assisted living.

Locations:
- Children’s House #1, Ganjlik (Ministry of Health)
- Internat #3, Shagan (Ministry of Labour & Social Protection)
- Internat #7, Saray (Ministry of Labour & Social Protection)
- Zardabi Internat, Guba (Ministry of Education)
- Internats #1 & #16, Shuvelan (Ministry of Education)

Through staff training and an individual approach to children and their families over more than 6 years, UAFA has a deep understanding of the system of institutionalisation and the strategies needed to smoothly move from institutionalized care to alternative community-based services.

**Community-based Services for children with/without disabilities:** the long-term goal of UAFA activities are to ensure that vulnerable and disabled children and their families have access to a variety of community-based social services with the emphasis placed on family support rather than institutionalized care.

Locations: Yasamal, Ganja, Khachmaz, (Mingechevir, Goranboy, Shuvelan – UAFA has developed the capacity for community-based rehabilitation at these Centre)

Centre staff provide rehabilitation services, parental support, home visiting and training for local medical and educational facilities to improve Early Intervention and Inclusive Education services.

**Advocacy:**
In order to ensure the widespread dissemination of our research results and sustainability of our services, advocacy plays an important role alongside this practical work. UAFA has held many round table meetings, workshops and conferences for representatives from local and national government and NGOs. We are also a member of a number of coalitions: Inclusive Education Working Group, Child Protection Network and the Coordination Council for the State Program on De-Institutionalisation and Alternative Care Services.

UAFA’s main advocacy statements for de-institutionalisation in Guba region are:
- Guba Internat is given special status as ‘group home’
- Some teachers are re-classified as social workers
- All children are registered at local school for education
- Minimum limit for numbers of children at institution is abolished
- This strategy is taken to Presidential Apparatus for special authorization as first pilot of State Program on Deinstitutionalization
As already mentioned, it is important to look at each institution individually in order to develop a de-institutionalisation strategy that will meet the needs of the children and their families, as well as the staff of the institutions. UAFA broadly defines institutions in the following categories:

### Table 1: Categories of institutions

<table>
<thead>
<tr>
<th>Category</th>
<th>Type</th>
<th># of institutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>For typical children from mainly rural backgrounds, poor, often single mother, other complex social problems such as alcoholism and illegal marriage</td>
<td>8</td>
</tr>
<tr>
<td>2</td>
<td>For disabled children who have been abandoned to life-long institutionalisation</td>
<td>4</td>
</tr>
<tr>
<td>3</td>
<td>For disabled children who are accessing education services, still mainly living with parents</td>
<td>11</td>
</tr>
<tr>
<td>4</td>
<td>For typical children from poor families, accessing food and education only, going home daily, few stay overnight because of distance/transportation issues</td>
<td>29</td>
</tr>
<tr>
<td>5</td>
<td>Mixed, majority for food and education, some institutionalisation because of abandonment due to poverty/family break-up but in minority</td>
<td>6</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>58</strong></td>
</tr>
</tbody>
</table>

Taking a representative sample of 72 children at time of starting work in Zardabi (in August 2005), the following breakdown is possible:

### Table 2: Statistical breakdown of family background

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Family background</th>
</tr>
</thead>
<tbody>
<tr>
<td>50%</td>
<td>Single mother – father has either died, left the family or is in prison</td>
</tr>
<tr>
<td>21%</td>
<td>Single parent family – parent has physical or mental illness</td>
</tr>
<tr>
<td>14%</td>
<td>Both parents have left and/or remarried, leaving child with no parental care</td>
</tr>
<tr>
<td>21%</td>
<td>Both parents are still married but one has physical or mental illness</td>
</tr>
</tbody>
</table>

The main reasons for selecting Zardabi Internat as a model for De-Institutionalisation are the following:
1. Children placed here represent the most difficult group with which to work, which is demonstrated in Table 2 by the breakdown of family backgrounds
2. Most of the children come from Guba and neighbouring regions, which makes it easier to find and work with their families
3. The Internat is isolated in a poor, rural community which as few basic services and no leisure or other community-based services for children

**Zardabi Internat represents an ideal model for implementing de-institutionalisation strategies because it represents one of the most challenging scenarios for community-based care.**

As the process of case management and development of alternative services depends upon knowing the reasons of institutionalisation for each individual child, it is useful to know in advance which basic strategy to adopt for each category of institution. Therefore, Table 1 and Table 2 are useful indicators for decision-makers in government when consulting with the organizations who will be contracted to implement de-institutionalisation.

Finally, there are many arguments against de-institutionalisation, from the side of staff, parents and even the children.

* other institutions are juvenile justice or sanatorium categories
<table>
<thead>
<tr>
<th>Argument</th>
<th>Counter-Arguments</th>
</tr>
</thead>
<tbody>
<tr>
<td>I will lose my job</td>
<td>If De-Institutionalisation process is planned with careful steps, it can actually lead to job creation because more people are needed to build up the social work/care structure necessary. However, it WILL lead to job loss if existing rules &amp; procedures for adult:child ratio are not cancelled during the transition period.</td>
</tr>
<tr>
<td>All the internats will be closed as a result of de-institutionalisation</td>
<td>Within the de-institutionalisation program, internats will not be closed by rather transformed into community-based day-care centers providing ‘alternative care services’ for children with special needs. They will serve another purpose where employees will be assigned with new roles and responsibilities.</td>
</tr>
<tr>
<td>Services at the Internat are better than at home e.g. computers</td>
<td>Most families suffer from some of the same problems as those that abandon their children. They keep their family together but their children still should be able to benefit from these services aimed at helping vulnerable children. All children should be able to access these services in a community.</td>
</tr>
<tr>
<td>Poor parents can’t look after children</td>
<td>Poverty should not mean that children are removed from their family; government spends hundreds of $ per month on each child in care – this finance must be re-directed towards alternative community-based services. This is possible after case management/social workers are in place to provide support to families and verify needs of families.</td>
</tr>
<tr>
<td>It is wrong to return children home because they will live in poor conditions</td>
<td>Any parent of family may face difficult times and different social or financial problems. Timely assistance from a social worker may help to overcome the difficulties and improve living conditions. International research confirms that family care is the best for healthy development of children; all child will suffer from separation unless circumstances are extreme.</td>
</tr>
<tr>
<td>NGOs are only doing this for their financial interest</td>
<td>Often government does not have the capacity to develop new services themselves and needs external support. Who should provide this support? A company which charges for a profit, or an NGO which charges little or nothing? Reputable, cause-related NGOs have financial interest only to pay experienced staff and to cover their costs.</td>
</tr>
<tr>
<td>It is easier for me to put my badly behaved child in the Internat</td>
<td>Are teachers trained and experienced in solving behavioural problems? Have you questioned why your child has a behavioural problem? Well-trained child development specialists can help a family to overcome behavioural problems so that the child can continue a normal home life.</td>
</tr>
<tr>
<td>I am uneducated, it is better for my child to live in the Internat where teachers can help him/her</td>
<td>With or without education, a parent still provides love and attention, can teach the child right from wrong…..of course, your child needs educated teachers during school hours, but teachers go home – who looks after your child then? One adult for 20/30/40 children.</td>
</tr>
<tr>
<td>My husband has left me/is ill/is an alcoholic…..I have no other option</td>
<td>Of course this is a difficult situation and one in which a social worker can help with access to other services; it does not mean that the child should be removed from the mother that loves him/her. If she needs day-care, this should be offered so that she can still work and bring up her child. If child is at risk from alcoholic father, mother needs support to deal with situation in best interest of child.</td>
</tr>
<tr>
<td>My new husband does not want this child from my first husband to live with us</td>
<td>If you really can not overcome this situation, it is the role of a social worker to manage the case and find an alternative family. In many cases, someone from extended family may be willing to care for the child.</td>
</tr>
<tr>
<td><strong>I am pregnant but not married – I need to put this child somewhere</strong></td>
<td>There are only a few hundred babies each year which are abandoned and it is not a reason to keep institutions open – temporary homes are needed whilst a new family is being found for the child.</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td><strong>My parents left me on the streets – where can I go?</strong></td>
<td>First, if the parents are untraceable, the social worker who is assigned to this case should seek a care order from the government through the courts to make decisions in the absence of parents – the institution can provide temporary shelter whilst an alternative family or relatives are found.</td>
</tr>
<tr>
<td><strong>My parents died and my relatives can’t take me. Where can I go?</strong></td>
<td>The social worker who is assigned to this case should seek a care order from the government through the courts to make decisions in the absence of parents – the institution can provide temporary shelter whilst an alternative family or relatives are found.</td>
</tr>
<tr>
<td><strong>My step-father is sexually abusing me. Who can help me?</strong></td>
<td>Sexual abuse is a difficult issue because it is often the adult’s word against the child’s – and too often the adult is believed. The social worker needs to be trained to work with this kind of case and work with the child and his/her mother to find a solution in the best interests of the child.</td>
</tr>
<tr>
<td><strong>Rich people bring toys and sweets to the Internat. I want them too.</strong></td>
<td>Of course, all children want to benefit, especially as so many of the children in regions are poor, as are the children living in the Internat. Rich people should be encouraged to donate for the benefit of all poor and vulnerable children, not just those in internats.</td>
</tr>
</tbody>
</table>

These arguments must be taken seriously as they will present challenges to the implementation process of de-institutionalisation. However, they must not HALT the process because each argument can be overcome with careful planning and clear explanation, as the counter-arguments suggest. The paramount interest should be that of the child but this does not mean that the interests of other stakeholders are not important – de-institutionalisation CAN be implemented and preserve the interests of all stakeholders in the interests of children are taken as priority.
In basic language, this refers to the mechanisms by which children should enter and exit State care – i.e. internats, baby-houses, sanatoriums etc. The main purpose of gate-keeping mechanisms is to keep the number of children in State care at a minimum level by developing a filter system in each region and at each point of entry to the system. Every effort should be made to keep them with their biological families and, if this is not possible, alternative State care should be offered instead of institutionalization.

‘Good gate-keeping is more a matter of attitude and philosophy than the availability of resources’ (Tolfree, 1995)

Diagram of Change

Look at the following continuum:

Existing system → Transition system in Guba → Desirable system

All of the children are accepted without needs assessment; no support services are offered to families

Institutionalisation is prevented in some cases by NGO and/or institution staff efforts

Case management; well organized process of assessment and planning of each child’s needs; support services provided to families

On this continuum, you will see that the existing system does not control the process of placing children at the Internat. Specifically, at Guba Internat there is no documented assessment of the child and his/her family situation performed by any of the referring bodies: Commission of Minors, Education Department or the Internat itself. As a result, the parent who is struggling with financial or social difficulties will approach Commission of Minors or Education Department to get an approval for placing the child at the Internat with only subjective discussions – there is no objective interview to assess the needs of the child.

From August 2005, a desirable system which puts the needs of each child at the centre of the decision making process has been promoted at Guba Internat. When working effectively, this can drastically reduce the number of children who enter State care.

