

## EXECUTIVE REPORT

### Situation of small children protection in LITHUANIA.

In 2011 Children Support Centre together with partners: NGO organisations from Bulgaria, Poland and Latvia started to implement two years lasting project “Smack free home for every child”. The substance of the project is to assure secure early childhood. The main tools that comes to assistance improving security of babies and small kids is cooperation of specialists preventing and intervening violence in bringing up children, development of parental skills and changing attitude to non-violent up bringing.

Project participants developed a parenting skills training program, educational video clips about 0-3 years child care, brochure and leaflet for parents, and trained a group of Lithuanian experts and parents on a basis of positive parenting program, implemented a social campaign against the use of corporal punishment “Protect me - I'm small!”. The aim of the project was to encourage cooperation among state, municipalities and non-governmental organizations in maternity, infant and small child protection from violence and to foster positive parenting.

We are grateful to Renata Augutavičienė, the Prosecutor of the 5th Criminal Investigation Branch from Vilnius Regional Prosecutor’s Office, Laima Nausėdaitė from Children Support Center, Gražina Šeibokienė, the Head of Pre-School and Primary School Education Division from the Ministry of Education and Science, Asta Šidlauskienė, the Senior Officer of Children and Youth Division from the Ministry of Social Security and Labour, Sonata Varvuolytė, a general practitioner from Baltupiai Centre for Family Medicine.

#### **Outlines of Child Rights Protection in Lithuania.**

The main children rights protection and provisions are outlined in the Constitution and in the law on Children Rights of the Republic of Lithuania.

In 1992 the Republic of Lithuania joined the UN Convention on the Rights of the Child that was ratified by the Parliament of the Republic of Lithuania in 1995. And Lithuania committed to take up all the required juridical, administration and other actions that would help to implement the declared rights outlined in the Convention.

The main national laws related to safeguard, protection and defence of children rights and legitimate interests are: The Law on the Child Rights Protection of the Republic of Lithuania; The Civil Code of the Republic of Lithuania; The Code of Civil Procedure of the Republic of Lithuania; The Criminal Code of The Republic of Lithuania; The Code of Criminal Procedure of the Republic of Lithuania; The Code of Criminal Procedure of the Republic of Lithuania; The Law on Education of the Republic of Lithuania; the Law on the Minimum and Average Care of the Child of the

Republic of Lithuania; the Law on Social Service of the Republic of Lithuania, and etc. Provisions on child protection are outlined in the sub statutory acts as well.

Articles No. 58-61 of the Law on the Child Rights Protection of the Republic of Lithuania foresees that the Child Rights Protection is assured by:

- the state and its institutions;
- local municipality institutions;
- NGOs, whose activity is related with protection of children rights.

The Government of the Republic of Lithuanian regulates authorisations of the Ministries of Health, Education and Science, Social Security and Labour, Interior in the field of protection of children rights and ensures accessibility of services for children and families. The main institution responsible for protection of children rights is Ombudsman for Children Rights of the Republic of Lithuania. Other institutions that directly protect children are Departments of the Children Rights Protection under supervision of local municipalities. State Child Rights Protection and Adoption Service under the Ministry of Social Security and Labour coordintes activities of local deprtments.

### **Health Care of Children and Pregnant Women**

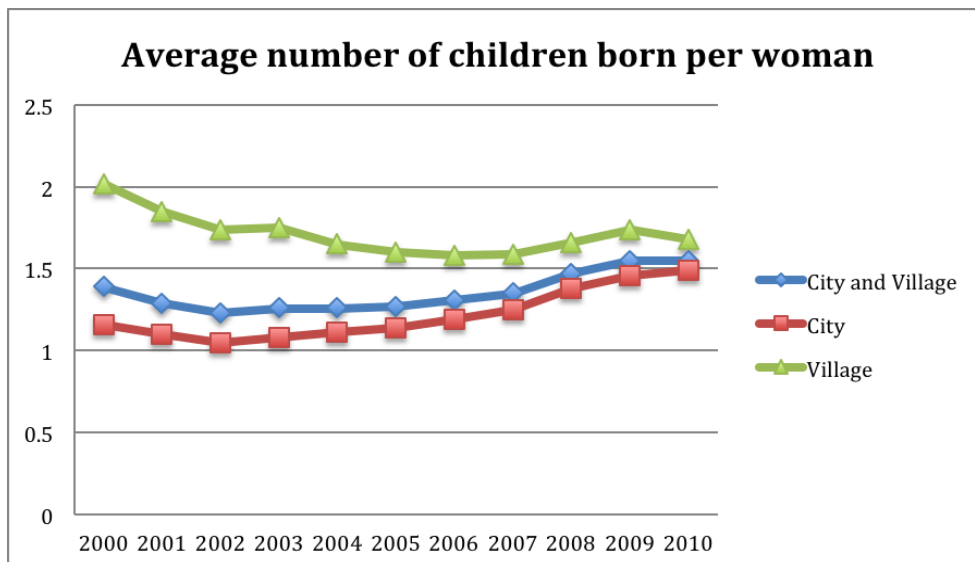
This chapter will review situation of pregnant women, new born babies and children health and health care situation in Lithuania. Situation is explored according to the Law on Health System regarding free health care services and check-ups provided by state. This review includes data of the Lithuanian Department of Statistics.

