



## Homeless Children in the NIS and CEE

BY KATE SCHECTER

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Photos: Suzanne E. Griman.

Not since the tumultuous 1920s have the children of Russia and the former Soviet Union suffered so terribly from the political turmoil of their time. Following the Bolshevik revolution and the Civil War, an estimated seven million children whose parents were either dead or missing roamed the former Russian empire searching for food and shelter. While the situation today is not as dire, estimates from government sources put the number of street children in Russia alone at anywhere between 1 and 4 million. What started out as a trickle of abandoned and runaway children in the early 1990s has turned into a steady flow, especially into major NIS cities. This article looks at how this situation occurred and what is being done to stem the tide.

### An Historic Perspective

Prior to the collapse of Communism, the problem of abandoned and handicapped children was hidden from public view by an extensive institutionalization system. Following the Bolshevik Revolution, World War I, and the Russian Civil War, and in response to postwar chaos, millions of “hooligans” and orphaned children were institutionalized in Soviet children’s homes. This huge network and infrastructure of state-sponsored child rearing began with the inception of the Soviet state, and it helped confirm the Marxist notion that the family would “wither away” with a transition to full socialism.

The reliance on residential institutions—boarding schools, orphanages, and homes for handicapped children—became an entrenched aspect of the Soviet social welfare system. Then, during the Gorbachev era, glasnost provided an opportunity for many social issues to be discussed more openly, and children’s homes became a subject of investigation. In the USSR, it was revealed that the infrastructure of these institutions was collapsing, food and clothing were inadequate, and inmates were ill-treated. In addition, it became evident that hundreds of thousands of children were living in these homes and that a large number of them were not orphan, but were placed there by their parent(s).

These “sleeping beggars,” left on the steps of a passage that goes under a bustling Tbilisi street, were watched over by a young boy who guarded them and their money fiercely.

Today, it is estimated that 95 percent of the children in institutions, shelters, or on the street are “social orphans,” abandoned or neglected by living parents who clearly have lost the material or psychological wherewithal to care for them.

### Current Conditions and Estimates

In the current environment, it is close to impossible to estimate the actual number of youth living on the streets. The problem is far more evident during summer months when children flock to major cities to beg from tourists and live outside while the weather permits. In the winter, subways provide shelter, but unlike in warmer Brazil and India, the cold climate hides children from the public eye for much of the year. In larger NIS cities, many municipal governments conduct periodic sweeps to round up street children—as well as adults—and send them out of the city on trains or buses. The former Soviet system of internal passports and residency permits—*propiski*—requires that every person living in a major urban area have a stamp in their passport allowing them to live there. While this authoritarian holdover has been declared unconstitutional in Russia, in reality it persists there and in many former Soviet countries, and the majority of street children do not have documentation to prove their identities, let alone have residency permits. In numerous cases, social workers and police have found children who are so young or so traumatized that they do not even know their own names or ages. And as state orphanages, shelters, and detention centers will not accept children without legal documents, children lacking these papers are treated as illegal immigrants and are sent out of the country. A few nongovernmental shelters and organizations try to help these youth, but often find themselves sending children back to their country or city of origin, only to find them reappear a few months later.

Russia and Ukraine are the two most populous countries in the region, and probably have the highest percentage of street children. One hundred thousand new orphans are registered in Russia each year, the majority of whom are social orphans abandoned by their families. One Moscow neighborhood detention center reports taking in 6,500 children last year, with a turnover rate of as many as 200 children every day.

### Causes of Homelessness and Impediments to the Problem

The central cause of this horrifying phenomenon is the rapid im-

poverishment that has occurred across the NIS and CEE since the collapse of the Communist states. Child poverty has increased throughout the region as general economic output has declined. More than 75 million people in these post-socialist regions fell into poverty between 1989 and the mid-1990s as wages dipped for most people to less than 50 percent of their previous earnings.<sup>1</sup> War and armed conflict have caused mass migration throughout the region. Since the late 1980s, seven million people—more than a third of them under 18 years of age—have been forced to migrate. In the countries of the former Yugoslavia, more than 150,000 women and children were forced from their homes, and many have never been able to return. In addition, more than half of the 350,000 refugees who fled Kosovo in 1999 were children. The UN estimates that 30 percent of the world’s refugees and displaced people come from this part of the world.<sup>2</sup>

Unemployment is increasing and children have been hit with the impact of parents who cannot support them. Parents continue to bring their children to orphanages and boarding schools in the hope that they will be provided with food and shelter. State-run institutions are unable to accommodate the growing

demand and many children are turning to a life on the streets—begging, prostituting, and often turning to the use of drugs.

