

Children and Youth in Institutional Care in Brazil
Historical perspectives and current overview

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Institutions for children in Brazil

This chapter discusses the institutionalization of children and adolescents in Brazil and places current debates about institutional care in a historical context. The institutional care of children is deeply rooted in the Brazilian governmental and religious response to needy children. Up to the mid-twentieth century some of the Brazilian elite also sent their children to boarding schools to train them to take their place among the next generation of the elite (2). But the modal use of institutions has been for children who were orphaned, abandoned, or delinquent or whose parents could not or would not take care of them. A major formal shift in attitudes to institutional care occurred in 1990 with the passage of the Statute of the Child and Adolescent (Law 8.069, July 13, 1990) - a law that articulated the fundamental rights children and youth should enjoy. The section of that law on children and youth in special circumstances redefines institutional care as shelter care and describes shelter care as care that should be temporary and that should be structured in ways to maintain children's connections to their community and family of origin. In contrast, the deliberate isolation of the 19th century institution, which survived deep into the last century, was regarded as a desirable characteristic either because it shielded the child from bad influences and permitted the supposedly good influences of the institution the maximum chance to shape that child, or because it protected society against "dangerous" children.

The dilemma of the current situation in Brazil is that while intentions about the use of institutions have changed, it is not clear how much practice has changed. And this dilemma is made more acute by the dearth of comprehensive data about institutionalized children past and present. Not only do we not have historical censuses of children in institutions we do not even know how many children are in what kind of institutions in Brazil now. So while there is fragmented evidence about change and continuity in the use of institutions for children and youth, there is little comprehensive data.

What we do know is that a variety of pressures, some economic and some philosophical, have resulted in the demise of large orphanages some of which housed as many as 500 children. But pressure for institutional care of some kind persists for several reasons. In the first place the gross demand may have increased because of the urbanization of rural populations and growing urban poverty. Such poverty has resulted

in a high percent of single family homes and the inability of often a single parent to cope resulting in the parent or the child seeking help that results in institutional care. Urban poverty breeds urban crime and urban crime results in pressure to remove children and youth who spend their days on the streets out of sight. But poverty and crime have not resulted in broad government policies to provide economic, educational and social support for families to reduce the risks of children entering care and ending up in institutions. This failure to create alternatives occurred in spite of the fact that during the years after the military dictatorship (1980s), many important reform proposals were made based on the international movement to guarantee the rights of the child.

Widespread poverty that affects the majority of the population is a major reason for the persistence of institutional care. Increased family and community violence results in children leaving home for their own protection. But there is another reason. An examination of the debate about needy or delinquent children retains elements of the past that persists despite the contemporary argument that institutionalization should be a last resort. The debate about the institutionalization of “abandoned and delinquent children” (“menores abandonados e delinqüentes”) (3) has changed to an argument about the right of children at risk to live with their families and in their communities (4). While this argument was not made in the past, its roots are easily identifiable in the past especially as these beliefs are transmitted in the philosophy of certain institutional practices which we will describe. For this reason, political and ideological factors need to be considered to understand why we have not experienced significant reforms to improve the care of children living away from home or to improve the standard of living of the general population thus reducing the need for out of home care. In short, we have come to the conclusion that there was and is in Brazil a “culture of institutionalization” (Pilotti, Rizzini, ed., 1995).

In the rest of the chapter we briefly describe children in institutional care, the landmark characteristics of the ways Brazil has treated needy children in the past and the present, the pivotal changes in attitude and law in the 1980s and 1990s, the contemporary reality of institutional care, and challenges for the future.

Describing children in residential care in Brazil

The current ways of placing children and adolescents into institutions and current ways of treating them cannot be understood just by reference to past practices. Although the backgrounds of contemporary children and adolescents and some of the reasons for their institutionalization are similar to those in the past, there are important differences. Even in the absence of comprehensive information about the current population of such children, we know from available information that today the majority of children in institutions “circulate” between their home, the streets and shelters (5). The high mobility that characterizes the careers of these children and adolescents seems to be connected to the high levels of urban violence in the country, and particularly violence linked to drug trafficking. It is a reality quite different from the past, when for example many of the “clienteles” of these institutions were placed there by their own families.

Most of the children and adolescents interviewed during the research carried out by CIESPI have a similar trajectory: they left their homes, had the experience of living on the streets and passed through various institutions (6). In addition to the break down of families which used to be seen as the only reason why children were left in orphanages and shelters, today there is another important factor to be considered, the children’s rejection of their families. Many children who now leave their homes do so feeling that they are a burden in their homes. Despite the value placed on the idea of *family* and especially of the *mother*, many of the children said when they were telling their stories that they did not desire to or could not return home, for reasons such as familial conflicts or to avoid involvement in the world of drug trafficking (7).