The Article analyses examples of doctors' practices, problems when real situation does not correspond with law. Statistics of general birth rate, babies, kids up to 3 years death rate, and babies, kids up to 3 years sickness rate. Proposals, how to improve health care of pregnant women, babies and small children are provided at the end of the article.

#### *Health care of new born and pregnant women in Lithuania.*

Free of charge health care services are provided for children and pregnant women in Lithuania. Primary check-up is provide by primary health care specialists – family doctors, paediatricians, community nurses, nurses of general practice.

In the period of 2000-2010 an average birth rate was higher in villages compared to cities. But during the last years this difference has minimised. And general birth rate has been slightly increasing from in years 2002-2010 ( Look at the diagram below).



*The Lithuanian Department of Statistics, 2012.*

In 2010 new *Law of the Order on Children Health Check-ups* has been approved by the Ministry of Health of the Republic of Lithuania. Nurse, mid-wife, or doctor should check the health of the new born at least once in the first month. Also new born baby should be visited in three days after leaving the obstetric department/ hospital. For this purpose, parents must register their baby at the institution of primary health care. By 6 months of age, the baby should have check-ups every month. In the period of 7-12 months family doctor should make check-up at least twice. She/he should pay attention to the scar of BCG vaccination. Nurses meet the parents with their baby 2-3 times and help to adjust baby's care hygiene and environment, help to shape rational baby and family dietary habits, inform parents about illnesses, traumas, violence prevention and immunity check-up.

#### *Children Health Care Check-Up.*

It's recommended to make check-ups once a year from the age 1 to 4. There are regulations what family doctor should evaluate during each visit: speech, psycho-motor development, sight, vision, hearing, locomotor system. It's compulsory to have 1 check up of ophthalmologist, annual consultation of nurse and dentist. Nurse informs about the rational dietary habits, avoidance of traumas, burn, violence, and addictive habits. At the age of 5-7 years doctor give annual consultation on non-infectious diseases.

#### *Health check-up of pregnant women.*

Primary health-care check up of pregnant women in Lithuania is provided by family doctors, gynaecologists, mid-wives. According to laws, a pregnant woman can select primary health care institution, doctor who will observe development of pregnancy. The following compulsory tests and activities are envisaged: anamnesis, measurement of blood pressure, counting of body mass index, Identification and assessment of risks, measurement of uterine fungus from the 20th week,

evaluation of foetus heart tones, ultrasound examination 18-20th week, glucose tolerance test (when there is a risk of gestational diabetes), general blood test general urinal test, and urine culture test. Besides, some additional services are provided to pregnant women : 7 visits to the family doctor or nurse, tests of the blood. Pregnant women get free anti-flue vaccination.

In all cases of child health check-up's there is no methodology how to assess and recognize child maltreatment cases, except heavy physical traumas.

*Children morbidity and mortality.*

Perinatal and baby death rates are important health care quality indicators. In 2005 perinatal mortality was 8 of 1000 new born babies. At that time were born 154 new born dead babies, and made up 5,3 of 1000 new born babies. Until the delivery 116 babies died (75,3 %), and during the delivery 34 babies died (22 %) . In 2010 perinatal mortality was 6,5 per 1000 citizens. And it was 1, 2 times less than in 2005.

Children mortality up to the age of 1 year during the last 5 years has decreased from 6,85/100 in 2005 to 4,27/1000 of born babies in 2010. Mortality of new born babies has decreased 1,6 times during the last 5 years. The table below reveals number of deaths of children less than one year of age. Numbers are in absolute values. We can see significant decrees of mortality.