Essential elements of gate-keeping mechanisms

There are four basic elements of gate-keeping mechanisms recommended by international social work practice:

1. An agency responsible for coordinating the assessment of children’s situations
2. A range of services in the community to provide help and support to children and their families
3. Decision-making based on assessment and review of children’s needs and family circumstances
4. Information systems to monitor and review decisions and their outcomes.
UAFA has created a situation where these 4 components of entry/exit mechanisms can be met in Guba.

1. An agency coordinating the assessment of children’s situations

In Guba, the Internat is playing the role of a coordinating agency (in the absence of any governmental coordination at this stage) which has the following functions:

a. To assess the child’s situation by answering the questions:
   - Why do parents want to place the child at the Internat?
   - What is the best for the child in this situation?

b. To assist in a problem-solving process, to consider possible alternatives to institutionalization by answering the following questions:
   - How to help the family to stay together?
   - What are the alternatives to institutionalization?
   - Who among the relatives could help the child, if parents are not able to take care of him/her?
   - Who can play the role of substitute family for this child, if the parent or other relatives are not able to take care of the child?

c. To refer parents to available social service providers and the programs they are eligible for by finding out:
   - What are the programs and organizations targeting these types of cases?
   - What does the family need in order to get enrolled in these programs or be served by these organizations e.g., documentation?
   - How can the Internat Staff assist in this process e.g., contacting necessary people, organizations?

2. A range of services in the community to provide help and support to children and their families

Despite the lack of services in every community, one of the main problems that UAFA has experienced is that the families who choose to place their children in State care are often unaware or unable to access the services that do exist. Current social benefits available:

- Pensions for people with disabilities
- Payments for children of divorced parents
- Targeted Social Aid
- Legal advice at Executive Committee

During the process of case management, Internat staff have helped many families to identify available services and assistance which resulted in the reunification of several children with their biological families.

Moreover, within the Guba project, the Internat itself has been able to offer some new services:

- Emotional support for distressed parents by newly trained ‘social workers’ (former teaching staff)
- Providing information during home visits (and providing much-needed comfort and support for some parents)
- Integrated youth activities for children from local community and from Internat (such as computer lessons, sports, dancing, arts & crafts)
3. Decision-making based on assessment and review of children’s needs and family circumstances

In the Guba project, UAFA implemented 3 important activities necessary to ensure that decision-making for each child is based on what is best for the child:

- Development of an assessment process
- Development of entry/exit procedures
- Development of a review system

This process was initiated by training followed by on-the-job supervision. Training was provided to both teaching staff of Zardabi Internat and the Commission of Minors in Guba. Since these are two of the main points of entry for children into State care, it was important that both bodies have the tools and skills to assess and make decisions for each individual case.

In order to review the decisions on each case, it is important to have an independent body set up who can perform this task. In some countries, the government creates this body but, in Guba, UAFA sought help from the community through an open meeting for volunteers who could form a ‘Child Protection Council’ (CPC).

The CPC meet each month to review the care plans that have been developed in the previous month and ensure that the child’s needs are being met. Additionally, the CPC have taken on an important advocacy role, in order to highlight the needs of the families whose children are at risk of institutionalisation.

In UAFA’s opinion, it is important that the CPC role in Azerbaijan is completely trustworthy, with no perceived interest by the general community. That is, the CPC should not be a registered NGO (perceived to have a financial interest) nor should it be a government body (perceived to be another layer of bureaucracy). As a purely voluntary group of trained community members, it has a higher chance of gaining respect and being effective in the community. UAFA has lobbied for some State funding of the CPC to cover its running costs, but the members should continue to act voluntarily.

4. Information system

In Guba, UAFA has developed a simple information system which helps us to keep track of all children that enter and exit State care.

The documentation records the following information:

- History of each child
- Reasons for institutionalization
- Assessment of biological or substitute families
- Plans for the future – which alternative services are recommended to the family
- Follow-up visits to the child and family – recording concerns, successes and next steps

A simple Information System can be easily reviewed and it provides the necessary information for performance indicators which are useful for assessing the role of ‘social workers’, the changing function of an institution and the efficiency of each service within a community.

### Conclusion to Gatekeeping Mechanisms

Experience in Guba has shown that it is possible to develop gatekeeping mechanisms in accordance with international standards of social work practice, despite the absence of legislation and governmental coordination. UAFA has been able to promote the transition from existing to desirable systems of entry/exit to State care (please refer to the continuum on page 6).

The process of assessment and intervention, with the focus on the child’s needs, has made it possible to prevent some children from being institutionalized. However, the government of Azerbaijan must keep two important issues in mind:

* State Committee for Family, Women and Children’s Issues
1. **Local reforms need national level commitment to succeed**
   This commitment must come in the form of regional visits, orders and decrees, and regular monitoring to demonstrate at the local level that the national government is committed to this process.

2. **Reforms can be region-specific**
   UAFA research* already indicates that most institutions work differently from each other, depending upon the social problems of the community in which it is situated, and the needs of the children which are registered. Gate-keeping mechanisms must be adapted according to the community it serves.

   (Summary of development of gate-keeping mechanisms in Guba is presented in the following table)

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* Situation Analysis of Children’s Institutions 2002
It must be highlighted that our experience in Guba is that of transition. With full governmental coordination, some features of the system would change.

Summary Table: Development of Gatekeeping mechanisms in Guba

<table>
<thead>
<tr>
<th>Four basic Components of entry/exit mechanisms</th>
<th>Major concerns in Guba</th>
<th>Transition Activities</th>
<th>Challenges</th>
</tr>
</thead>
</table>
| A single agency is responsible for coordinating the assessment of children’s situations | Three agencies participate in decision-making process for institutionalization without assessment or liaison  
- Commission of Minors  
- Educational Department  
- Zarbabi Internat | Social work trainings for representatives of Commission of Minors, Educational Department and Internat.  
Internat becomes a coordinating agency providing assessment of child’s situation and assistance to families | Representatives of Educational Department have not completed trainings  
Change in staff of the Internat has led to an increase in resistance to reform |
| A range of services in the community to provide help and support to children and their families | Insufficient alternatives to institutionalization  
Lack of social services and organizations targeting vulnerable families  
Lack of awareness about existing social services amongst vulnerable community | Internat itself plays a role of community-based organization where people in need can get information and support  
Internat Staff identify available welfare services for vulnerable families and refer them to available assistance | Lack of community-based organizations and rehabilitation centers in Guba region  
Targeted Social Aid has not reached many vulnerable families |
| Decision-making based on assessment and review of children’s needs and family circumstances | Decision making promotes institutionalization  
Little or no assessment review  
Uncertain criteria for institutionalization | Internat staff is trained and able to provide child’s and family assessment to prevent institutionalization  
Child Protection Council is established to provide independent review of care plans | Change in Internat staff requires re-training  
Representatives of Commission of Minor and Education Department need to be better prepared for child’s situation assessment |
| Information systems to monitor and review decisions and their outcomes. | Insufficient information about reasons children enter institutions and critical factors. | Internat Staff develops care plans for children which provides valuable information and data for de-institutionalisation process | Weak information system on the reasons for institutionalization and absence of monitoring on the national level |
As discussed in the first chapter of this report, it is possible to introduce new entry/exit procedures in order to transition from institutional care of vulnerable children to community-based case services which focus on family support.

The two most important sets of resources in the balance of each relevant Ministry are:

1. Capital assets: buildings, equipment, budget
2. Labour assets: staff, re-training processes

At Zardabi Internat, the building currently serves two purposes: as a home for children out of family care, and as a school for these children, from 1st – 9th form. For those children who have passed the 9th form, they are able to continue their studies at the local school in Zardabi. To date, only one child from this Internat has completed their full education to 11th form.

In the process of de-institutionalisation, UAFA recommends the following course of action:

**Essential preliminary actions:**

- Cancel existing ‘rules & procedures’ which set out the limits for the (1) adult:child ratio at the Internat and (2) the minimum number of children per institution. Without this cancellation, staff WILL lose their jobs as the number of children reduces.
- Fix staff levels and budget at the maximum level for the transitional period to allow reforms to proceed with resistance due to job loss.

**Recommendation 1: Zardabi Internat is given special status as ‘children’s home’**

As a children’s home, the institution should offer new services:

a. Case management: Responsible for coordinating the assessment of children’s situation

The institution staff will assess the family situation of all children who are referred to the institution, and make decisions on their placement according to the options currently available in Azerbaijan i.e.

- family reunification (keeping child with parents)
- extended family (placing child with grandparents, uncle/aunt/cousin etc.
- guardian family
- suitable State care (as a last resort)

**Recommended action for Zardabi Internat.**

b. Safe, temporary care: For children who have been abandoned, orphaned or removed from abusive home environment

For children whose reunification with biological or extended families is impossible or complicated, the institution should offer temporary care while the institution staff are looking for a substitute family or guardian.

**Recommended action for Zardabi Internat.**

c. Family support: Prevention of family breakdown

- Reunification with biological or substitute families
- Home-based support

When a parent makes the decision to send their child to Zardabi institution, they are often distressed and highly emotional as a result of the family problems that affect their decision. However, in many cases, a sympathetic and supportive listener can help the parent(s) to reverse their decision and keep the child at home. With the offer of continued support through home-visiting, many children can be kept in the family rather than become institutionalized.
During a six-month period in 2006, UAFA and Zardabi institution staff successfully reunited 12 children with their families as a result of offering support according to the needs of each family. A selection of their case studies are outlined in Appendix 1.

d. Individual mentoring: To provide adult role models for each child while out of family care
This means that institution staff should be responsible for a small number of children (3-4) and will pay attention to their individual problems, concerns, behavioral difficulties and development issues. It will help to create a home-like atmosphere where each child has a parent figure.

_Recommended action for Zardabi Internat._

**Recommendation 2: All children are registered at local school for education**

For those children who must remain in State care, it is important that they are enrolled at local school for their education, so that their life resembles a typical home life as closely as possible. They must not live in isolation at the institution but be integrated into the wider community as much as possible.

Other methods of integration involve opening activities at the institution to the children from the community. For example, the following activities can be led by institution staff as an alternative to their previous teaching jobs, in the case of Zardabi Internat:

e. Life skills trainings: To prepare for independent living
Through individual mentoring, where children will have the opportunity to learn skills necessary for future independent life, like cooking, personal hygiene, budgeting, decision-making, stress management, etc. These skills can be taught to all children who are interested, because sometimes parents do not have the capacity or time to give this attention to their children.

_Recommended action for Zardabi Internat._

f. Leisure activities: To provide services for all children in immediate community
In the Needs Assessment performed by UAFA at the start of the project in Zardabi, local community indicated that there were no leisure activities for their children. Children at the Internat also indicated that they had no leisure activities and so UAFA decided to open Youth Activity Groups for the benefit of ALL children from the Internat and from Zardabi community. Groups included computer training, art & craft, dancing and sports. Youth Activity Groups, led by teachers and volunteers, are a simple way of meeting the needs of many children and providing services that are rarely offered in isolated communities such as Zardabi.

UAFA also recommends that all entertainment, such as puppet shows, theater performances and music are also open for children from community.

g. Day-care/after-school care:
Some of the children at Zardabi Internat are placed there because the mother must work and there is nobody to work with or care for the child after school. This is a common problem, not only for families whose children are educated at Internats – lack of after-school care limits many parents from working and keeping the family out of poverty. Day-care also does not exist for parents of disabled children and is one of the highest priorities for most of these families – and would be a major step towards reducing the number of disabled children in State care.