This analysis is about children and adolescents that are currently in institutional care. We are mainly concerned in this chapter about poor children. So we pay little attention to institutions to juvenile delinquents and children with special needs.

Brazil has a very large number of poor children. According to the national census, 36.7% of the 60 million youth between the ages of 0 and 19 in the year 2000 lived in families with median family incomes of up to ½ a minimum salary (IBGE, 2001) (8). Many of these youth ended up moving between home, the streets and a variety of institutions because their families did not have the resources to support them. But before

we describe these children in the present, we should sketch the history of such children in Brazil.

Significant patterns in the history of institutional care in Brazil: continuity and change

It is difficult in the limited scope of this text, to synthesize a history so complex as that of the institutionalization of children in Brazil. So we will focus on a few principal concepts that mark the history of the institutionalization of children in this country.

Below we have identified patterns that are important for understanding the history of child welfare in Brazil particularly as they influenced the models for providing asylum for poor children and the continuities and changes in the models up to the present.

The “institutional culture”

The placement of children in secluded institutions was an important instrument for the protection of children in this country.
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Brazil has maintained a long tradition of placing children and youth in institutions based on the model of seclusion and isolation. Many children, particularly from the poor segments of society have gone through the experience of being educated away from their families and communities. Since the Colonial period children were raised in boarding schools, seminaries, reformatories and other types of institutions created in accordance with the educational and welfare theories of the time.

Some of the most interesting strands of this history relate to helping and controlling the population of children characterized as dangerous in the context of the growth of large cities and the development of the nation state.

The broad judicial category of “menores” (“minors”) particularly as it related to children from the poorer classes in the second half of the 19th century had an essentially social and political character. These youth became the specific target for intervention by the state and other sectors of society such as religious and philanthropic institutions. After the second half of the 20th century the model of institutional placement for wealthy

children fell into disuse and its practice has been nonexistent in Brazil for many years. So institutions as a model for raising and educating children have been preserved for specific groups of young population, as we will see further.

The construction of ideologies that justify institutional care

We observe the deliberate construction of ideologies that justify the practice of institutionalizing children based on social and human sciences. However, paradoxically, the growing criticisms of the institutionalization model were accompanied by the growth in number of institutions.

In the specialized institutional services at the end of the 19th century and part of the 20th century the children of the poor became categorized as “menores” (“minors”), “desvalidos” (literally children without value), abandoned, orphans, delinquents and other designations that substituted for older terms as new service practices and ideologies developed.

In the 20th century emerging charitable organizations for protection of disadvantaged children questioned the institutional model. But after the establishment of the “National Policy for the Well-Being of Minors” by the military government (which took power in 1964) the institutional model was reinforced and was justified on the grounds of national security. The ideology of detaining children who lived or spent their time on the streets was justified on the grounds of protecting children from “the danger he/she presents to him/herself and society”, since “they lacked affection and economic support” (FUNABEM, 1974).

While we lack a census of children in institutions, our observations of several institutions and statements from educators as well as from children placed in these facilities indicate the continuing usage of these institutions despite all arguments made against institutional care. The main argument for institutions is the lack of alternatives to support the children and their families.

The social construction of the category “menor”(“minor”) (9)

The category “minor” was socially constructed to label a child who was an object of the judicial and welfare systems, thus becoming a target of the politics of institutionalization.

The judicial category “minor” historically identified individuals to whom special laws were applied because they were not able to exercise their rights as citizens and were considered to be under the legal control of the family or other responsible persons.

In the second half of the 19th century various Brazilian metropolitan areas became preoccupied with the education of the young vagabonds and the indigents who seemed to escape family control and/or wandered on the streets. The former legal term was replaced by the new socially constructed category, “menor”(“minor”). A “minor” was identified as a special target for state paternalism, so the policies about them turned even more to social control and restraint, especially after the inauguration of the Republic (1889). The state institutions, created after the creation of the republican regime, had a decisive role in the judicial and social construction of the category “minor”. In the beginning the judicial sector identified the term and divided it into subcategories that were needed to account for the complexity of the universe of assistance and control. Solidifying this process, the welfare establishment and social science were drafted to contribute to the theoretical definition of new terms and methodologies. For each category there was a service modality, thus creating specialization among institutions. Interventions became divided into therapeutic and preventive, in accordance to particular categories of “minor”.