*Number of deaths of children less than one year of age*

	2005	2006	2007	2008	2009	2010
Number of dead	209	213	190	172	181	153
Dead babies per 1000 live births	6,85	6,84	5,91	4,98	4,96	4,27

Number of children from the age 1 to 3 died in accidents, from 2005 decreased as well. In 2005 was registered 21 child's death this group due to external reasons, in 2010-12 deaths of children. The death reasons were accidental drowning, traffic accidents, accidental poisoning by gases and vapours. The main reason was accidental drowning that draws up 30% of all accidents.

Number of less than 3 years age children, who was recognized as being disabled, has increasing from 2005 to 2009 (every year 100 additional cases). Children morbidity in Lithuania from 2005 to 2010 has increased, except for scoliosis and malignant tumours.

**Recommendations :**

1. Parents before leaving at the department of obstetrics/hospital should be informed about the necessity to register their baby at the primary health care institution.
2. It's necessary to list tools that are being used to evaluate child's health condition, and provide methodological recommendation of usage.
3. The tool as check-up of new born babies hearing should be included in a law.

4. It should be clearly defined in a law when a nurse or midwife must take all actions, if the quality of care of the new born baby is inappropriate.
5. It should be clearly defined in a law that new born baby can't leave the department of obstetrics/hospital without check-up of ophthalmologist, especially if there is a risk.
6. Evaluation of health care risk is the family doctor's direct duty. Check-up of dental hygiene should be started earlier than defined in the law.
7. It is necessary to assess number and duration of the consultations of primary health care specialist.
8. It's necessary to allow having private consultations provided by nurses (separate from family doctor's consultation).
9. It's necessary to make good use of resources and avoid duplication of the health care professionals functions.

### **Social Protection of Childhood.**

This section overviews maternity and sickness social insurance situation in Lithuania in the period of 2009-2010, this articles explores recent changes of sickness and maternity law, the provisions of the Labour Code and the regulations of the Constitution of the Republic of Lithuania. This section overviews new maternity law changes after July 2011, benefit payments to families with own children and caring other children, payments in special circumstances, e.g. death. Here will also be given foster care and adoption tendencies in Lithuania.

#### *Sickness and Maternity Social Insurance.*

Since July1, 2010 maternity (paternity) benefits were reduced by 10 %, i.e. maternity (paternity) benefit until the child reaches the age of 1 year - 90 %, and from 1 year to 2 years – 75% of wage. Also it was also reduced the maximum compensatory wage from 5 to 4 for the current years insured income.

#### *Motherhood before July 1, 2011 and after.*

According to Article 39 of the Constitution of the Republic of Lithuania, the state takes care of families bringing up children at home, according to the law provides them support. Working mothers are entitled to a paid leave before and after childbirth, favourable working conditions and other benefits.

According to the Lithuanian Law on Benefits for Children, every new born child receives allowance of 1430 Lt. As well families of low-incomes, taking into account the number of children, get paid a fixed allowance for every child.

Maternity benefits are paid for the period pregnancy and delivery leave. After the 30th week of pregnancy, maternity benefit for women is paid for the period of 126 calendar days. If a woman decides not to go on pregnancy and delivery leave, the right to parental leave comes from the date of childbirth.

Various professionals evaluate differently the duration of parental leave in Lithuania. Therefore, since 1 July, 2011 the Law on Sickness and Maternity Social Insurance provides options to choose to use or not leave. It's applied only for the newly-granted social security benefits: maternity (paternity) social insurance benefit is paid from the parental leave during pregnancy and childbirth leave until the child is two years old, according to the selected period of receiving benefits, changing maternity (paternity) rate (70 % and 40 %, if it's paid for the 1st and the 2nd year; or 100% of the age for the 1st year ).

*Benefits for families and children.*

Families with children are given the support, according to the Child Benefits Act. This support is provided from the state budget, administrated by administration of municipality.

The Act legalized the single and monthly payment of social benefits:

*1. Children growing up in families:*

- Child allowance (birth or adoption of a child) paid only once;
- Allowance for a child;
- Allowance for a child of conscript;

*2. Children under care:*

- Care allowance;
- Settlement allowance.

*3. Pregnancy allowance:*

The amount of benefit since August 1, 2008 depends on basic social benefit (hereinafter - BSB), BSB equals to 130 litas.