Possibilities for day-care and after-school care include extending school and kindergarten hours to provide this service for all children, typical and disabled. This would also lead to increased employment of staff which would help to re-distribute staff from institutions but keep them within the welfare system. Additionally, Internats can play this role in their community by offering these services to children who are educated in local schools, and by offering day-care and rehabilitative services to disabled children and their families (only where potential for this exists).
Diagram of Transition to Community-Based Services
We have referred above to the different services that Zardabi Internat, or any other institution, can offer in a reformed State care system. In order to implement this new State care system, the institution staff can play a vital role if they are willing and able.

**Recommendation 3: Some teachers are re-classified as social workers**

In order to prepare existing staff of the Internat to meet new requirements and responsibilities a series of Social Work trainings was conducted. Fourteen teachers and care staff from the Internat participated in 23 half-day trainings as “social workers” and developed necessary social work skills.

Look at the following scheme:

**Social Work Training: Methodology and Structure**

Social Work trainings were developed in accordance with a social work manual and training ideas brought by UK experts from the Social Action Company. The methodology of the training is based on the Social Action theory of ‘experiential learning’. The central idea is that training should not be in a form of teaching, but in the process of adult learning, where training participants examine their own views and practices and develop ideas regarding necessary changes to the system. Therefore, the training sessions consist of multiple group activities. Additionally, UAFA added some components based on our own training program of child development theory and child-centred approaches to education.

Before we outline in detail the training program, it is important to define who a social worker is, as there are many misconceptions in Azerbaijan.

**A Social Worker is a professional** trained to talk with people and their families about emotional or physical needs, and to find them support services. A Social Worker might specialize in medical, educational, or family support. This depends upon the needs of the social system in which they work.

**Introduction to Course (1-2 days)**

Aims of the course:

- To discuss the meaning of Social Work
- To introduce social work principles
- To identify expectations of participants from the Training
The first sessions familiarize participants with the concept of social work and social work principles such as:

**Partnership** – to work in partnership with individuals, families, local communities in resolving social problems

**Advocacy** – to advocate for the most disadvantaged individuals and groups in the society

**Listening** – to listen to children, families and groups

**Promoting equality** - to address issues of inequality and whenever possible to redress the balance, etc

Group activity helps to identify participants' hopes and fears regarding the training which are discussed by the trainers.

**Introduction of Care-Plans (3-4 days)**

Aims of the course:
- To discuss the routes which bring children to the Institution
- To introduce the concept of individual Care Plans for each child living outside of parental care
- To provide guidelines for the development of Care Plans
- To introduce a written format of Care Plans
- To explain the process of Care Plans Review and why this is important

See Appendix 2 for an example of a Care Plan

The session is started with a group activity regarding routes into the institution. Participants present their ideas of how the children come to the Internat. As a result of this activity, participants draw a diagram of the route to the Institution. Absence of proper assessment and planning in the existing system is pointed out by the trainers.

See Appendix 3 for a diagram of the process of gate-keeping at the point of entry to the Internat.

Trainers explain the role of the Care Plan: every child living at the Internat should have a Care-Plan developed by a Social Worker.

The Care Plan will include information on the child's development such as:
- Emotional/ psychological behavior
- Social Development
- Education
- Health
- Identity
- Exit plans: from State care to family care

- Why is it important to make a care plan?
Children in institutions do not have parents to care for these particular needs so it is important that someone is assigned to each child to oversee their developmental process. Every child needs individual attention and whilst it is accepted that family care is better than institutional care, realistically many children will remain in institutional care for years to come. Therefore, it is essential to have a system which can take into account each child’s particular needs – the Care Plan.

- Roles and responsibilities in relation to care plans
Training participants are asked by the trainers about who should be involved in the decision-making process and planning for each child. Not all staff will have the skills or wish to perform this role. In the process of moving from State care to community-based services, there are many other roles that staff can play. The organizational structure and job descriptions at the end of this chapter outline our suggestions for Zardabi Internat.

- Practicing Care Plans
The next task for the participants is to write a Care Plan for some of the children they work with to give them an opportunity to practice their new knowledge.
Trainers should explain to participants that Care Plans should be reviewed at 6 monthly interval or more frequently if child has just entered or is about to exit the Institution.

Child And Family Assessment (4-5 days)
Aims of the course:
- To introduce three key areas in making Assessment
- To introduce framework of Child and Family Assessment
- To introduce Assessment methods
- To discuss what is “good enough” parenting
- To discuss assessment of substitute families
- To use role-plays for better understanding
- To discuss links between Assessment and Care Plan Development

See Appendix 4 for a copy of a Child and Family Assessment.

Trainers familiarize participants with the framework of Child and Family Assessment which includes three key areas:
- Child’s developmental needs – health, education, emotional/behavioral development, identity, family and social relationships, social presentation, and self-care skills
- Parenting capacity – basic care, ensuring safety, emotional warmth, stimulation, guidance and boundaries, and stability
- Family and environmental factors – family history and functioning, wider family, housing, employment, income, family social integration, and community resources

Trainers also discuss assessment of substitute families within the same framework of assessment. A substitute family refers to extended family, guardianship and adoption.

There are five main assessment methods discussed among participants:
- Observation
- Active listening
- Interviews
- Consultation with other professionals (police, teachers, health workers)
- Recording

A brainstorming activity is held on what ‘good’ and ‘bad’ parenting is. A line is drawn on a board to indicate “good enough parenting”. The participants brainstorm on “good” and “bad” parenting; good parenting indicators are written above the line and bad parenting indicators below the line. When the list is complete, trainers help participants to realize that good parents are not always above the line of “good enough parenting”, while bad parents can do something from the good list. During discussion, trainers explain to participants that, in reality, when we do an assessment we are not looking for perfect parents, but for ‘good enough’ - able to take care of the child.

Assessment role plays are used as a training method because adults learn well from putting into practice what they are learning in theory. Participants are asked to work in groups. Each of them has a chance to act in the role of social worker and family member. The social workers are asked to introduce themselves, explain the purpose of their visit, and to ask necessary assessment questions. After the group activities, questions, concerns and challenges are discussed by the whole group.

The trainers also point out the link between the Care Plan and Assessment and when it is appropriate to start with Care Plan development or family assessment. Different scenarios are distributed among participants and their ideas about the appropriate intervention for each situation are discussed.

Basic Child Development (3 days)
Aims of the course are to learn:
- Importance of first 5 years of life for normal child development
- Maslow’s Hierarchy of needs
- Groups of skills – fine motor, gross motor, cognitive, communication and social
- How to assess child’s skills
• How to use development charts
• Factors which hinder a child’s development

The course also covers the following issues:
• Effects of Institutionalisation
• Disability Awareness
• Behaviour Problems
• Children’s Rights & Child Protection

Introduction to Child-Centred Education (2 days)
The aims of this course are to learn:
• Difference between teacher dominated/child centered approaches
• Teacher’s role in the child-centered classrooms
• How to arrange classrooms into ‘activity centres’
• The importance of play for child development
• 4 stages of play
• How to use toys and materials for development of 4 stages of play

Play is often unrecognized as an important part of the education process, particularly in the style of education prevalent in institution classrooms in Azerbaijan. Whilst our aims are to re-train teachers as social workers, some teachers will inevitably remain in the pedagogical field and it is important that their style of teaching shifts towards a child-centred methodology that reflects our child-centred approach towards de-institutionalisation.

Introduction Of Child Protection Council (1 day)
This course is given to potential social workers in order to make them aware of the Child Protection Council (CPC). The same course will be given to new CPC members after which they will develop their own Statutes on the basis of the training they have received.

Aims and objectives of the course:
• To introduce the main purpose of establishment of CPC
• To discuss main responsibilities of CPC
• To introduce the structure of CPC
• To discuss principles of CPC

This course familiarizes the participants with the details regarding functioning of the CPC. As explained in the previous chapter, the CPC is made up of elected volunteers from the community in which the institution is situated. In the case of Zardabi CPC, their goal is:

“To achieve building of democratic and humanist society protecting children’s rights”

Their objectives are:
• To supervise and support social services for children’s welfare in Azerbaijan
• To participate in implementation of de-institutionalization process
• To campaign for improved children’s services and respect of children’s rights in acting community

The CPC has the following members: Chairman, Secretary, PR/media liaison, Care Plan Liaison and other positions according to the scope of the CPC.

Please see Appendix 5 for a copy of Guba CPC Statutes.

Practical Training and Supervision (6-12 months)
During a six month supervisory period, UAFA staff worked alongside institution staff to develop Care Plans, make Child and Family Assessments and carry out home visiting. This supervisory period is essential to ensure that newly-trained staff have the opportunity to develop their skills under experienced control. Decisions that affect the lives of children and families will often be complex and a wrong decision can have life-long consequences for the child.
Understanding the role of a social worker in practice takes time and experience. A standard format for interventions can help a social worker to become familiar with what is needed. Please see Appendix 6 for this information.

The main challenge faced during this period is one that will keep challenging new social workers unless provision is made at local level: transportation for home visiting.

Many of the families live in other regions or in isolated areas far from the institution. Public transport is infrequent and unreliable. Social workers must travel in pairs for their safety. Thus, transportation must be covered either by the institution budget or by the local Commission of Minors whose role it is to support the referral process.

In this case, UAFA was successful in applying to the Guba Executive Committee for transportation. For each home visit, transport was provided and a member from the local municipality accompanied us during the visits so that they would continue to follow-up support to the family.
The following information relates to our recommendations for structure of new services, and the job roles of the staff, in a desirable system.

Organizational Structure:

- **Director of Services**
  - **Entry/exit services:**
    - Assessment and care planning
    - Family support (institution & home)
    - Individual mentoring
    - Liaison with local community and inter-regional bodies
  - **Residential services:**
    - Temporary care placements
    - Feeding/clothing
    - After-school care
  - **Community-Based Services:**
    - Life skills activities
    - Leisure activities
    - Rehabilitation activities (if appropriate)
    - Day-care/after-school care

**Job Description for Director Position:**
This person is responsible for general management of services which include entry/exit services, residential services and community-based services. As the institution moves through the transition phase, this position will need committed and responsible leadership to manage the change and difficulties that this change will inevitably bring.

**Key responsibilities:**
- Management, Monitoring and Evaluation of the community-based organization’s functioning in accordance with the Decree on De-Institutionalization of 2005
- Supervision and management of all the employees of community-based organization
- Management of budget of the community-based organization
- Reporting to and cooperation with the Ministry of Education
- Building and maintaining a network with partners (rehabilitations centers, NGOs, governmental structures, etc)

**Requirements:**
- Preferably education in Social Sciences field
- Extensive experience of working with children and families
- Experience and strong interest in the field of family assistance and protection of children’s rights
- Highly motivated to contribute to the program of De-Institutionalization and to serve the children meeting their needs and interests in the best way
- Confident to lead a team through change
- Good organizational, analytical, communication skills, openness for new information
- Able to work in accordance with high professional standards of care

We highly recommend that any Director that must manage de-institutionalisation and creation of alternative services attends training workshops on at least the following issues:
- State Program on De-Institutionalisation and Alternative Community-Based Services
- Introduction to Social Work
- Introduction to Child Protection Council
• Introduction to Child-Centred Education
• Service management

Job description for Social Worker position:
Social workers will fill the positions in each of the three areas according to the organizational structure above. Depending upon their ability, their training should be specialized according to which service they are most suited.