In more recent times new conceptual paradigms of childhood based on the notion of the child and adolescent as subjects of rights were written into the United Nations Convention for the Rights of the Child (1989) and in the Statute of the Child and Adolescent (1990), creating a new vision for assisting low income children. Two important changes were the rejection of the practices of depriving children of their liberty and separating them from their families and communities. One sign of the changing climate is that organizations which previously only offered closed institutional care started to serve children on a more open basis by offering day services or sending residential children at home for weekends. This change was an indication of the growing distaste for the closed system symbolized by the orphanage. Now the watchword was that the segregation of the child should always be avoided. The Statute of the Child and

Adolescent provides that the shelter constitutes an exceptional and provisional measure (Art. 101) and the institutionalization is forbidden except for adolescents who have clearly committed criminal acts (Art. 106). We should point out, however, that these new developments have not significantly reduced the stigmatization and discrimination suffered by poor children. Recent research conducted by CIESPI with children and adolescents who have gone through various institutions in Rio de Janeiro, has shown that practically all of them consider society to be prejudiced against them. “*What do they think of me? Failure, marginal, vagabond, glue sniffer....*” (Rizzini et al, 2003, p. 236).

The culpability of family and the reduction of the parental role

The interventions for poor families promoted by the State diminished the parents in their parental role. The social welfare systems justified the institutionalization of the children by accusing their parents of being incapable.
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The developing, specialized knowledge confirmed the concept of the incapacity of families, especially of the poorest ones, to take care of and raise their own children. This concept justified the transfer to the State of the responsibility to take care of these children. Institutionalization involved a temporary suspension of parental power so that it was the judiciary that decided how the children should be raised and when they could return to their environment. The concept was shared by some parents who saw themselves as incapable of looking after their children. In consequence they sometimes approach the *Guardianship Councils* or other public bodies such as the juvenile courts to request those bodies to take over the care of their children (11).

Current practice still betrays a paternalistic attitude that ignores the underlying factors that weaken parents. But the authoritarian social welfare systems in which the families were dismissed from their parental role because of their incapacity are not as valued as much now as they were in the past. Decisions about children’s lives that exclude the key participants are increasingly rejected, especially by the children. Moreover, more attention is being paid to the underlying circumstances that bring children to the attention of the authorities. The movement toward concentrating decision making at the municipal level and establishing civic review of municipal actions allows a

more hopeful view of the future treatment of low income children and youth. However the main actors—children, families and their communities—should not be marginal to the reform process. Their participation which has historically been denied, should be encouraged to provide a critical perspective to the debate about improving their lives.

Dependency relationships engendered by the system

The placement of children resulted from trading favors to the detriment of the children.
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An analysis of the existing historical documentation reveals the spread of *clientalism* in public assistance encouraged by the State at various levels. *Clientalism* is a Brazilian term that refers to a system of relationships between the powerful or rich and ordinary citizens whereby legitimate transactions are expanded into transactions that benefit the rich and exploit the poor. The structure of assistance towards children as a project of the centralized State explicitly identified with the defense of the national security, permitted, for example, elites to request the placement of particular children such as their servants' children into institutions even if some people saw those placements as adulterating the institutions' mission. (Such children were institutionalized not as a favor to them or their parents but to prevent servants bringing the children to work with them). *Clientalism* of this sort was denounced during the institutional reforms as a practice that filled institutions with children who did not need to be placed and for whom institutional programs had not been designed.

The absence of data makes it hard to be sure if these practices have diminished but the civic oversight that is part of municipalization through the operation of the Guardianship Councils is likely to have discouraged the tradition.

The circulation of children

From the 19th century on, there was an active circulation of children and adolescents through various institutions in the city as well as their mobility to rural communities and even offshore islands.

Records from the 19th century show that children and adolescents wandering on the streets of Rio de Janeiro were picked up by the police and designated as vagrant, vicious or criminal. There were institutions near the city center that allowed for immediate placement and the correctional institutions on the islands permitted the complete isolation of the children, thus reducing the risk of rebellions and escapes. The official policies created in Rio de Janeiro for the placement of *abandoned, minor, vicious and criminal* children were modeled on the theory of separating undesirables from the city.

The placement of children labeled as criminals or vagabonds and their unplanned circulation around different institutions still occurs today. These children, who by the end of the 20th century were being called *girls or boys of the street*, have become a part of the urban scene in almost every country. In Brazil, the problem of children surviving in the streets has gained considerable visibility in the last twenty years along with knowledge of the poverty of their families and the lack of alternatives for improving their material conditions. The children, along with other members of their families try to survive using a variety of strategies. Illegal activities such as drug trafficking is a profitable way of earning a living and children engage in the drug trade even though they know it may shorten their lives. According to statements by the children and adolescents caught in these circumstances, their life trajectory is characterized by the intense mobility from home to the streets and to various types of institutions such as shelters, detoxification clinics (drugs) and detention centers (12).