*Families raising children: benefits payment.*

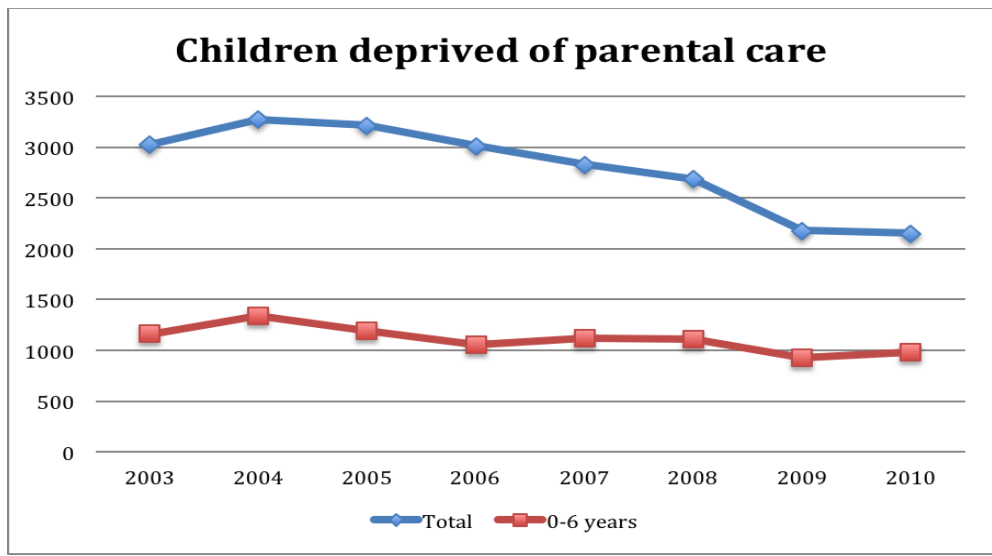
In order to increase demographic changes and promote adoption in Lithuania, following the birth or adoption of a child, a lump sum is paid which amounts of 11 BSB, i.e. 1430 LTL. If family adopts a baby (under 1 year old), it receives a childbirth and an adoption benefits. Since March 1, 2009 child benefit is paid according to family's income.

A child whose carer is a natural or legal person, including state and local child care institutions, during the period of custody is granted and paid four BSB (520 litas) the size of monthly care benefit. The income of the care family does not affect the pay-out. If the family has low income, then other monetary and social benefits are given (social benefits, compensation for heating, hot and cold water, free meal for children at school, support purchasing school goods, discounts for the kindergarten's fee, burial allowance, if a child dies, and etc.).

*Children deprived of parental care and their custody status.*

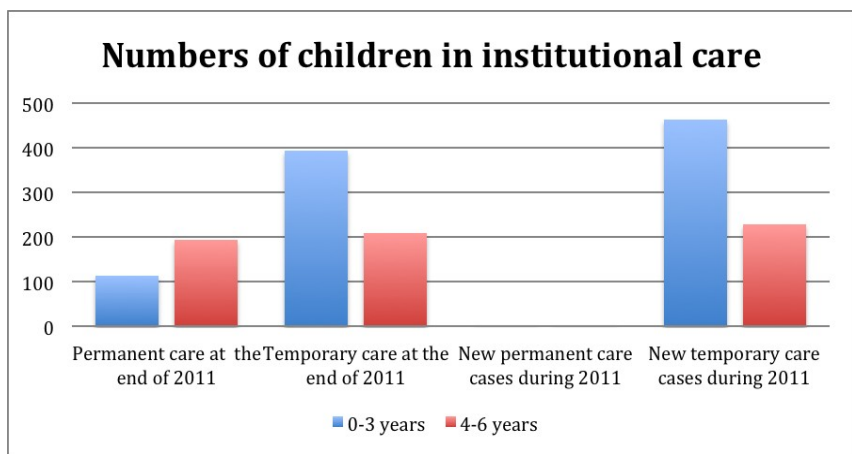
Over the last decade, the number of children of the age of 0-6 and older, who lost own parents, decreased. However, this is a serious problem. Just in 2011 1700 children (i.e. 72%)

deprived of parental care because that their parents or a single parent neglected the child interests, used physical or psychological violence, and therefore there occurred a risk for child's physical, mental, spiritual, moral development, and security.