All social workers will have basic responsibilities and requirements that should be in accordance with an institutional policy on child protection. An example policy for institutions is attached in Appendix 7.

Key responsibilities for specialized social workers:
• Psychological support for vulnerable children and families at point of entry
• Case management: development of care plans, assessments and home visiting
• Referrals of vulnerable families to available resources and programs
• Psychological support for preparation of parents for family reunification
• Preparation of children for reunification with biological, extended or substitute families
• Locating and investigating potential substitute families
• Individual mentoring of children
• Leading and community-based service activities
• Reporting on all of the above

Requirements
• Preferably education in Social Sciences/pedagogical field
• Extensive experience of working with children and families
• Experience and strong interest in the field of family assistance and protection of children’s rights
• Highly motivated to contribute to the program of De-Institutionalization and to serve the children meeting their needs and interests in the best way
• Good learning skills and openness for new information
• Good organizational, analytical, communication skills
• Able to work in accordance with high professional standards

Ideally, if the directors and social workers at the Internat (community-based organization) are recruited according to above-mentioned criteria, it will be much easier to promote the process of De-Institutionalization throughout the Republic. However, experience in Guba Internat has shown that most of the existing employees have a degree in pedagogical sciences, some experience of working at schools, poor social work skills and poor motivation for re-qualification. Therefore, the central intervention of UAFA was to educate the employees of the Internat in social work and raise their awareness regarding benefits of De-Institutionalization.

Conclusion to Transformation of Zardabi Internat
Experience at Zardabi Internat has shown that it is possible to contribute to transformation of the Internat towards community-based services through educating the staff, introducing new responsibilities and objectives to them and developing necessary social work skills. However, there are certain challenges which hinder full and successful transformation of the Internat:

i. Staff changes, for instance, have resulted in losing well-trained and experienced human resources
ii. Resistance of newly-hired Director and staff to the process of De-Institutionalization
Therefore, strong commitment to the program of De-Institutionalization from the governmental side is the central requirement for the successful implementation of the program.

For transformation of institutions, it is important that the Ministry of Education follows a policy of selecting appropriately qualified employees. These employees must then be actively supported to follow the re-training process that is necessary to develop the new services.
“It is best for children to be raised in their own families whenever possible” (National Family Preservation Network, 2003).

“The United Nations Convention of the Right of the Child affirms that it is in the over-riding interest of children that they be brought up in their own families”

Family- Based Care: Reunification of Children with Families (Biological and Substitute)

Reunification with Biological Families

Family-based care is proved to be the most effective way of bringing up healthy and well adjusted children. Based on this thought every effort should be made to reunify children with their birth parents and to keep families together. However, there are more and more children who enter institutions because their parents are unable to take proper care of them due to complex social reasons. Therefore, the central goal for social workers of the institutions is to prevent institutionalization, prepare children and parents for the reunification process, reintegrate the child into the family and trace the progress in the family after the reunification in terms of safety and well-being of the child.

Experience of UAFA in Zardabi Internat has shown that social workers at the Institution may contribute to the reunification of children with their birth families through the provision of the following services:

- **Family preservation services:**
  - identification of problems leading to institutionalization
  - identification of available supporting resources for the family
  - referral to appropriate resources and organizations (see Appendix 8)

  These services are especially critical for the families making decision to institutionalize their children. Proper and timely intervention can preserve the family union and prevent institutionalization

- **Development of Care Plans for every child at the Institution:**
  - Care plans includes information on child’s development and behavior as well as plans for leaving the Institution
  - Care Planning Meetings with participation of parents and children with the purpose of review of care plans

- **Family Assessment:**
  - Home visits and establishment of contacts with family members of children placed at the Internat
  - Assessment of:
    1. Child’s well-being including details on child’s health, mental health, education, behavior, emotional development,
    2. Parenting capacity including details on parents’ physical and
mental health, substance/drug abuse; family care: supervision of children, parenting style, family interactions, family safety, etc
3. Family/environmental factors including details on income, housing, hygiene, food and nutrition, etc

- Follow-up assessment of the family after the reunification according to all above-mentioned criteria: main focus is on well-being and safety of the child, meeting the child’s needs in the family environment

It is extremely important to trace the progress of the reunification process in the family by social workers. Family members may need social workers’ advice or psychosocial assistance afterwards and they should be informed that this assistance will be available anytime they need.

These step-by-step actions implemented by social workers re-trained by UAFA at Zardabi Internat resulted in returning of several children to their birth families.

SUCCESS STORY – REUNIFICATION WITH BIOLOGICAL FAMILY

History:
Ramin∗ is a 12-year old boy who has been living at Zardabi Internat for 6 months. His parents have divorced. As a result, Ramin’s mother, Irada, has to take care of her 4 children (2 daughters and 2 sons) all alone. After remarriage, Ramin’s father did not provide any support to his children. Irada could not find a job; numerous financial difficulties brought her to the decision to place Ramin at Zardabi Internat. Ramin has problems with his kidney and urinary system. That was the reason why Irada decided to take her child back home.

Family Assessment:
Irada is living with her children in a spacious house. Currently she is working at a canteen for workers. Her elder son has a temporary job and helps financially. She is willing to take care of her child.

Intervention:
Social workers (SW) assisted the family after the reunification:
- they made several home visits to assess family environment and found out that Ramin, his brother and sisters do not go to school; moreover, he spends most of the time without any supervision
- talked to Rami’s mother regarding significance of education for her children and specifically for Ramin
- Contacted local municipality and asked for their assistance in provision of school supplies and clothes for Ramin
- Involved the director of school and asked for special attention and assistance to Ramin in school environment
- Provided Ramin with necessary school supplies
- Followed up with the family

Outcome: Ramin is happy to live with his family. His health problems have decreased. He goes to school with the support of his mother.

Reunification with Extended Families

There are many cases when parents of children placed at the Institution cannot take care of their children because they are imprisoned or suffer from diseases, substance-abuse, etc. In these situations extended families can be considered as the best option for placing these children. Grandparents, uncles, aunts or other relatives can create safe and healthy environment for them.

* all names have been changed
However, proper preparation for reintegration of abandoned children with extended families is essential. If the parents are unable to take care of the child the social worker will need to perform the following tasks:

- To identify if there are any relatives able to substitute the parents and create a family-like environment for the child
- To establish a contact with these relatives and complete family assessment (see in reintegration with birth families section)
- To provide necessary informational and psychosocial assistance to families
- To prepare the child for the reintegration: to identify the needs of the child and address them in the work with the extended family members
- To implement the reintegration of the child into the extended family
- To carry out follow-up visits and assessments of the progress in reintegration process: with the focus on child’s safety and well-being, quality of care, parenting capacity of extended family members, family/environmental factors

By implementing this strategy, UAFA managed to reintegrate several children from Guba Internat with their extended families.

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SUCCESS STORY
EXAMPLE OF REUNIFICATION WITH EXTENDED FAMILY

History:
Nigar is an eight-year old girl who has been living at Zardabi Internat for a month. When social workers met Nigar at the Internat she was frustrated and lost because she was missing her mother. Nigar was sleeping badly and crying a lot.

Nigar was born in 1998. Her parents were not officially married and broke up when she was little. She lived with her mother, Lala, at her grandfather’s house in a Guba village. Nigar finished the first grade of mainstream school. Soon she and her mother moved out from her father’s house. Lala started working for a farm, where Nigar was exploited as a beggar and even was at a risk of being sold by the director of the farm. Consequently the child was institutionalized. According to Lala’s parents, they do not have any relationship with their daughter because of her improper way of life. They criticize Lala for having multiple relationships with men and not caring for Nigar.

Resources:
Nigar’s grandparents did not know that Lala had left her at Zardabi Internat. They are willing to take care of their grandchild, although they have financial difficulties and share the house with their son’s family. Nigar’s grandfather is eligible for disability pension.

Intervention:
First of all, social workers visited Nigar’s grandparents and informed them about her situation. When her grandfather expressed his willingness to take care of her, social workers (SW) assisted him in getting a guardianship status:
- SW met with Lala and convinced her that grandparents’ house is more safe and healthy environment for Nigar rather than the Internat
- assisted Lala in preparation of necessary documents for Commission of Minors to give her parents guardianship status
- assessed the extended family and found out that financial difficulty is the main problem for taking proper care of Nigar
- informed grandfather regarding disability pension that he was eligible for
- helped to collect necessary documentation for receiving disability pension
- after reunification, conducted home visits and assessed family environment
- purchased necessary school supplies for Nigar in order to stimulate her education progress
- followed –up with the family

Outcome: Nigar is living in a safe and loving environment surrounded by family members. She goes to school and is very happy with her current life.
Alternative Family Environments

If reunification with the biological family is not possible, there are several alternatives in Azerbaijan that can be considered so that a child grows up in a family environment:

- Guardianship/fostering
- Adoption
- Small group homes

Guardianship refers to the legal placement of a child with their own extended family members or alternative family for a period until the child reaches the age of 18 years. The guardian family receives extra financial benefits (approximately 10-12AZN) from the State to cover the child’s care, and the child also receives benefits according to the Law on Social Protection of Children deprived of Parental Guardianship.

According to the Family Code (Articles 142-145), guardian parents must apply in writing to the Commission on Guardianship and Adoption within a local Executive Committee. When reviewing a family, this representative must take into consideration:

- Moral and other qualities
- Ability to perform guardian obligations
- His/her family’s relationship towards the child
- Wishes of the child

The potential guardian family must submit at least the following documents:

- Reference from the TB, narcology and psychiatric dispensaries confirming that the guardian is not registered as suffering from TB, drug/chemical addition or psychiatric illness.
- Reference from the police department confirming that the person has not committed a crime
- Recommendation letter from the place of employment
- Recommendation letters from neighbours describing the moral status of the potential guardian
- Reference from the place of residence
- Copy of passport (as guardian must not be older than 65 years)

There are many gaps in this system. Most importantly:

- After the child has been placed with the family, there is no official control procedure to check that the child is benefiting from this placement
- The representative of the Commission on Guardianship and Adoption is not trained so only has subjective ability to assess the potential family’s moral qualities etc.
- This position is often not a paid position (as in the case of Guba Commission on Guardianship and Adoption) which gives no incentive to this person to ensure that decisions are made in the child’s best interests

In a developed social services system, these gaps should be filled through the functions of the social worker who is trained to carry out these duties in the best interests of the child

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CASE STUDY - EXAMPLE OF GUARDIANSHIP

History:
Natalia is a 17 year old girl who has been living at Zardabi Internat for 7 years. Natalia and her little sister were staying at home alone without any supervision for a long period of time. Some of the neighbors noticed that and reported neglect and carelessness of Natalia’s parents to the police. As a result, Natalia and her little sister were placed at different Internats by the policemen. At the age of 18, Natalia was supposed to leave Internat and start an independent life. However, she was lucky enough to be selected by a family willing to take legal custody of the girl from Zardabi Internat in 2006.