As this narrative shows, the predominant causes of institutionalization have not changed in the long term. They continue to be linked to parents' inability to take care of, protect and discipline their children. What seems to be new today is that the children and adolescents themselves are taking a more active role in their lives. Their movements are not restricted to those mandated or arranged by organizations or public authorities. The children consciously use institutions for different purposes, for example, to rest, nourish themselves, sleep, get away from the streets and protect themselves from threats that they

may be facing where they live or on the streets (from rival drug gang “comandos” (commands) or from the police and others).

The development of a policy to assist children in need took the place of the development of comprehensive public policies for children and families.

Brazil opted to invest in a “policy to assist minors”, by institutionalizing children rather than making a comprehensive attempt to improve the life conditions of children and youth in their homes and communities.

Brazil had and has one of the most unequal income distributions in the world. The problem that dates first from the failure to abolish slavery until the late 1880s, from massive inequalities in land distribution and the failure to break up large plantations, was exacerbated by the absence of federal programs to redistribute income for the benefit of the urban poor. In the cities, the extreme contrast between and the segregation of the urban poor living in favelas (slums) and the rest of the population, at once made it extraordinarily difficult for the poor to move into the economic mainstream and made it easy for other city dwellers to ignore their plight except as problems of crime and violence.

There are, however, signs of the development of different attitudes towards poor families. The federal government is increasing programs to reduce poverty, but the challenges of endemic drug trafficking related violence, and the systematic exclusion of a significant percentage of the population from the economic mainstream remains immense.

Focusing on the recent history: overview and challenges

The debate about the institutionalization of children in the 1980s and the participation of citizens in that debate

Silence and censorship combined to maintain the policy of institutionalization even in the appalling conditions that existed in institutions, and to guard the truth from the eyes and ears of the population. But in the 1980s fresh energy and ideas entered the

debate brought there by the unprecedented involvement of diverse citizens' groups. The history of the institutionalization of children and adolescents took a new direction in the middle of the 1980s resulting in the passage in 1990 of the Statute of the Child and Adolescent, a sweeping legislative reform of the Code of Minors (1927, 1979). The reform codified into law the essence of the U.N. Convention on the Rights of the Child, but that went far beyond that Convention. The national security policies in force during the military dictatorship used isolation as a method to repress any citizen who threatened the social order and official institutions.

In the 1970s and 1980s, the maltreatment of low income children became more visible mainly because the number of children on the streets increased—a result of urban migration and concentrated urban poverty (13). Since the 1980s, a number of grassroots movements, non-governmental organizations, the Catholic Church and progressive factions within the government started to work together to improve the conditions of children's institutions in Brazil. With the return to a democratic government in 1985, a number of social issues began to emerge that the military government had kept from public attention or that activists had put on hold while civil society joined forces to advocate the end of military rule. Among these was a focus on the special needs of low-income children and youth, particularly street children.

By the mid 1980s, media reports on the often abysmal conditions in existing children's institutions and the treatment of street children by police, plus advocacy efforts by nongovernmental organizations, resulted in a considerable national outcry on behalf of these children. This advocacy included (a) popular participation in political debates after the military dictatorship, (b) the publication, from the beginning of the 1980s of diverse studies about the consequences of institutionalization on the development of children and adolescents and the high costs of maintaining institutional placements (Guirado, 1980; Campos, 1984; Rizzini, 1985; Rizzini e Altoé, 1985; Altoé, 1990); and (c) the interest of professionals from diverse disciplinary backgrounds to engage in this area that contributed to a much more profound understanding reflection and writing on the topic.

Children and youth got involved with this movement as well. The protests of children in placement expressed in acts of rebellion and criticisms also contributed to complaints by the press and public statements in various publications (Herzer, 1982;

Luppi, 1981,1987; Collen, 1987). In 1986, more than 500 children and youth participated in the First National Meeting of Street Children in Brazil and some of the youthful participants also spoke on the floor of Brazil's Congress. In 1986, the government established the National Commission on the Child and the Constitution, which had the role of collecting information on the needs of children and proposing constitutional changes. Those proposed changes went through numerous revisions with constant input from broad sectors of Brazilian society before it became law in October 1990. Among the key principles in the code are guarantees of full human rights for children, special assistance and protection for children and youth and special codes for children who need special care. The law also decentralized decision making on children and built in citizen participation through the creation of municipal and state Children's Rights Councils made up of representatives of public and private organizations which are charged with setting and implementing children's and youth policy at the local level and administering all public funds for children and youth services.