Data provided by the State Child Rights Protection and Adoption Service under the Ministry of Social Security and Labour

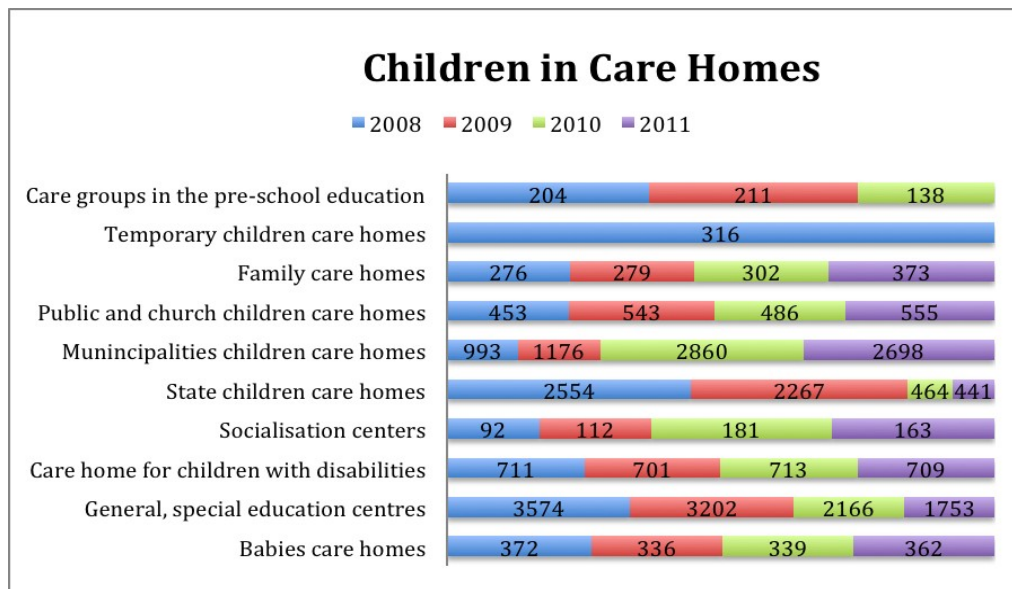
Due another reasons: parents' illness, sentencing or arrest, parents are unable take care of children. Owing to it, during 2011 year 338 children lost parental care, i.e. 14%.



The Lithuanian Department of Statistics, 2012.

Children younger than 3 years old deprived of parental care most commonly are found in temporary custody. The goal of such custody is to return the child to the biological family, providing all kind of assistance. Situation in this area has not changed for several years. The number of children in institutional care has not decreased, because more than a half of the children are 10 years old or older with little chance to be adopted, and number children under 3 years of age do not have child adoption status.

*Children in Institutional Care*



*Lithuanian Department of Statistics, 2012.*

In May 2011 Lithuania's 4,171 children were growing in foster care institutions, including 2,978 under permanent care, 1193 under temporary care. 1937 children (65% of all children under permanent care) are listed as eligible for adoption. 35% of children are under the permanent care, due to temporary parental care restriction.

The temporary care of 345 children (29 %) lasted longer than 1 year. There isn't any indicated period, how long the temporary care should last, but according to the child's interests and the principle of reasonableness, it is obvious that it can't be unlimited period of time.

#### *Adoption.*

The data on children available for adoption shows that in 2009 were 232 children of 4-6 years, 126 children of 0-3 years; in 2010 150 children of 4-6 years, 105 children of 0-3 years; and in 2011 130 children of 4-6 years, 110 children of 0-3 years. In 2010, 224 children were adopted, and in 2011 245 were adopted by Lithuanian and foreign citizens.

#### **Recommendations:**

1. In order to ensure rights of the families raising children younger than 3 years and older ones, whose income due to objective reasons do not satisfy minimum needs, there should be change of the benefit calculation and methodology allocation.
2. Create / prepare methodology of calculation of social benefits for individuals/families with children under 3/5 years old in order to satisfy minimum needs.
3. In order to reduce social exclusion and isolation of individuals with children less than 3 years, social allowance of parental leave should be increased.
4. The access to child day care services should be facilitated to families / individuals with children under 3 years.



5. Improve the availability of social support needed to individuals / families with children under 3 years. Changing laws and subordinate legislation.
6. Subsidize or provide free access to child day care services for families with children under 3 years. To ensure good quality and availability of such services.
7. Create a system of tax credits, depending on a number of children. Reduce taxes for parents raising children under 3 years.
8. Create subsidising system obtaining housing subsidies: interest repayment for housing may be linked to the number of children in the family.
9. Increase of pregnancy and maternity / paternity (paternity) leave length Lithuania.
10. Regulate adoption conditions in Lithuania in order to increase adoption rates.