Resources:
This family made a decision to adopt a girl from the Internat and bring her up as their own child. They have 2 sons. One of them was fortunately saved after gas poisoning. The parents were so grateful to have their son’s life saved that they promised to adopt an orphan girl and take a good care of her.
Natalia is almost 18 years old. She wants to enter university and pursue a professional career as a translator.

**Intervention:**
Social workers conducted a family assessment and followed up with the family to ensure Natalia’s safety and well-being:
- social workers had to assist the family in getting necessary documents for changing Natalia’s name, since her adopting parents were thinking that an Azeri name will suit the girl better - Natalia agreed with that
- they also made several home visits to make sure that the child is safe and feels comfortable in the new family
- they continue to keep in touch with Natalia and her family

**Outcome:**
Natalia is very happy to live in a loving family environment. Her new parents have financed private classes to get her prepared for the tests and exams. Due to that Natalia has entered the International University of Azerbaijan. She enjoys her studying a lot.

**Problems:**
Natalia was lucky to be adopted by caring and loving family. However, it appears that there was no official assessment of the family before and after the adoption according to rules and regulations outlined above:
- only UAFA’s social workers made home visits and a family assessment to ensure that this family environment is safe and healthy for Natalia
- the decision regarding adoption was based on selection by the family and Natalia’s consent; a suitable family should be selected by a social worker for a particular child in an ideal system
- only UAFA’s social workers followed-up with the family

**Conclusion:**
Governmental bodies should pay proper attention to the process of adoption of children from the Internat, whose life could be in danger because of the gaps in the system of family assessment and follow-up.

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**Foster Care**

Azerbaijan is currently considering adopting a new Foster-Care law which would take these gaps into account. However, to implement this new law when it has been authorized, a system of social workers must be in place in each region to allow it to function. The system UAFA has developed in Guba is a simple model of how this can be effectively achieved.

**Small Group Homes**

Small group homes are also a viable alternative for Azerbaijan during this transitional phase when there are so many children in State care that will never be able to return to their biological families or be placed with alternative families. Small group homes, for example SOS Kinderdorf, offer a family-like atmosphere with a limit on the number of children being cared for by ‘professional’ parents. Zardabi Internat could, with some building restructuring, function as a small group home with limited residential care placements once the number of children has been reduced through family reunification and guardianship/fostering. There are some children who have come from extremely dysfunctional families that might benefit more from being in a small group home rather than an alternative family. Again, this is a decision that would be made by a trained social worker who is using a child-centred approach to assessment and planning.

**Conclusion to Family-Based Care**

UAFA has attempted to develop a system of alternative family care specifically for the conditions at Zardabi Internat and the family backgrounds from which the children come. The alternatives we have presented in this chapter represent realistic solutions to the decisions that the social workers must make.
In the first place, every attempt must be made to keep the child with the biological family, either by preventing the child from being placed at the Internat or by returning the child home.

If this is not possible, the social worker must review the range of alternatives and decide which one is best for each child.

UAFA recommends that fostering, which is a temporary solution, is the last resort, especially as it is an untested system in Azerbaijan. Badly-managed fostering could bring damaging publicity to child welfare reforms and could strengthen the case for institutional care. Negative publicity can reinforce deeply-held prejudices against the children and the families that they come from. At this early stage of raising public awareness, the government of Azerbaijan must carefully manage the implementation of new fostering legislation so that the State Program on De-Institutionalisation maintains its course towards successful realization.
### APPENDIX 1

#### Summary of 8 Case Studies

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<tbody>
<tr>
<td><strong>Age</strong></td>
<td>26.02.1992</td>
</tr>
</tbody>
</table>
| **Address**   | Registered: Khachmaz  
                 Type: lodging |
| **Family members** | The parents got divorced in 1998.  
                         Father - is bricklayer and electrician, remarried  
                         Mother – (42 years), cleaner at homes  
                         Brother - (17 years), works temporarily |
| **Family relations** | The father remarried. Though the parents have conflict, relations  
                       between the mother and sons are stable. |
| **Date of institutionalization** | 16.08.2001 |
| **By whom**   | By the mother |
| **The reason of institutionalization** | After divorce the mother began to work, and she left both of them  
                                          in the institution for temporary in order not to become careless  
                                          and deviate from education. |
| **By whom officially approved** | By A. Muradov, department director of Khachmaz mainstream and  
                                   preschool education, TN #46143645/16  
                                   02.08.2001 |
| **Date of leaving** | 23.12.2005 |
| **By whom taken back** | By the mother |
| **The reason of returning home** | The children missed the mother and Farhad was already 16 years,  
                                   so he could both help the mother and control younger brother. |
| **Family’s current situation** | The mother receives salary about 300.000 manat and pays  
                                   200.000 manat for lodging. Farhad helps his mother to improve  
                                   family’s financial situation by making bricks, and Elshad by selling  
                                   perashkies in the market. |
| **Problems** | The family does not have permanent accommodation. As the  
                 family is single-parented and financial situation is very low, Elshad  
                 is forced to work. As a result it makes him deviate from education. |
| **Needs and their solutions** | He needs to continue his education, so it is necessary to apply to  
                                   school director and education department for solving this issue and  
                                   provide control by them. |
| **Achievements** | Elshad is cared for by the mother and lives in family environment. |
| **Recommendations** | To appeal to Khachmaz ExCom to support the family and apply to  
                          local court and police department for alimony for the kids |

<table>
<thead>
<tr>
<th>Name, surname</th>
<th>Farhad A.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td>11.11.1989</td>
</tr>
</tbody>
</table>
| **Address**   | Registered: Khachmaz  
                 Type: lodging |
| **Family members** | The parents got divorced in 1998.  
                         Father - is bricklayer and electrician, remarried  
                         Mother – (42 years), cleaner at homes  
                         Brother - (17 years), works temporarily |
### Natalia S

**Age**
10.09.1988

**Address**
Guardian’s house - Baku

**Family members**
There is no information about her relatives.

- Guardian family:
  - Y – 45 years, father – businessman
  - N - housewife
  - Son – 8th form
  - Son- 5th form

**Family relations**
Good relations and stability are observed among family members.
They accepted Natalya into their family with great pleasure.
Their main condition was to change her name to an Azerbaijan equivalent

**Date of institutionalization**
01.11.1999

**By whom**
By the policeman according to the neighbors’ apply.

**The reason of institutionalization**
Natalia’s mother used to leave her with the younger daughter alone without care.
The neighbors applied to the police department and so the girls were placed in internats

**By whom officially approved**
By A. Muradov, department director of Khachmaz mainstream and preschool education, TN, # 46-14-5339/16
29.10.1999

**Date of leaving**
17.07.2006

**By whom taken back**
By the guardian family

**The reason of returning home**
A guardian family came to the internat to find an older child to give a home to. Natalia was approaching the age of graduation without a place to live, and was thought of as a suitable child for the family

**Family’s current situation**
The financial situation of the family is satisfactory. They can afford to meet her needs

---

### Farhad

**Family relations**
The father remarried. Though the parents have conflict, relations between the mother and sons are stable.

**Date of institutionalization**
16.08.2001

**By whom**
By the mother

**The reason of institutionalization**
After divorce the mother began to work, and she left both of them in the institution for temporary in order not to become careless and deviate from education.

**By whom officially approved**
By A. Muradov, department director of Khachmaz mainstream and preschool education, TN #46143645/16
02.08.2001

**Date of leaving**
23.12.2005

**By whom taken back**
By the mother

**The reason of returning home**
The children missed the mother and Farhad was already 16 years, so he could both help the mother and control younger brother.

**Family’s current situation**
The mother receives salary about 300.000 manat and pays 200.000 manat for lodging. Farhad helps his mother to improve family’s financial situation by making bricks, and Elshad by selling perashkies in the market.

**Problems**
The family does not have a constant accommodation. As the family is single-parented and financial situation is very low and though Farhad’s state of health is weak as a result of severe jaundice. He is forced to work hard and, as a result, it makes him deviate from education.

**Needs and their solutions**
It is not advisable for him to work hard because of health problem.
It is necessary to be medically examined periodically.

**Achievements**
Farhad is cared for by the mother and lives in family environment.

**Recommendations**
To appeal to Khachmaz ExCom to support the family and apply to local court and police department for alimony for the kids.
### Problems
It was luck rather than a good system which resulted in an appropriate family placement. When the system allows a family to choose a child without background checks, this has the potential to lead to serious problems for the child’s future.

### Needs and their solutions
Natalia wants to pass higher education, so she prepared for the university both at the internat, and after coming to the family. She has taken her exams and achieved a score of 300 points.

### Achievements
Guardianship experience is explored.

### Recommendations
Natalia’s situation should be regularly monitored and kept under control. Her needs and family’s approaches toward her should be monitored too. Financial and legal support should be provided by the government for guardian families.

---

<table>
<thead>
<tr>
<th>Name, surname</th>
<th>Azad F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>21.03.1991</td>
</tr>
<tr>
<td>Address</td>
<td>Gizildash</td>
</tr>
<tr>
<td>Family members</td>
<td>The parents died. One brother, after military service he is unemployed, resides in a dormitory</td>
</tr>
<tr>
<td>Family relations</td>
<td>The brothers have seen each other very rarely, as they lived at separate institutions, so they are now building new relations with each other. After the parents’ death they had contact with their uncle for a little period of time, but at the present time they do not have links with their relatives.</td>
</tr>
<tr>
<td>Date of institutionalization</td>
<td>07.09.1998</td>
</tr>
<tr>
<td>By whom</td>
<td>By the step-father</td>
</tr>
<tr>
<td>The reason of institutionalization</td>
<td>Being without care after parents’ death</td>
</tr>
<tr>
<td>By whom officially approved</td>
<td></td>
</tr>
<tr>
<td>Date of leaving</td>
<td>30.06.2006</td>
</tr>
<tr>
<td>By whom taken back</td>
<td>By the elder brother</td>
</tr>
<tr>
<td>The reason of returning home</td>
<td>Family reunification</td>
</tr>
<tr>
<td>Family’s current situation</td>
<td>The elder brother is unemployed; they do not have any income. They reside in the dormitory of the vocational lyceum. They have been provided with food and accommodation by the state institution.</td>
</tr>
<tr>
<td>Problems</td>
<td>The brother’s unemployment</td>
</tr>
<tr>
<td>Needs and their solutions</td>
<td>As the elder brother is unemployed, he can not cover Azad’s needs, a sponsor is needed.</td>
</tr>
<tr>
<td>Achievements</td>
<td>Azad lives with his brother. He will possess a specialty by studying at the lyceum. With additional financial support he will be able to cover his needs.</td>
</tr>
<tr>
<td>Recommendations</td>
<td>After graduating from the lyceum and coming back from military service, Azad should be provided with a job and an accommodation by relevant organs.</td>
</tr>
</tbody>
</table>