New paradigms for placing children in residential care in the 1990s

The 1990s were shaped by efforts to implement the Statute of the Child and Adolescent. The reigning discourse for children in need of care in this era was about the search for alternatives, widely understood as alternatives to institutionalization. The logic of this new discourse was to preserve the links that children have with their families and communities. The vehicle for a more family and community oriented approach to care was the substitution in many situations of shelter care for institutional care. The Statute of the Child and Adolescent reads:

The entities that develop shelter programs should adopt the following principles: I – preservation of family bonds; II – integration in a foster family, when the maintenance resources of the family of origin have been exhausted; III – personalized treatment in small groups; IV – development of activities in a context of coeducation; VI – whenever possible, avoid the transfer of sheltered children to other entities; VII – participation in local community life; VIII – gradual preparation for severance from the entity; IX – participation of persons from the community in the educational process. Paragraph: For all purposes of law, the

director of the shelter entity is considered as equivalent to the guardian (The Statute of the Child and Adolescent, Chapter II, Section 1, Article 92, pp. 38).

While the shelter was seen as a temporary measure for the protection of children in situations considered to be personally and socially risky, institutional care was still retained for delinquent youth. But in both cases, the law included mechanisms that guarantee the rights of the child and adolescent.

The approach towards residential care today is different in important respects from the past: there is a growing awareness of the necessity to focus on the causes of the problems that propel children and adolescents toward shelters or institutions. On the other hand, there is a new emphasis on identifying forms of support that could help the children remain permanently with their families and communities in which they were raised.

Despite the clarity of the Statute, however, there is still confusion in practice about the changes in the philosophy of care on which the law is based. The Statute, in article 101, refers to “shelters” meaning a place that engages in the “act of sheltering”. However, the term is still used in practice to refer to any institution, as an educator who works in one of these institutions has confirmed: “When they feel threatened they (the adolescents) know that going to a “shelter” is an alternative. As a result this entity has been transformed into a place where children and adolescents go when they need to hide in order to get out of sight for a period of time” (14). The children and adolescents also call the institutions “shelters”. *“In the shelter, I sleep one day, two days...afterwards I leave again, I go back to the streets. That’s how I am”* (Luiza, 15 years old).

Asked why any type of institution is labeled a “shelter” a group of workers responded that such a nomenclature conforms to the principles of the Statute of the Child and Adolescent. So the new term might cause people to rethink attitudes and practices that were deeply engrained or it might just encourage a change of label to appear that current practices are in compliance with the new law.

It should be pointed out that efforts are being made to ensure that the intent of the new law is not simply ignored. In 2001, for example, the Human Rights Commission from the House of Deputies accompanied by journalists visited various institutions for children and adolescents in several states. The Commission inspected in total 18 institutions in five states. They verified that most institutions operated according to the

old models of residential care, contrary to the Statute of the Child and Adolescent. They found incompetent staff as well as government officials who were simply ignoring bad conditions in institutions. According to the report it is clear that there is enormous distance between the intentions of the new law and the reality of the treatment dispensed particularly towards adolescents deprived of their liberty.

We will now focus on the services of the institutions directed to children and adolescents. We will be highlighting some of their characteristics considering their plurality and complexity.

The contemporary reality of institutional care

Children and adolescents placed in residential care

There are still a number of different types of institutions that house children and adolescents in Brazil. We will start by focusing on how the children and adolescents arrive at these institutions.

(a) Orphan or Abandoned Children and Adolescent: are those who do not have any bonds with their original families or have been abandoned by their parents. Included in this group are also orphan children, who do not have other family members that could be responsible for raising them.

(b) Children and adolescents “at risk” ⁽¹⁵⁾ are those who, due to violence, family crises or natural disasters are unable to return to their communities and need temporarily to be cared for out of their own homes. Often these are children and adolescents who have left the streets, or left their homes because of domestic violence, or who are involved in gangs and need to protect themselves from other gang members.

(c) Children and adolescents in situation of poverty: as in the past, families seek out to the Courts and institutions get their children placed either because of poverty or because they have difficulty in disciplining them. One of the workers recently interviewed in Rio de Janeiro, stated that from 2001 to 2002 there was a 20% increase in the number of inquiries about placing children because of extreme poverty: these were parents who have strong affectionate links with their children but who cannot afford to feed them ⁽¹⁶⁾.

Pathways into residential care

How do children arrive at these institutions?

We should note that there are public and private institutions. In general the public ones are associated with municipal or state programs. The private ones are initiatives connected to various churches and nongovernmental organizations. In general the nongovernmental institutions end up receiving public resources to develop their work.

The children and adolescents arrive at the institutions in different ways. The most common are:

- a) Brought by their own families when parents lack the resources to provide for their children's basic needs
- b) Brought by the Juvenile Court. Those are often cases where the children are abandoned as babies. Others are placed because they need to be protected from violence.
- c) By themselves, searching for help or shelter due to violence, extreme family poverty, or other risks often linked to the drug trade.
- d) Through other agents of the state and municipal governments. For example, children and adolescents found on the streets are forced into institutions by social workers, the police or other officials. The children and adults interviewed remember these events as quite violent.
- e) Brought by the Police Department for Protection of the Child and Adolescent when they have committed some type of crime.
- f) Brought by the Guardianship Council. The cases arrive through complaints from a local police force, governmental and nongovernmental institutions that attend children and adolescents, their own families, and eventually the Police Department for Protection of the Child and Adolescent.