### **Pre-School Education for Children.**

The Law on Education of the Republic of Lithuania specifies that pre-school education takes place in the family. Upon parents/cares request pre-school education could take place in a nursery or in other educational institution.

#### *Pre-school programs.*

Early childhood education is an autonomous local government function. Pre-school education is implemented by nurseries (children under 3 year), kindergartens (children under 6/7 years), day care canters (from 3 to 11 years), and by other educational institutions. Education, which is optional, according to pre-school program may be offered to children from birth to 6 years. In some cases, pre-school education could be compulsory to children from risk families.

Since January 1, 2011 pre-school education is linked to pre-school money pot, i.e. the amount of funding for each child educated according to pre-school program. The funds are allocated for 20 hrs per week education. 2555 Lt is allocated per child per year. However, pre-school money pot covers only part of the education cost. Municipalities cover the other part of expenses. If child goes to private kindergarten, parents have to cover other part of the cost.

The prevention and intervention in the cases of violence at preschool institutions is regulated according Law of Republic of Lithuanian.

#### *General Education Statistics.*

Currently there are 648 pre-schools in Lithuania (576 of them are nurseries-kindergartens). 37 of them are private.

On September 1, 2011 74,986 children from birth to 6 years were taking part in pre-school programs. It is 55.3 % of the total number of children of this age. The largest group was 4-6 year children (69.1 %). The smallest group was 1 to 3 years (21.3 %).

According to European Commission (European Commission Progress Report 2009), Lithuania has made significant progress in the last 7 years developing the institutional pre-school

education (an increase of 26 %). But still lags behind the European Union countries. In particular, significant differences are observed between urban and rural areas. For example, 29.1 % of early age children attend kindergartens, while 5.3 % of children from rural attend kindergarten.

*Making Pre-school education more attractive.*

In recent years, pre-school education is experiencing significant changes. The entire pre-school system is transformed radically:

- Since 2007 institutions itself are preparing curriculum taking into account the needs of the children attending these institutions, as well family expectations (according to the Minister of Education criteria);

- since 2010 hygiene standards - health safety requirements -were changed. Many morally out-dated, unreasonable principles were abandoned.

- Since January 1, 2011 has been introduced pre-school money pot covering 20 hrs. per week cost of education. Municipalities provide it as a grant based on the number of children taking part in pre-school curriculum;

- since July 1, 2011 some changes in the law on Education has been made. New regulations determine that pre-school education can be provided from the birth (before it was only from an age of 1 year).

**Recommendations.**

In order to improve early childhood education access, ensure the quality and efficiency, there is a need for:

1. Financial incentives for development of non-public and public sector by increasing the funding through pre-school basket for up to 6 hours during the day.
2. Program funding approach to support municipalities and private initiatives to diversify the ways of organizing pre-school. Combining child rearing and parental employment.
3. The support of the European Union Structural Funds modernizing of the existing pre-school institutions, and their premises for the early children education, paying with particular attention to the differences between urban and rural reduction.
4. Drafting preschool children achievement descriptions for each age group on the national level.
5. Developing and introducing external evaluation system of pre-school institutions.
6. Developing educational assistance, with special focus on rural residential areas. Providing flexible educational assistance for preschool children and their parents.
7. Organizing educational activities, strengthening parental responsibility for the child, spreading positive family-school methods.
8. Providing methodological support for teachers, helping them to develop and implement the curriculum programs for children of different learning needs and ages.

9. Promotion of inter-institutional cooperation in order to ensure rights of children growing in families of social risks. Improving quality of education by providing comprehensive educational assistance, social and health care services for children and their parents.