---

<table>
<thead>
<tr>
<th>Name, Surname</th>
<th>Aysel J</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>21.11. 1998 (8 years)</td>
</tr>
</tbody>
</table>
| Address       | Previously: Guba  
                 At present: Baku, lodging |
| Family members | Father – is engaged in temporary job  
                      Mother - does not work  
                      Sister – will go to school this year |
<p>| Interfamily relationship | Relations in the family are stable, the parents care about the children properly. Family relatives bear conflict against the family. |
| Date of institutionalization | 06. 09. 2005 |</p>
<table>
<thead>
<tr>
<th>By whom</th>
<th>The mother</th>
</tr>
</thead>
<tbody>
<tr>
<td>The reason of institutionalization</td>
<td>Poverty (no housing convenience)</td>
</tr>
<tr>
<td>By whom officially approved</td>
<td>Suleyman Aslanov, Head of Guba Education department, N202, 06.09.2005</td>
</tr>
<tr>
<td>Date of leaving</td>
<td>30.12.2005</td>
</tr>
<tr>
<td>By whom taken back</td>
<td>The mother</td>
</tr>
<tr>
<td>The reason of returning home</td>
<td>The child missed the family, could not adapt to the internat environment and often ran away from the internat</td>
</tr>
<tr>
<td>The family’s current situation</td>
<td>Though the family has registration at grandfather’s house, according to the court decision they can not reside there, so they are obliged to lodge in Baku.</td>
</tr>
<tr>
<td>Problems</td>
<td>Homelessness is a great problem for the family, moving from one house to another causes other problems, i.e. the child deviates from education</td>
</tr>
<tr>
<td>Needs and their solutions</td>
<td>For solution to home problem: to get consultation by the lawyer of Guba ExCom, apply to Appeal Court.</td>
</tr>
<tr>
<td></td>
<td>For restoring the father’s documents: to receive reference from the representative of ExCom to restore the father’s military pass in military commission, to restore identity certificate at the police department.</td>
</tr>
<tr>
<td></td>
<td>For improving family’s financial situation: to collect necessary documents for targeted social aid and introduce to the commission, finding a job for the mother.</td>
</tr>
<tr>
<td>Achievements</td>
<td>Aysel’s mother’s applied to the Child Protection Council, Ombudsman Apparatus, State Committee for Family, Women and Children's Issues to restore father’s military pass and identity certificate</td>
</tr>
<tr>
<td>Recommendations</td>
<td>Regular monitoring of the family’s situation by the CPC and social workers and to give directions to find solutions to the problems</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name, surname</th>
<th>Kamil M</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>26.02.1992</td>
</tr>
<tr>
<td>Address</td>
<td>Khachmaz</td>
</tr>
</tbody>
</table>
| Family members | Grandmother - retired  
Mother - lives in lodgings with 3rd husband  
Father - newly remarried |
| Family relations | The boy lives with the grandmother. His mother has two more children from her second marriage, but they live with their father’s grandparents and do not have relations with their mother. Kamil has good relations with his mother and step-father and they often meet. The father does not adopt him as a son but keeps relations with him. |
| Date of institutionalization | 03.08.1999 |
| By whom | By the father |
| The reason of institutionalization | When Kamil’s mother lived in Russia with her second husband, at that time Kamil stayed with his father’s family, and lived with his grandmother for a while before he returned to his father again. But the father’s third wife had problem with Kamil, so as a result he was placed at the internat. |
| By whom officially approved | By A. Muradov, department director of Khachmaz mainstream and preschool education, TN # 46143134/16; 07.07.1999 |
| Date of leaving | 30.12.2005 |
| By whom taken back | By the mother |
| The reason of returning home | After mother’s return from Russia she became aware that her son was living at the internat and was unhappy about this, so she took |
**Family’s current situation**

Basicall Kamil is cared for by the grandmother, but sometimes the mother financially supports.

**Problems**

Kamil has some learning difficulties and he is less interested in education, he finds it difficult. He can not easily communicate with others. Family conflict affects him.

**Needs and their solutions**

As Kamil can not communicate with other children, he is offended by them. It has been suggested that he participates in sport to increase his self-respect. He needs teachers’ support so he is not delayed in education.

**Achievements**

Deputy head of Khachmaz ExCom promised Commission of Minors and Department of Education will work with Kamil and his situation would be supervised.

**Recommendations**

To regularly monitor the child’s and family’s situation by CPC and the social workers and give direction to find solutions to appeared problems.

To activate Khachmaz ExCom representatives and act together with governmental structures.

---

**Name, surname**

**Age**

25.06.1998 (8 years)

**Address**

Guba

**Family members**

Father - his place is unknown  
Mother - has conflict with her parents, does not have any relation with them because of her work (prostitution)  
Grandfather - (60 years), does not work because of health  
Grandmother - (52 years), housewife  
Uncle - (32 years), engaged in temporary job  
Uncle’s wife - (25 years), housewife

**Family relations**

The parents had illegal marriage, after conflict between them they broke up. The child was exploited (forced to beg), and was in danger of being sold. The mother has conflict with her family and has no relations with them.

Other family members want to take care of her.

**Date of institutionalization**

11.02.2006

**By whom**

By the mother

**The reason of institutionalization**

Native father has left them as the parents did not have legal marriage, and then the mother remarried, but the step-father did not accept Leyla.

**By whom officially approved**

30.06.2006

**Date of leaving**

By the grandfather

**By whom taken back**

30.06.2006

**The reason of returning home**

The grandfather was not aware of the girl’s institutionalization, as he did not have links with his daughter. The grandparents are against the child’s living in the internat.

**The family’s current situation**

The parents do not have relations with their daughter because of her choice of work so Nigar is also deprived of meeting with her mother.

**Problems**

The grandparents have difficulties to meet Nigar’s needs, as they are old.

**Needs and their solutions**

For improving the family’s financial situation, to collect the necessary documents for targeted social aid by the grandfather and present to the commission.

**Achievements**

The child lives in family environment, provided with care and love, her needs are met as much as possible. The child was taken under the grandfather’s guardianship and he has collected the documents for receiving a disability benefit
**Recommendations**  
The mother’s behaviour can negatively influence the child. It is recommended that Nigar lives with her grandparents for her development. In order to improve the girl’s emotional state it is recommended to find solutions so that the child can meet with her mother.

<table>
<thead>
<tr>
<th>Name, surname</th>
<th>Tural A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>04.12.1994</td>
</tr>
<tr>
<td>Address</td>
<td>Guba</td>
</tr>
<tr>
<td><strong>Family members</strong></td>
<td></td>
</tr>
<tr>
<td>Mother</td>
<td>works at the canteen of brick plant</td>
</tr>
<tr>
<td>Father</td>
<td>divorced, name and occupation are unknown</td>
</tr>
<tr>
<td>Sister</td>
<td>does not go to school, is engaged</td>
</tr>
<tr>
<td>Sister</td>
<td>6th form, does not go to school</td>
</tr>
<tr>
<td>Brother</td>
<td>finished 9th form</td>
</tr>
<tr>
<td><strong>Family relations</strong></td>
<td></td>
</tr>
<tr>
<td>After divorcing, the father remarried. He has no links with the first family. The relations between the mother and children is stable.</td>
<td></td>
</tr>
<tr>
<td><strong>Date of institutionalization</strong></td>
<td>23.08.2005</td>
</tr>
<tr>
<td>By whom</td>
<td>By the mother</td>
</tr>
<tr>
<td><strong>The reason of institutionalization</strong></td>
<td>After divorce the mother’s situation was very difficult and she could not find a job, so she had to leave Tural at the internat.</td>
</tr>
<tr>
<td><strong>By whom officially approved</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Date of leaving</strong></td>
<td>30.05.2006</td>
</tr>
<tr>
<td>By whom taken back</td>
<td>By the mother</td>
</tr>
<tr>
<td><strong>The reason of returning home</strong></td>
<td>Problems related to his health</td>
</tr>
<tr>
<td><strong>Family’s current situation</strong></td>
<td>Housing of the family is satisfactory, but financial situation is very low, as only mother works in the family. Only elder son of 4 children is engaged in a temporary job. The children are not helped by the father; even their child support is not paid.</td>
</tr>
<tr>
<td><strong>Problems</strong></td>
<td>All the children in the family deviated from education; even Tural has such a risk. The family members explain that they do not have financial opportunity to cover Tural’s school wear and stationery.</td>
</tr>
<tr>
<td><strong>Needs and their solutions</strong></td>
<td>To apply to a local municipality and ExCom representative for usage of free land plot; the family needs technical support</td>
</tr>
<tr>
<td><strong>Achievements</strong></td>
<td>Local municipality and school directory were contacted for Tural continuing education. Local municipality member undertook to provide Tural with school wear and stationery, school director will keep control over him not to deviate from education.</td>
</tr>
<tr>
<td><strong>Recommendations</strong></td>
<td>He needs to medically be examined as Tural has problems with his lungs and urinary bladder.</td>
</tr>
</tbody>
</table>
APPENDIX 2
Care Plan

Name of institution
Child’s name and surname
Child’s father
Child’s mother
Date of birth
Address
Citizenship number

Date of child’s initial placement day month year
Date of child’s placement in this institution day month year

Do the documents reflect child’s position? Yes No

History of this plan day month year

The reason of child’s placement in the institution

What are included into general plan for this child? Day month year (last time)

This plan can be changed only with official meeting.
Meeting may be held before the date.

To return to biological family
To live with relatives or friends
To live in special institution
For example: in hospital
Adoption
Other – write concretely

Explain the reason for choosing this plan
What will be done for implementing this plan. Please, show the main works. Give information about responsible person and deadline.

The following persons can be involved into the work: child, patrons, institutional staff, psychologists, teachers and medical staff. This question is about main work. For example: legal procedures, preparings for council on patronages, information about life, assessment of psychology, talks with education and medical bodies, work with guardian parents and relatives.

What long term needs of child can be provided by institution?
The following issues have to be reviewed:

<table>
<thead>
<tr>
<th>№</th>
<th>Needs</th>
<th>Specialists who will be involved</th>
<th>Time</th>
<th>Priority schedule of needs</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Psychological and mental health problems</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Education</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Relationship with relatives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Ethnic origin</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Religion</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Language</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Which alternative plan have you prepared if the outlined plan will not be realized?

The control in realization of plan will be held in the following date and place:

Place          Time          Day          Month       Year

Address
The discussions about the following persons’ agreement have been held.

<table>
<thead>
<tr>
<th>Relevant persons:</th>
<th>No answer</th>
<th>I agree</th>
<th>I do not agree</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Father</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Another person who has responsibility as parent</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (relatives)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Others (governmental bodies who take care)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Others (relatives)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social worker</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The leader of the team/ Person leading the meeting</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Explain the reason if you could not meet with these persons.

Give additional information about persons who did not agree with any issue of plan.

Check and confirm that copies of plan have been sent to everybody.

For signature

Show the reason if it has not been sent.

<table>
<thead>
<tr>
<th>Persons</th>
<th>Reasons</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Person who completed the form</td>
<td>Name</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Where was child placed

Child’s name, surname and address

Citizenship number.

Year

Date of child’s placement at the institution

Date of meeting

If necessary:
Do the documents reflect child’s position?

Yes  No

The reason for child remaining at the institution.