While we know about these various entry points into institutions we do not have a detailed understanding of how the professionals and institutions interact with the children

and adolescents and how these interactions contribute to the sequences of broken ties and instability the children experience.

The types of institutions that house children and adolescents

There are many different kinds of institutions for children and adolescents in Brazil. But there is no integrated system of care based on children's needs. This lack itself reflects the absence of a national policy to promote the healthy development of children and youth, a serious deficiency in a country half of whose population is less than 20 years old. Below, we categorize institutions mainly by the length of time children and adolescents typically spend in them.

(a) Institutions that house children for a short period of time

These institutions are aimed at children and adolescents considered at risk. There are various institutions in this group and they are meant to provide temporary care. Consequently, there is an absence of investment in educational and social activities and the lack of child development perspective. In the city of Rio de Janeiro, these institutions are called "abrigos" (temporary shelters) (17).

In general, these institutions receive children and adolescents while they wait for their cases to be evaluated by the Juvenile Court. Ideally, a child or adolescent should stay in a shelter for a maximum of three months, until they are provided with alternative means seeking to return to their families, the community or to a substitute family. In practice, however, there is a different outcome. Either children end up staying at the shelter for years with grossly inadequate care or they do not stay in any one institution but keep wandering between the streets, their family homes and multiple institutions.

With time the affective ties begin to breakdown and their family connections weaken. Or if those ties are weak to begin with, the children just move from one institution to another. After spending a number of years in this life-style many of the adolescents begin to lose hope in the possibility of significant change.

Rai, a 15 years old boy from Rio de Janeiro, is among many who have trajectories blemished by ruptures since birth. He resumes the time he spent living in institutions as: “Oh, my life was... terrible”. He stayed temporarily in fourteen different places and never felt welcomed. Among these are Guardianship Councils, temporary shelters (abrigos), reception centers (centros de triagem), group homes (casas de acolhida) and clinics for treatment of drug addiction. By the end of the two long interviews about his life, he concluded: “I can only rely on myself. and... I got to have courage”.

Among the pertinent characteristics of shelters, they tend to serve a particular age group and are segregated by gender. Typically they have a capacity of twenty to thirty children but are often overcrowded. The staff includes social workers, psychologists, educators and volunteers, among other professionals. Whatever their professed mission, children consider them way stations between periods of life on the streets.

Ruth, 16 years old, affirms that view: “I stayed on the streets for some time, and afterwards I went to a shelter that closed... I stayed there for a month. I woke up, had breakfast, stayed sitting. After lunch, I stayed sitting. I took a bath and stayed sitting. I did not have anything to do but watch television. I think that the kids did not like it there”. Nara, 14 years old, said: “I asked a boy on the street where I could find a helter since I did not want to stay on the streets, because things would keep getting worse for me. I would suffer more because I didn’t have a way of working, and a way to eat”.

Staff members describe the problems of these facilities as overcrowding, high staff turnover, the consequent lack of continuity of care for children, and the lack of a developmental and educational perspective. As one educator who works in a shelter puts it: “The problem of shelters has turned into a vicious cycle, the adolescents enter one day and are out on the next, creating a “false” service. The work that should be done ends up never occurring....”.

(b) Institutions that house children for long periods of time

Some institutions are focused on providing longer term care for children at risk. In these institutions children are cared for by workers named “social educators” or “social parents”. The institutions provide appropriate courses and enroll the children in schools. Examples of these types of institutions are casas de acolhida (group homes) and casas lar

(substitute homes). The *casas lar* are supposed to reproduce a nuclear family with a couple called “social parents” caring for up to 12 children. These people are trained to offer children guidance, education, and a healthy environment.

The adolescents we interviewed helped us to distinguish between shelters (*abrigos*) and group homes (*casas de acolhida*). The shelters can be characterized as a “passport” to the group homes. According to their reports there seems to be a “worthiness” criteria for moving to a group home. In their words: “The difference is that at the group home there is a school, and different types of courses. They provided everything and the shelters don’t and you ought to behave because otherwise you won’t be taken to the group home”. “The group home is better because they have school and they are obliged to give better attention to the children and adolescents” (Ruth, 16 years old). “The difference from the shelter is because the group home is more caring” (Nara, 14 years old).