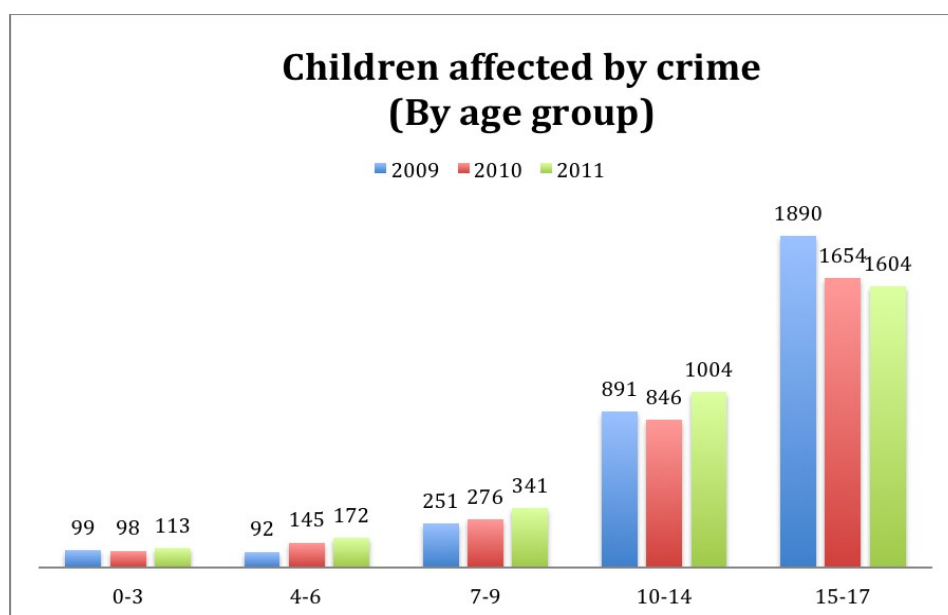
**Violence in the immediate environment – children's perspective.**

New law considering violence in the immediate environment entered into force from December 2011. This is very positive step in protection of children against many forms of maltreatment. Although it is new law and it has to become applicable. So here we have to discuss the situation of crimes and application of the new law .

Statistical data of the last 3 years on child victims based on sex and age. Boys suffered the most 1. 8 times more (in 2009 -2193 boys, in 2010 -2019 boys, and in 2011 -1960 boys) than girls from criminal action, however, the number of girls affected by crime is fluctuating (in 2009 - 1030 girls, in 2010 - 1000 girls, and in 2011 – 1274).

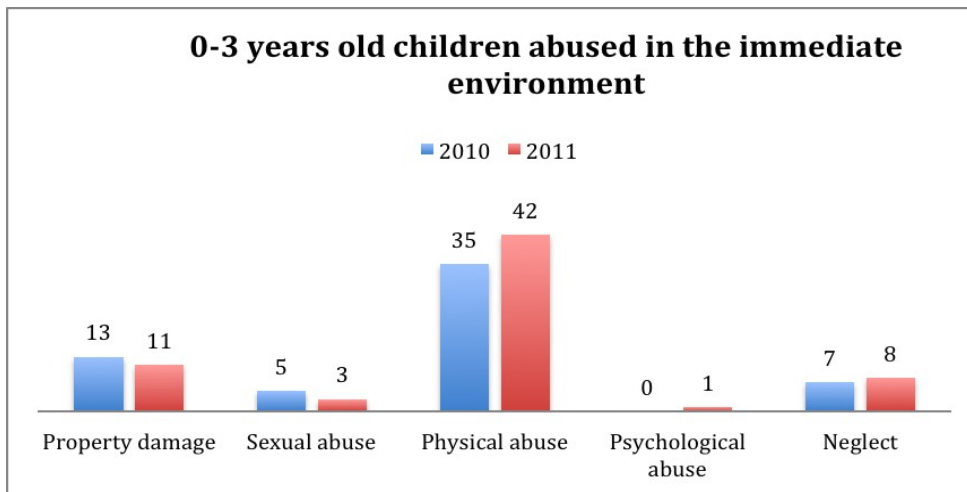
360 children experienced parental violence (11.9 %), 68 children experience foster parents or stepfathers’ violence (2.3 %), 10- carers’ violence, 42 – from persons from immediate environment, 12 - teachers’ violence in 2010.

Comparing data of 2009-2010 it reveals some positive tendencies. There is almost double (from 37 to 18 cases) decrease of the children who were victims of the criminal activity at large. Number of children who suffered psychological abuse decreased as well (from 154 to 117). The biggest downside tendency was in 2010. It was 7.5 times more recorded cases due to neglect.



Data provided by the Ministry of the Interior, 2012.

Data shows that most of the victims of crime are children of elder age. Still the numbers of crimes against small children age high.



*Data provided by the Ministry of the Interior, 2012.*

The observation of referrals from the institutions where might be criminal actions against children the health care institutions are at the first place, then other institutions. There almost none of the reports come from preschool institutions.