Social worker’s name

Date of social worker’s last meeting with child and institutional staff
(1st - child was alone. 2nd - child was with institutional staff. 3rd - child was not at the institution)

Date  Persons, who have been met  1  2  3

Date of social worker’s meeting with child’s parent or relatives after last meeting/placement in the institution.

Mother  Father  Each of them

Other adults (show concretely)

What is included into general plan for this child?
This plan can be changed with official meeting. Meeting may be held before the date.

- To return to biological family
- To live with relatives or friends
- To live in special institution
- To live in hospital
- Adoption
- Other – show concretely

Explain the reason of choosing this plan

Date of plan: Day Month Year

Show the changes and development in child since last meeting or preparing current plan. Show the positives with negatives!

Note: It is important to know child’s relations with family if child will be sent to family according to the plan. Does he want to go home? Is the family ready to discuss this problem? Does child have a role at home or not? How are the relations of social worker with family? Is the family ready for getting support?

Note about following issues:
A. Child’s health improves and positive development in disability. Write every significant medical change.
B. Is there development in child’s education?
C. Changes in child’s biological family including relations between important people.
D. Changes in relations with patron family, institutional staff and child’s replacement.
E. Changes in social worker.
F. Changes in development of emotional behaviour.
G. Other changes.

Are the child’s daily needs provided at the institution according to care plan?

Yes No Yes No
<table>
<thead>
<tr>
<th>Health</th>
<th>Ethnic origin</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education</td>
<td>Religion</td>
</tr>
<tr>
<td>Disability</td>
<td>Establish relations</td>
</tr>
<tr>
<td>Other: show concretely</td>
<td></td>
</tr>
</tbody>
</table>

Give information about actions, if one of these issues will not be realized.

---

This part will be fulfilled by social worker before the meeting

Did you hold discussions with following persons about issues during the meeting?

<table>
<thead>
<tr>
<th>Child</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Father</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tutors</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other people</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Show concretely:

Did you consult with medical staff before this meeting?

Yes | No
---|---

Name | Phone
---|----

Who else did you consult before this meeting with?

<table>
<thead>
<tr>
<th>Name</th>
<th>Duty</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<tr>
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</tr>
</tbody>
</table>

Were all these persons invited to the meeting?

Yes | No
---|---

If they were not invited show the reason:

Date of last medical examination. Have the copies of documents about it been added?

Yes | No
---|---
<table>
<thead>
<tr>
<th>Day</th>
<th>Month</th>
<th>Year</th>
</tr>
</thead>
</table>

If have not been added, show the reason:

Issues have to be discussed:
- A. Have the decisions made at the last meeting been realized?
- B. Does the child complain about care?
- C. Is there need for making changes in medical services?
- D. Is there need for making changes in child’s education?
- E. Is there need for making changes in establishing relations?
- F. What else can be done in realizing plan for this child?
- G. Can child live for ever with family or relative if there is financial aid?
- H. Is there need for making decision about changing long term plan?
- I. Other:

Show concretely:

Information about discussions (you can use another paper, if there will be need for it)

Signature of person, leading the meeting

Signature of social worker

Place, date and time of next meeting

Date: 

Time: 

Place: 

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APPENDIX 3

Entry Procedure to Care System (in a transitional system only)

Parent who decides to place his/her child to institution meets institution director

Director refers him/her to institution social worker

Social worker talks to parent, assessing the reason of child placement with the aim of preventing the child from entering State care

Social worker talks to child in order to meet his/her best interest

In case that prevention is not successful, social worker discusses the period of placement:
- Temporary
- Permanent

Social worker discusses child’s Care Plan with the parent

Social Worker notifies parent about possible home visits for assessment

Social Worker sets the next meeting with the parent to maintain contact on child’s behalf

Child registration process:
- Social worker applies to appropriate organ with the required documents and Care Plan with full assessment (home environment, parenting etc.), investigation of relatives, discussion of alternative options etc.
- If institutionalisation is the only option, placement takes place

Social Worker informs related organs:
- Child Protection Council
- Education Department
Initial Assessment Record
For child and his/her family

**Initial assessment record**

*During completion of assessment list, social workers have to complete all sections before assessing with grading system.*

<table>
<thead>
<tr>
<th>Name:</th>
<th>Sex: Female / Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Birth:</td>
<td>Ethnic origin:</td>
</tr>
<tr>
<td>Religion:</td>
<td>Language:</td>
</tr>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>Phone:</td>
<td></td>
</tr>
<tr>
<td>Disability: Yes / No</td>
<td>Need for translator: Yes / No</td>
</tr>
</tbody>
</table>

*Initial assessment has to be finished within 7 working days.*

| Date of application: |
| Date of initial assessment: |
| Deadline of initial assessment: |

Information about family (other children in family, parents and other relevant people)

<table>
<thead>
<tr>
<th>Name</th>
<th>Date of Birth</th>
<th>Origin</th>
<th>Language</th>
<th>Family members</th>
<th>Relatives</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Genetic relations:
Relevant organizations (specialists) during initial assessment:

<table>
<thead>
<tr>
<th>Name/Address/Phone/e-mail of relevant organization</th>
<th>Date of contacting and information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Protection Council</td>
<td></td>
</tr>
<tr>
<td>Therapist</td>
<td></td>
</tr>
<tr>
<td>Pediatrician</td>
<td></td>
</tr>
<tr>
<td>Nurse</td>
<td></td>
</tr>
<tr>
<td>Social worker</td>
<td></td>
</tr>
<tr>
<td>School</td>
<td></td>
</tr>
<tr>
<td>School nurse</td>
<td></td>
</tr>
<tr>
<td>Police</td>
<td></td>
</tr>
<tr>
<td>Other relevant bodies</td>
<td></td>
</tr>
</tbody>
</table>

Note the reasons of assessment, taking into account child/teenager and parent’s opinion:

Urgent action
Which of the following actions have to be taken according to this information:

<table>
<thead>
<tr>
<th>Urgent meeting/discussion</th>
<th>Yes/No</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment of child with special needs:</td>
<td>Yes/No</td>
<td>Date:</td>
</tr>
</tbody>
</table>

Needs of Child/Teenager development:

Over time children grow up and develop. Parents/Teachers are responsible for providing for the needs of children. The objective of this section is to define and provide resources for development of child and teenager.

Health
<table>
<thead>
<tr>
<th>Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional and behaviour development</td>
</tr>
<tr>
<td>Daily living skills</td>
</tr>
<tr>
<td>Personality</td>
</tr>
<tr>
<td>Social interaction</td>
</tr>
<tr>
<td>Family and social relations</td>
</tr>
</tbody>
</table>

**Opportunities of Parents/Teachers for providing child/teenager needs:**

*Please note positives, negatives and problems:*

<table>
<thead>
<tr>
<th>Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Providing of safety</td>
</tr>
<tr>
<td>Kindness</td>
</tr>
<tr>
<td>Willingness</td>
</tr>
<tr>
<td>Control and limits</td>
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<tr>
<td>Stability</td>
</tr>
</tbody>
</table>
Issues which influence opportunities of parents for providing child/teenager needs:

*It is important to know the difficulties which parents/tutors meet. Research shows that following influences on parenting skills:*

*History of physical problems, problems in cognitive skills, abuse of narcotic and alcohol, abuse in family and abuse toward child:*

Enviroment and family factors, influencing on child /family

*Please, give information about family history and current position:*

**History of family and current position:**

**Social resources**

**Community resources/Social integration**

**Home conditions**

**Occupation**

**Income(note financial difficulties)**

**Analysis of risk and needs**

*Analysis of risk and needs development of child and teenager.*

*Skills of parents/tutors for providing child’s needs and family and enviroment factors, influencing on child/family.*

**Analysis of risk**
Analysis of needs

Next important action

*Define next actions according to assessment of risk and needs:*

<table>
<thead>
<tr>
<th>Action</th>
<th>Yes/ No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urgent legal action for child protection</td>
<td></td>
</tr>
<tr>
<td>First meeting of Child Protection Council</td>
<td></td>
</tr>
<tr>
<td>Assessment</td>
<td></td>
</tr>
<tr>
<td>Date of beginning assessment:</td>
<td></td>
</tr>
<tr>
<td>Assessment of specialists</td>
<td></td>
</tr>
</tbody>
</table>

*Information: (if the answers of aboves are Yes)*

Plan for child

(Look at the following plan)

*Reasons of next action:*

(According to analysis of risk and needs)

Plan for child

*What is the plan for analysis of risk and needs of family/child?*

*Define the time and person who takes action.*

<table>
<thead>
<tr>
<th>Action with plan</th>
<th>By whom</th>
<th>Since</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
<td></td>
</tr>
</tbody>
</table>
Review of need plan of child with special needs:

<table>
<thead>
<tr>
<th>Name and signature of Social worker completing assessment:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name and signature of leader of the team:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Did family members get copy of assessment?</th>
<th>Yes/No</th>
<th>Date:</th>
</tr>
</thead>
</table>

Date: -------------------------------
APPENDIX 5

CHILD PROTECTION COUNCIL (CPC)
CHARTER

I. Goal
To achieve building of democratic and humanist society protecting children’s rights

II. Objectives
1. To supervise and support social services for children’s welfare in Azerbaijan
2. To participate in implementation of de-institutionalization process
3. To campaign for improved children’s services and respect of children’s rights in acting community

CPC forms its activity in close collaboration with local governmental and non-governmental organizations.

Members of Child Protection Council are child protectors.

Child Protector:
- Sees/Observes
- Identifies/Analyzes
- Sends a message/creates critical mass
  - Targeted
  - Community awareness
- Takes preventive measures
  - Ombudsman
  - Constitutional court
  - Supreme Court
  - President

III. How to form CPC

1. Election of members
The first members of CPC are elected in a community meeting voluntarily and democratically (number of members should not be more than 15-20). A panel discussion is held with the first members on Council. Trainings are subsequently conducted for them to understand the process of acting as a Council member.

2. Quantity of members, Participants
Quantity of members consists of 8-12 persons. Council must be formed of respectable and honorable persons from the community. It would be expedient if members of the Council are representatives of different structures, parents and neutral community members.

Members should not be:
- Aiming to promote their own business or services through the CPC
- Seeking membership as an opportunity for employment

Members should:
- Make children’s rights the priority in their activities
- Unconditionally adopt the Charter

How to be member and leave
- As a voluntary body, community representatives can be elected, but the number of members must not be exceeded and Council members have to express their agreement for each volunteer
- With a valid reason, membership can be refused - other Council members have to express their agreement by way of voting
- If a member misses 3 (three) Council meetings without valid reason, he/she is released by other members by voting
Authorities of members
Members have equal authority. Personal opinions can be independently expressed on an issue and adopted by a majority of votes. Depending on the issue, Council members may act as a consultant. A chairman and a secretary are elected from Council members by vote in order to arrange, control meetings and lead a discussion during the meetings.

1. Chairman’s authorities
The chairman has equal authorities as other members. He/She is responsible for arrangement and conducting of meetings. The chairman is re-elected every 6 (six) months by voting. In this period he/she is also responsible for the logistics.

2. Secretary’s authorities
The secretary is responsible for keeping the minutes of each meeting and assists the chairman in above-mentioned work. The minutes of the meeting should be kept on file by the Secretary and are a transparent and public record of their discussions.