The main characteristics of group homes are as follows: (a) they target children and adolescents in situation of risk or abandonment. In some cases family ties begin to fall apart or the young people find it impossible to return to their families; (b) the child/adolescent gains a degree of stability; (c) group homes provide an open system of care inside small residential units of 15-30 children (d) all children attend school and some are enrolled in different courses in the group home; (e) other cultural and pedagogical activities are provided by social educators and/or psychologists and social workers; (f) children and adolescents are allowed to stay in the group homes until they are 18.

The reality is that in group homes, they must still face instability, face residential problems and turnover from the other children and adolescents, which makes it harder for family and community reinsertion. A variety of sources about group homes in Rio de Janeiro, suggest these institutions function in general as shelters. Contributing to their lack of stability are: the enormous demand for taking more children; the lack of other types of care for children and adolescents.

Challenges and future directions

A review of the literature on the institutionalization of children and adolescents, together with our experience of being involved in research, policy development, technical assistance and training in this area, brought us to the following conclusions about the principle challenges in current philosophy and practices and about avenues for change.

An increase in the number of institutions is not good for children. Numerous studies that were released during the 20th century clearly reveal the disastrous consequences of institutionalization for human development. Professionals from Rio de Janeiro who work in these institutions report that in the last few years the problems in the children's lives have worsened; for example, the cases of violence – in the family, the community, in the streets and in the institutions. They also insist it is getting harder to achieve positive outcomes for the children. They emphasize that what occurs is “false service”, since generally they are not able to maintain a stable program that responds to the needs of the children in shelters. They also mention conditions of overcrowding of the institutions, a high turnover in the shelters, a mixture of highly compromised adolescents with those who have a better chance of returning to their families. Yet nonetheless we start the third millennium with the knowledge that there a significant numbers of children still live in institutions (19).

In many countries, the principal causes of institutionalization are similar to those we experience in Brazil; institutions are an alternative for low income families who see them as providing the opportunity for their children to be fed, to be secure and have access to education. And so the condition of poverty continues to cause the placement of children who do not need to be removed from their families or communities. In addition, civil and other wars, family and community violence, the HIV/AIDS epidemic, and the organizational pride of staff and donors contribute to the large number of children who remain in institutions.

The practice persists despite the globally recognized fact that institutional care is, in general, ineffective and expensive, costing up to six times more than initiatives that support families to take care of their children themselves (Ministry of Foreign Affairs, 2001).

Developing alternatives for institutional care

Children should not be institutionalized for being poor, but they still are. Alternatives need to be created that respect both the needs of children and their rights.

In the cases in which institutional care is considered unavoidable as a temporary measure, an institution should not deprive a child of a broader social life or try to occupy all the space of the family. Alternatives to institutional care have a sufficient track record both here and abroad to be preferable to institutions. They include a variety of familial and communal supports and the use of substitute families and adoption. Most important, the responsible public bodies cannot be allowed to abdicate their responsibilities to the police as has been the case throughout the 19th and 20th century. Unfortunately, this is still the current practice, at least in large Brazilian cities as the police continue sweeps to remove children from the streets.

Placing children and adolescents in institutions for short periods of time should be seen as a part of a range of services available to them in very special circumstances. Institutional care should not be an end in itself, but a resource to be utilized only when there are no alternatives. This recommendation is in accord with the principles established by the United Nation Convention of Rights of the Child and Adolescent as well as the Statute of the Child and Adolescent. In the spirit of the Convention, when care outside of family is unavoidable, every effort should be taken to ensure that the placement best meets the needs of the child or adolescent after taking into consideration their opinions and wishes (Bullock, Little, Ryan, Tunnard, 1999).

Conclusion

We discussed in this chapter the development of a strong pro-institution culture in Brazil that in many ways has persisted until the present, and we noted important changes that have occurred beginning in the 1980s. We have shown how questions about institutional care developed, and how these questions developed into pressure for reforms in legislation and practice. Currently there is a resurgence of interest in the problem and a new drive to rethink the issue and combat the practice of unnecessary institutional

placements. It is critically important to place reform on the active national political agenda.

It is important to establish participatory processes so that interested groups and communities can be involved in the identification and clarification of the issues. For example, how to involve different family and community actors in the search for solutions to problems related to education and the nurturing of their children? This is not an easy challenge. The task requires a change in attitudes and service practices that have flourished in this country for centuries.

Among the fundamental questions in thinking about reducing the incidence of institutional care are: are institutions necessary; in what cases; for whom? When institutional care is unavoidable, how can we ensure an environment that respects the child's humanity and encourages the full development of the child? What alternatives now exist or should be created? The alternatives to institutional care should be acceptable to the children themselves and to parents who have run out of resources to cope with the challenges of child-rearing.