In addition to unemployment and general impoverishment, the growth in single-parent households, the majority of whom are headed by women, has exacerbated the situation. In Russia, 14 million children out of a total of 33 million live in one-parent households, 94 percent of them headed by mothers. Almost half of all children in Russia are being brought up by single mothers who are at the highest risk of being unemployed or living close to or in poverty.<sup>3</sup>

Alcoholism, the rise in crime, incarceration of parents and youths, and the health crises facing the region are additional contributing factors. Not only are parents suffering disproportionately from these problems, but adolescent health is on the decline as well. A recent report by the Russian Ministry of Health cited increasing mortality—213.4 per 100,000 for 10- to 17-year-olds—in Russia and increasing morbidity, especially through sexually transmitted and other infectious diseases.<sup>4</sup> The lethal combination of homelessness, prostitution, and drug use has led to skyrocketing rates of sexually transmitted infections (STIs)

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Photo: Suzanna E. Grlman.

Street children are forced to fend for themselves, often doing odd jobs that put them at high risk for injury, such as from lifting heavy cartons of meat and vegetables at markets and acting as couriers on traffic-filled streets. This boy subsists by collecting bottles, dragging his heavy bag of glass along the beach in Khabarovsk, Russia.

and HIV/AIDS among young people in the region. STIs have reached epidemic proportions in Russia and Ukraine, and the potential for an HIV epidemic looms large in this part of the world. The HIV/AIDS infection rate remains a relatively under-reported problem in many parts of the region and the rate of infection among adolescents and youth, although probably very high among certain at-risk populations, is unknown in most cities.

The lack of trained social workers or an experienced pool of psychologists has been an impediment to assisting these children. Child abuse and neglect were officially unacknowledged social ills during Soviet times that have only become publicly recognized in the last few years. Even in 1995, when New York child psychiatrist Owen Lewis traveled to the region to assess the situation, he found few services available for children.<sup>5</sup> The situation has improved a little in some countries. For example, an Open Society Institute project—in conjunction with Dr. Lewis's efforts—in the CEE that trained mental health professionals and others who come into contact with these children has brought this formerly taboo subject out into the open. In addition, numerous AIHA partnership activities include training in adolescent health, mental health, and domestic violence counseling, all of which are helping to develop an infrastructure for coping with violence in families. Unfortunately, this issue remains a relatively untouched and unacknowledged area in many countries in the region.

In addition to factors cited above, the adult mortality crisis in the NIS and CEE is indirectly taking its toll on youth. Parents are at higher risk for premature death throughout the region and this is contributing to the skyrocketing number of abandoned or orphaned children. While the increase in male mortality is the more severe, female mortality has risen in parts of the former Soviet Union, and UNICEF estimates that as many as 700,000 children throughout the region have been affected by the premature death of their parents.<sup>6</sup>

The health situation of children in this region is grim in general, and homelessness only exacerbates the threats that they face because street children are at higher risk of contracting infectious diseases and of premature death. A recent Russian newspaper report in the popular journal, *Nezavisimaya Gazeta*, states that in northern Russia 40

percent of the children suffer from tuberculosis, more than half suffer from lung disorders, 96 percent have some kind of infectious disease, and 92 percent have dental problems.<sup>7</sup> Even if these statistics are exaggerated, there is little doubt that the general health status of children and youth in the NIS is declining.

The rise in crime has also had a devastating effect on the people of the region and is an additional factor that endangers homeless and abandoned children. In 1999 alone, Russia registered 208,000 crimes committed by children, 2,000 suicides by children, and 200 children killed by their parent(s).<sup>8</sup>

Many street children and other young girls desperate for employment turn to prostitution as a means of survival. Moscow and Kiev have become centers for networks trafficking in the sale and pimping of young women, the majority of whom are thought to be between the ages of 15 and 20. Moldova is the main source for these girls. It is estimated that two of every three trafficked young women are kidnapped from Moldova and that 64 percent of all prostitutes working in the European Union are from there.<sup>9</sup> Young NIS women are brought to the Czech Republic, Hungary, Albania, and other CEE countries where thousands work or are shipped overseas, stripped of their passports, and sold to brothels in such countries as Turkey, Cyprus, Greece, or Israel. Most of the victims are the equivalent of slaves: illegal immigrants, without documentation, forced to work for little or no pay. Because young European women are in demand in the international "white slave trade," NIS and

CEE girls—many of them unregistered children living on the streets—are the most vulnerable and the most available source for this market (see “What Dreams May Become: Trafficking in Women and Resultant Health Issues,” page 64).