3. Council meetings
Council members have to meet not less than once a month. Depending on existing issues, meetings can be more than twice during a month. Council takes the necessary decision.

IV. Council authorities
CPC authorities include:
1. To be aware of the jobs of organs working with children within relevant region (Commission of Minors, Commission of Guardianship and Adoption, Special Internat School, Education Department, Health Department, Police department on the issues of minors, etc.)
2. To participate in open meetings of above-mentioned organs and intervene if needed
3. To identify problems that children face in community, to discuss in Council and to raise question before relevant organs
4. To identify problems of the children living in the Special Internat School, to find solutions and to raise question before relevant organs
5. To monitor and support the projects (i.e. De-institutionalization) regarding children’s welfare within community

V. Activities
1. Monthly meetings of CPC
2. Relationships with governmental organs dealing with children issues. Work handling these organs has to be divided among members.
3. To meet with relevant organs for consultation relating children’s rights issues
4. To campaign for improved services to vulnerable children and their families in acting community, particularly for institutionalized children
5. To raise community awareness and activate community to support role of CPC
6. To mobilize community volunteers to support role of CPC
7. To give reports:
   - To give annual report in open community meeting once a year
   - To send annual report in written form to the organs and organizations working with children

CPC is answerable to UAFA during the project. UAFA will provide all necessary training and support to achieve the objectives of this Charter.
Guide to Family Assessment

What is an assessment?
Either institution, or someone else on your behalf, has asked us for help with some difficulty you are having which affects your child (or children).

Before we can help you, we need to know more about you and your family. This will involve collecting information, talking this through with you and agreeing what might be done. We call this an assessment.

Why is an assessment being carried out?
Through making an assessment of your situation, it should be possible to see what help and support you and your family might need, and who could best give that help.

Information will be gathered and written down. Although social workers and other professionals will normally take the lead in completing the assessment, this should always be done in a way which helps you to provide your opinions, and encourages you to take part.

Any information you give to us will be held in confidence. If there is a need to discuss this information with anyone else, we will normally ask for your permission. The only exception to this is if information arises which, in the social worker’s view, may indicate a serious threat to the welfare of your child. If this is the case, you will be told what your rights are in this new situation.

What will happen?
Completing an assessment usually means the social worker will meet with you and members of your family a number of times.

When children are old enough to take part in the assessment, then we (social worker) will encourage and help them to do so.

When other people are already helping you and your family, it is likely the social worker will talk to them too. We shall discuss this with you. If you do not agree with what the social worker says in the assessment, there will be an opportunity for you to record your point of view on the assessment record.

The purpose of assessment is to draw up a plan of action to address the needs of your child (or children) and how you might need help to respond to these. You will be given a copy of the plan.

What will be expected of you?
We know that almost all parents want to do their best for their children, and completing the assessment will help the social workers recognise the strengths you and your family have, as well as your difficulties.

We can help you best if you tell us about what you do well in your family, and your difficulties. We will keep you informed about what we are doing and thinking.

An assessment is an important part of our working with you. In a very small number of cases, there are serious concerns about a child’s safety. Making sure the child is safe will be our first concern. Please ask your social worker to explain this to you. You have a right to know.

What can you expect of us?
We will listen carefully to what you have to say, offer advice and, if necessary, support to help you bring up your children and resolve your difficulties.

We know that with a little help most families can sort out their own problems, and our aim is to help you do that.
We will try our best to offer you any services you need as soon as possible. But there are often many more people needing services than there are services to give. This means that sometimes, although everyone is agreed that you need a service, it might not be available at the time. If this happens we will always look to find an alternative, but we cannot guarantee to provide a particular service.

**Important notes:**
As with every nation, Azerbaijan people also have their customs – which is devotedness to their family. But life situations can sometimes make people act against their will if they felt they had no other option. These people become sensitive to all comments, advice and recommendations, and they lose their belief in their ability to care for their child. The focus of conversation with these parents will be to find their strengths and resources (it can be moral resources as well). We do not need to visit them and explain ‘how it is bad to place a child in an institution’. They already know it! In order to defend their ‘parenting values’, they will resist the words of a social worker in this case. The character of visits must be to share family’s problem, to discuss it, to see which resources are available. There are few resources to suggest but talking to these parents will help us to find out their needs, which can also be considered by the State in building supportive social services.

**Empowering parents is of utmost importance.**
Appendix 7

CHILD PROTECTION POLICY
All persons working with children (UAFA staff, institution staff and volunteers) should be provided with list of Children Rights and leaflet with information about common kinds of abuse. Knowledge about Children Rights and Child Abuse will help to protect children rights.

CHILDREN RIGHTS TO LIVE AND DEVELOP

UAFA staff
- Share knowledge with institution staff and volunteers
- Correct institution staff and volunteers when you notice inappropriate treatment with the child. Explain them how to do correctly.
- Make sure the carer can achieve (watch, share, do)

Institution staff
- Approach the child gently and quietly. Observe and assess remembering the whole child.
- Do not do instead a child. Let him do himself
- Give the child opportunity to play
- Make work with child relevant (circumstances, recourses)
- Make work with the child simple (it is not important to use expensive and specific toys, use what is around)
- If the child needs support give it: not too much, not too little
- As your approach talk to a child – tell them you are coming and what you are going to do.
- Have a number of alternative activities planned in case unpredictable
- If the child is tired – give him the rest
- Do not feed children in lying position
- Handle and carry children appropriately
- Explain volunteers rules of appropriate feeding, hygiene activities, handling and carrying of children and correct if doing wrong.

Volunteers
- Follow rules given by UAFA staff and institution staff on child development.
- Do not feed children in lying position. Explain new volunteers right feeding rules.
- Handle and carry children appropriately. Explain new volunteers right handling rules
- Share with new volunteers right hygiene skills.

CHILDREN RIGHTS TO BE SAVED AND PROTECTED

All adults must ensure safety of the children

UAFA staff
- UAFA staff should explain institution staff and volunteers about possible situations, which could be dangerous for safety of the children and how to avoid these situations.
- If notice dangerous situation for the child immediately take measures (when possible) in order to take out the child from this situation and then apply to UAFA Team Coordinator and institution director.
- Explain institution staff and volunteers rules of appropriate feeding, hygiene activities, handling and carrying of children and show and correct if doing wrong.

Institution staff
- To constantly watch children with a purpose of not allowing dangerous behavior
- To share the responsibility for a child with another adult for child’s enhanced safety.
- To adequately supervise all the children and always engage in activities suitable for them.
- Should report to institution doctor and institution director about any incident with children that frightens or confuses them or makes them unhappy.
- Should report immediately to institution doctor about any health problems with children.
Volunteers
- To constantly watch children with a purpose of not allowing dangerous behavior
- To share the responsibility for a child with another adult for child’s enhanced safety.
- To adequately supervise all the children and always engage in activities suitable for them.
- Should report to UAFA or institution staff about any incident with children that frightens or confuses them or makes them unhappy.
- Staff should be given full information about a trip, including details of the programs of events
- Not leave a child alone without any adults
- If you notice some problems - apply to UAFA team members

CHILDREN RIGHTS TO RESPECT AND INDIVIDUALIZATION
UAFA
- If UAFA staff notices that institution staff or volunteer call the child by nicknames or labels child, stop her/him from doing this and explain about Children Right for respect. If again this situation repeats again, apply to institution director to discuss on the staff meeting.
- Not to allow children to use inappropriate language.

Institution
- Treat all children with respect.
- Call a child by his name, not nicknames. Do not label children.
- When it is possible give the child a choice (in dressing, eating etc.)
- Not to allow children to use inappropriate language

Volunteers
- Treat all children with respect.
- Call a child by his name, not nicknames. Do not label children.
- Not to allow children to use inappropriate language
- No matter what happens you can neither be angry with these children, nor hurt them

CHILDREN RIGHTS TO LIVE IN A FAMILY
UAFA
- To search family situation of the children living in the institution and to work on reunite family.
- To encourage institution staff or to work on reunite of families in order to reach the goal of de-institutionalization. Explain staff effects of institutionalization of children.

Institution
- To encourage the parents who keep child in the institution to visit their child more often.
- To develop comfortable conditions for parents during meetings of parents and children.
- To work with parents in direction to reunite the children with families.

CHILD ABUSE PROTECTION (physical abuse, sexual abuse, emotional abuse, neglect)
UAFA
- Look for indicators of sexual abuse or any other kind of other abuse (see leaflet) and look for measures to stop it. Immediately apply to UAFA Team Coordinator and Institution Director for certain case of abuse to call meeting with person causing abuse in order to discuss it and take measures not to repeat it any more.
- Work on institution staff and volunteers to prevent any kind of abuse.

Institution staff
- Look for indicators of sexual abuse or any other kind of other abuse (see leaflet) and look for measures to stop it. Immediately apply to Institution Director for certain case of abuse to call meeting with person causing abuse in order to discuss it and take measures not to repeat it any more.
- Try not to overact or show alarm or anger in front of the child.
- Do not criticize or blame child for the abuse
- Reassure and strongly support the child’s decision to tell of the abuse
• Immediately apply to Institution Director or Institution doctor about the fact of abuse or signs of abuse.
• Work on volunteers to prevent any kind of abuse.
• Not to allow children to use inappropriate language, or bad words.
• If a person sees or hears something that leads you to think that a child may be being neglected or suffering physical, sexual or emotional abuse, she/he should not hesitate to report her/his concerns and report to supervisor IMMEDIATELY.
• If supervisor is not available, the concerns must be reported to another available manager.
• Then concerns must be reported to Director.
• Discussion will take place as to the most appropriate course of action.
• A written report of the events causing the concern must be made. Recording must be factual, not speculation. Entries should be carefully dated and timings entered. Each entry should be clearly dated and signed.

Volunteers
• If witnesses of any kind of abuse or indicators of abuse (see leaflet) to apply immediately to UAFA staff and Institution Director
• Not to allow children to use inappropriate language, or bad words
• Not to allow or engage of any kind touching.

General Steps to Child Protection Policy:
1. Staff recruitment
2. Staff training
3. Procedure to be followed
4. Support and supervision

1. Staff recruitment
Manager reserves the right to approach any previous employer to get information about possible ill treatment of children before recruitment of childcare staff

2. Staff training
All care staff and parents will receive training in child protection. Training shall include details of definitions, legislation, and own role and responsibilities of child care staff.

3. Procedures to be followed (see above for UAFA staff, institution staff and volunteers)

4. Support and supervision
• Dealing with child protection issues is very demanding and stressful. Staff shall be supported by both managerial and non-managerial supervision.
Appendix 8

Referrals to appropriate resources and organizations:

1. Executive Committee
2. Commission of Minors
3. Municipalities
4. Educational Department
5. Youth and Sport Department
6. Health Department and children’s policlinic
7. Department of Culture
8. Child Protection Council
9. Local businessmen
10. Local department of Labour and Social Protection (SOBES)
11. Local Court department
12. Local Police department
13. Department of Guardianship and Adoption
14. Vocational schools
15. Training Centre of Carpet-making
16. Teachers’ Institute - Guba branch
17. Red Cross Society