However the problem will not be resolved just by focusing on the question of institutional care. The problem and its solutions are intimately connected to the macroeconomic conditions and policies that produce persistent poverty. The continued existence of that poverty is the major reason for the problems for which institutional care is the unacceptable response.

Notes

1. This text is based on the book "The Institutionalization of children in Brazil: historical perspectives and current challenges" (CIESPI/UNICEF, 2004). A portion of the research conducted was supported by the University of Chicago, Chapin Hall Center for Children with the participation of Paula Caldeira, Alexandre Bárbara Soares, Thereza Cristina Silva (CIESPI) and students from PUC-Rio (Social Service Department): Bianca Lessa, Denise Marçal de Oliveira, Emely Teixeira Pontes, Fátima da Silva Teixeira, Francisca Paiva Ribeiro. The authors are grateful to Anjali Akaur and Mariana Menezes who translated the original manuscript in Portuguese and to Malcolm Bush, from the Woodstock Institute, Chicago, for valuable comments on the text and for many years of rewarding conversations on the condition of disadvantaged children.

2. The use of boarding schools by upper-middle class parents, unlike in other countries, seems to have disappeared. We were not able to find any substantive research on the end of this tradition.

3. The term "abandoned and delinquent minors" ("menores abandonados e delinquentes") was commonly used from the 19th century up to the 1990s to refer to disadvantaged children. Though

“minor” (“menor”) is a legal category applied to children/youth 0 to 18, it became popularly used to label a child who was an object of the legal and welfare systems, thus becoming a target of the politics of institutionalization. In Portuguese, the word “menor” means diminished, smaller.

4. The Statute of the Child and Adolescent (Articles 19 and 92).

5. The term “circulation of children” refers to children who spend part of their childhood outside the home of their biological parents (Fonseca, 1994).

6. The study, funded by the Swiss NGO *Terre des homes*, was commissioned by the newly founded *Rede Rio Criança – Rio Child Network* – an initiative aimed at integrating the ideas, experiences and actions of 13 organizations that work with children’s rights in Rio de Janeiro. In this study 67 youngsters were interviewed both on the streets and in institutions. We found various cases of boys and girls by the age 15 had already passed through more than ten different institutions (Rizzini et al, Ed., 2003).

7. This information is based on the statements of children and adolescents interviewed in Rio de Janeiro, during the period from October 2001 to September 2002 (Rizzini, Soares, Caldeira, Butler, 2002).

8. One minimum salary is currently R\$ 240 or \$80 U. S.

9. Contrary to popular belief, only a comparatively small number of children in the urban centers of Brazil actually live on the streets. But large numbers of children spend their days on the street returning to their homes or the homes of friends or relatives at night.

10. Note 3 explains the socially constructed meaning of the term “menor” (“minor”).

11. The Guardianship Council is responsible to oversee the attainment of the rights of the child and adolescent. The obligation of the Guardianship Council is to intervene in cases which the rights of the child and the adolescent have been threatened and/or violated. Statute of the Child and Adolescent (1991, articles 131 to 140).

12. Also see: Almeida, 1982, Guedez, 1994, Alves, 2000, Prada, 2002, Weber, 2000, Rizzini et al, 2003.

13. This section on the democratic movements to improve the condition of children in Brazil is taken from Irene Rizzini, Gary Barker and Neide Cassaniga. *Children, participation and democracy: a case study of the Statute of the Child and Adolescent in Brazil*, 1998. pp.35-42.

14. Interviews carried out in Rio de Janeiro in 2002 (Rizzini, Soares, Caldeira, Butler, 2002).

15. In this text we use the term “children at risk” simply because it is commonly used to refer to children who are in adverse or vulnerable circumstances. We would like to point out though that this term has been misused to label mostly poor and black children thus contributing to processes of segregation, marginalization and discrimination that affect these children (Rizzini, Barker, Cassaniga, 2002).

16. Interview with a worker in an institution for children in Rio de Janeiro in May 2002 (Rizzini, Soares, Caldeira, Butler, 2002).

17. The terms used to describe particular residential care facilities vary within the country and while we chose the most appropriate equivalent terms in use in North America and Western Europe, the on-the ground reality of such care is likely to be quite different, in some respects, in Brazil.

18. Interviews conducted in November 2002 in one of the institutions for temporary shelter in Rio de Janeiro (Rizzini, Soares, Caldeira, Butler 2002).

19. There is no way of measuring the problem. We are limited to inadequate public reports. A report conducted by the Swedish government estimates that there are between 8 and 10 million children in institutions of some sort or another in the world (Ministry of Foreign Affairs, 2001).

20. It is also in accord with the Stockholm Declaration of May, 2003 that emerged from a conference of some 600 researchers and practitioners from over 80 countries.

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