### Steps Toward Reform

While there is no comprehensive foster care system in any of the NIS/CEE countries, there are hundreds of nongovernmental organizations (NGOs) and individuals who have responded to the crisis of homelessness by opening shelters and makeshift foster homes for these children. Government-sponsored shelters and programs are emerging, but coordination with NGOs is rarely present and, in many cases, the official response is to incarcerate these children. Hundreds—perhaps thousands—of youth in many NIS countries are detained in prisons where they may never be charged with a crime nor given a fair trial, but are simply warehoused until the authorities decide what to do with them. In addition to living in terrible, overcrowded prison conditions, the children often contract tuberculosis or other infectious diseases because of their incarceration, diseases which they then transmit to others whom they encounter when they are released.

Until an infrastructure of shelters and foster care is developed and a cadre of social workers and psychologists trained, the old system will continue to take in children. The first step toward reform is to remove the incentives that perpetuate institutionalization. Many orphanages, for example, still receive state funding based on occupancy rates. And while foreign aid to improve the conditions in orphanages is sent by well-meaning donors, it does little to help solve the long-term fate of these children. Like many social problems, this one will take many years to resolve; at present, the solution appears to lie in a mixed model. Although a wholesale dismantling of the current institutional system does not make sense, there is sufficient evidence that institutionalization in general is detrimental to both the mental and physical well-being of a person, and that the ideal solution lies in placing children in a nurturing home environment (see “Moving from Residential Institutions to Community-based Social Services in Central and Eastern Europe and the Former Soviet Union,” page 32). For those youth who are truly orphaned or for whom returning to their parents or relatives would endanger their well-being, a varied system of options including foster care, adoption, or an institutional setting is still necessary. To this end, many countries in the NIS and CEE are encouraging the development of so-called “homes in the family style,” which allow foster parents to adopt or care for up to 10 children in a foster home/shelter environment. The foster parents are paid a minimal fee to support each child,

who receives individualized care and attention. This system encourages the child to develop relationships and to bond with the foster family, as well as to develop an identity beyond the depersonalized and often dehumanizing environment of an orphanage.

In Russia, the army has stepped in to respond to the problem of abandoned and homeless boys. Two years ago, the central government decreed that the army could “adopt” boys, 14 or older, from orphanages or single-mother families. This practice of “regimental adoptions” has its origins in World War II when orphaned boys were recruited to fight the Nazis. These newly instituted regimental adoptions are helping to solve the problem of a decreasing number of healthy, available men to fight in Chechnya, but human rights groups have questioned the practice of taking such young recruits. While the boys do not fight until they reach the age of 17, they are trained, go



Photo: Suzanne E. Grinnan

Children, like this violinist in St. Petersburg, Russia, often generate income for themselves or their homeless families by performing on the street. In the worst cases, they are forced to work as street performers, prostitutes, or beggars by organized-crime gangs. These gangs then take most of the money the children collect.



through rigid and cruel hazing rituals, and often regret leaving the horrible environment of the orphanage for the even harsher reality of the army. Although some boys have been quoted as saying that at least they are fed in the army and therefore would rather stay than return to an orphanage, regimental adoptions are not a solution to the problem of homelessness.<sup>10</sup>

### International Donor Efforts

The international donor community is active in addressing child welfare issues in the NIS and CEE. Large NGOs such as Save the Children and The European Children's Trust are developing a presence in the countries where the need is most acute. Doctors of the World is operating a program in St. Petersburg that provides healthcare to street children through a series of drop-in clinics throughout the city. The program has been in operation for a few years and is successfully drawing in young people of many ages and at various levels of need. The myriad of programs throughout the NIS and CEE face the same challenges that national programs encounter: lack of coordination among donors, bureaucratic resistance from governmental agencies, and limited resources. One essential aspect of this issue that cannot be resolved through a top-down reform program is that each child has an individual story and needs focussed attention to resolve guardianship and future care. The causes of the problem are systemic and while improved economies, greater access to health information, and parental education will all help to alleviate the problem for future generations, these are of little help to the current wave of street children. ■

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## > COVENANT HOUSE PENNSYLVANIA: ONE MODEL FOR HELPING HOMELESS YOUTH

By Jerome Kilbane / Executive Director, Covenant House Pennsylvania.  
For more information on the Covenant House program, visit [www.covenanthouse.org](http://www.covenanthouse.org).