### **Recommendations:**

1. Clearly identify implementation arrangements of the law on “Anti-Violence in the immediate environment” No. XI-1425 (26 May, 2011).
2. The law must clearly identify the terms: "child", "minor", and "young child".
3. It is necessary to establish interdepartmental groups working 24 hours a day, composed of child protection specialist and the police officer. On-call hours should be scheduled for pre-trial judge.
4. It is necessary to design rules of the socialization centre: procedures, time control mechanism, and penalties not observing rules of the centre.
5. Socialization Centre is open organisation, where perpetrators could have the opportunity to stay in touch with the workplace or educational institution.
6. To oblige the perpetrator to participate in social education, rehabilitation, integration, prevention, and other programs.

### **Parental education in Lithuania.**

This section reviews what has been done in Lithuania developing positive parenting techniques and protecting young children. Through the gradual introduction of the programmes implemented by the Ministries of the Republic of Lithuania, municipalities and the European Union Structural Funds more diverse services are provided to families. Among these are programmes about positive parenting and non-violent discipline promotion.

*Parental education in health care institutions*

Pregnant women, who visit the primary health care center and their gynaecologists, are usually recommended to attend course on new-born care. For women, who are registered in the certain health care centre, training is provided free of charge.

Also, Public Health Offices operate under municipalities and organise training sessions for parents.

*Parental education provided by pedagogical psychological services.*

There are 55 psychological - pedagogical and educational service centers in 60 municipalities. These centers provide educational and pre-school evaluations, consultations on pre-school education; as well they provide psychological counselling for school-age children and parents. Also, some centers provide educational activities - organize and conduct training sessions for parents of small children. According to a survey of year 2012, 198 parents took part in trainings organised by pedagogical psychological services.

*Parental education in NGO sector.*

Non Governmental Organizations provide services to parents and run trainings when they are funded by local, national government or the EU or other donors. There are also joint projects with international partners to foster positive parenting in Lithuania. Dutch, German, Polish, Swedish and other training programs for parents are adopted and implemented by NGO's. From 2008 PRIDE training program is being active in Lithuania. All carers who want to take care of a child or who want to adopt him/her, must take part in these trainings.

*Findings*

The survey collected information and knowledge about the activities carried out in the country related to parenting skills education and following conclusions to be made:

- In recent years, a number of programs are designed to improve parenting skills.
- It is encouraging that the spread of programs is observed in all Lithuania, not only in major cities.
- Usually parenting skills training programs are implemented by local educational- psychological services, educational centres.
- According to the data of survey implemented in 2009-2011, more than 2,500 parents attended training program.
- Adapted programmes from foreign countries, are used in parenting skills trainings.

### **Recommendations:**

In order to organize courses of developing parenting skills, it is important:

1. To ensure continuity of the program. This is done when local institutions implement the program: clinics or educational centres. When NGOs get funding for implementing a program, their programs are usually implemented for the short period of time.
2. Municipalities of rural areas should be involved in implementation of parenting programs, and

motivating parents. Municipality's transport service could be provided to parents attending these courses. Officials working in social benefit sections may motivate parents to take part in a program. In extreme case, when is clear that family parenting skills are inappropriate and it receives social benefits, a condition could be raised. If a family wants to receive a social benefit, it must participate in training program of parenting skills. It is important that the reasoning should be expressed in friendly and respectful way.

3. Local communities and volunteers should be involved in parenting educational programs. On the one hand, more educated, parents, parents of the "better" can serve as an example for other parents. On the other hand, if a child or a several volunteers may spend time with the children, take care of them while their parents participate in the parenting skills trainings.
4. Health Offices and clinics may be involved in parenting skill-building trainings.

#### **Useful links:**

1. Institute of Hygiene. <http://www.hi.lt/>
2. Lithuanian Department of Statistics. <http://www.stat.gov.lt/lt/>
3. Baltic Immunoprophylaxis Association. <http://www.baltipa.lt/>
4. Birth medical data. <http://sic.hi.lt/html/nrd.htm>
5. Mandatory Health Insurance Fund Information System SVEIDRA
6. Children Support Center. <http://www.pvc.lt/>
7. Positive parenting. <http://www.pozityvitevyste.lt/lt>

#### **Summary**

Survey Children in Lithuania is the effort to present situation of maternity, infants and babies also children in Lithuania with cooperation of experts in different fields. Law of protection of childhood, social services, medical care, education and non-governmental services as well as judicial system are describes with the stress on the challenges for improvement for better protection and care of children in Lithuania. This survey is a part of the project „Smack free home for every child” and is supported by European Commission DAPHNE III program.