Covenant House is an international, multi-service agency whose mission is to serve homeless, runaway, and "at-risk" youth through its 22 locations in North and Latin America. Covenant House Pennsylvania is one of the newest sites and began serving youth in June 1999, through a street outreach program. Since then it has expanded to include a 51-bed Crisis Center and Community Service Center.

In the United States, it is estimated that there are between one to four million homeless or runaway youth at any given time.<sup>1</sup> This is a major problem that often goes unnoticed because of the transitory nature of the homeless population. The inability of these youth to have their problems voiced on a national level shadows their needs and leads to a powerlessness that further hampers homeless youth from helping themselves. Taken in the context of other problems they face, it can make getting off the street very difficult without some form of intervention. Studies show that street youth face issues such as substance abuse, physical and sexual abuse, depression, and thoughts of suicide at much higher rates than their counterparts who reside within an intact family structure.

As a community, Covenant House is dedicated to serving street youth as well as other "at-risk" kids by meeting their immediate needs through a policy of open intake and continual support. The program's objective is to help these youth develop short- and long-term goals

so that they can mature and learn to solve their own problems. We do this in a supportive, non-judgmental manner, with absolute respect and unconditional love. To meet the changing and complex needs of homeless youth, Covenant House has developed a continuum of care that includes Street Outreach, a Crisis Center, and a Community Service Center. Future plans include the development of a transitional living program. Each is briefly described below.

### STREET OUTREACH

One of our primary goals is to build relationships between homeless youth and program staff in order to get them off the street. Our Outreach staff use both van and foot outreach to contact youth on the street and begin to build relationships. Often street youth are resistant to the program and the process takes time. During the outreach process, staff offer street-based services such as food, counseling, or referrals to our Crisis Center for shelter, or medical services through our on-site Clinic. More than 30 percent of all youth served through the Crisis Center were referred through Outreach. Last year we made nearly 800 street contacts with more than 150 street youth.

### CRISIS CENTER

In October 2001, Covenant House Pennsylvania opened our 51-bed Crisis Center in response to overwhelming numbers of youth who were coming to our doors in need of shelter. With this new facility we have the capacity to provide shelter and a full range of support services to 51 homeless and runaway youth, as well as "at-risk" youth living in the community. Most importantly, we can fulfill our policy of Open Intake. This means any youth in need of shelter is accepted the first time without any barriers—24 hours a day, seven days a week.

In addition to providing shelter, our goal is to help youth stabilize their lives by setting and achieving both short- and long-term goals. These goals can include returning home or, if that is not possible, moving toward independence through

another program. To help this happen we provide a variety of services that include: counseling, case management, education, vocational training, substance abuse counseling, pastoral ministry, and recreational and medical services through our Clinic, which was created in partnership with Children's Hospital of Philadelphia. The program is operated by bachelors- and masters-level staff, as well as volunteers. Our average length of

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stay is about 20 days, but youth can often stay as long as is needed.

### COMMUNITY SERVICE CENTER

The Community Service Center is the hub of all support services. The goal of this program is to provide a full range of services to help street youth reach their goals and become successful. Youth from the community or our Outreach program use the services—substance abuse treatment, vocational training, legal counseling, and referrals for behavioral, inpatient substance abuse care, and other health services, for example—that are provided by this Center.

### RIGHTS OF PASSAGE

Rights of Passage is an 18-month transitional living program that provides young adults with a safe and stable living situation. It mirrors independent living, but provides a caring environment where young people can learn skills, such as budgeting, shopping, cooking, apartment hunting, and conflict resolution, that are necessary to become self-sufficient. Paid staff and volunteers operate the program. Our goal is to create an environment that is unstructured where youth can experience independence, but also have a safety net that lets them learn from their mistakes. Our primary therapeutic tool is our relationship and it is through the process of building this relationship that we help young people learn to internalize structure. We would like to have this program operational by June 2003.

Overall Covenant House served almost 700 youth last year. Some of our successes include:

- providing shelter to 178 youth with 31 percent leaving the Crisis Center and moving to a safe, stable living environment;
- providing more than 150 youth with vocational training and services, resulting in 51 percent obtaining gainful employment; and
- involving some 200 youth in our education program—most working on their GED, but we did have 14 enter college.

More importantly, what we have learned is that it takes repeated attempts at getting one's life on track to be successful. Hence giving young people as many opportunities as is needed is paramount. A caring relationship based "on unconditional love and absolute respect" is key to our mission and we have found it to be the cornerstone to the transformation process.

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