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Foster care – challenges and prospects in the context of expected changes

Pieczna zastępcza – wyzwania i perspektywy w kontekście wyczekiwanym zmian

Abstract

Aim. The need to provide care to minors who have been partially or permanently deprived of care by their parents or legal guardians is one of the key and constantly deepening challenges of the state's social policy. The key care and educational competences of foster parents, as well as the well-being of a child placed in foster care in the context of diagnosing and meeting their needs, are in turn a contemporary challenge of care pedagogy. Foster care in Poland requires constant attention and strengthening of many areas of its functioning, while this system is faced with the need to strengthen family care and the desire to gradually move away from institutional care. The subject of this article will be an analysis of the process of deinstitutionalization of foster care in Poland, with an attempt to answer questions about its justification and effects, both systemic and in the context of the effectiveness (or weakening) of protecting minors against domestic violence,

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and the possible implementation of the changes planned within it.

Methods and materials. This study uses multi-source materials – based on thematic literature, including a review of research around deinstitutionalization, as well as an analysis of legal acts regulating the foster care system in Poland.

Results and conclusion. The need for a gradual transition from institutional forms of foster care to strengthening and developing family care, which has been signaled for many years, has been moving to subsequent stages in recent years. Although it is difficult to discuss the idea of strengthening family care itself, doubts are seen at the level of possible effects of a disrupted deinstitutionalization process. In Polish conditions, foster care has been in this process for over two decades – however, the deinstitutionalization indicator still does not allow us to state that we have come significantly closer to achieving the set assumptions. The unequivocal results of analyses in terms of the causes of the failures in question indicate the need to strengthen the biological environment (working with the family, diagnosing and minimizing barriers in the care and education sphere, increasing the resources of the local environment in the field of family policy), as well as striving to increase the number of candidates for foster parenting.

Keywords: foster care, institutional foster care, family foster care, deinstitutionalization, foster families, family children's homes, Family Court, child welfare.

Abstrakt

Cel. Potrzeba zapewnienia opieki małoletnim, którzy częściowo lub trwale zostali pozbawieni pieczy ze strony rodziców lub opiekunów prawnych, stanowi jedno z kluczowych i niezmiennie pogłębiających się wyzwań polityki społecznej państwa. Zarówno kluczowe kompetencje opiekuńczo-wychowawcze rodziców zastępczych, jak i dobro dziecka umieszczonego w pieczy zastępczej w kontekście diagnozowania i zaspokajania jego potrzeb są z kolei współczesnym wyzwaniem pedagogiki opiekuńczej. Piecza zastępcza w Polsce wymaga nieustannej uważności i wzmacniania wielu obszarów jej funkcjonowania, tymczasem system ten mierzy się z potrzebą wzmocnienia pieczy rodzinnej i dążeniem do stopniowego odejścia od pieczy instytucjonalnej. Przedmiotem niniejszego artykułu będzie analiza procesu deinstytucjonalizacji pieczy zastępczej w Polsce, z próbą odpowiedzi na pytanie o jej zasadność oraz skutki zarówno systemowe, jak i w kontekście efektywności (bądź jej osłabienia) ochrony małoletnich przed przemocą domową. Celem artykułu jest przybliżenie problematyki deinstytucjonalizacji pieczy zastępczej Polsce w kontekście efektywności tego procesu i możliwej realizacji zakładanych w jej obrębie zmian.

Metody i materiały. W niniejszym opracowaniu wykorzystane zostały materiały wieloźródłowe – oparte o literaturę tematyczną, w tym przegląd badań w obszarze deinstytucjonalizacji, jak również analizę aktów prawnych regulujących system pieczy zastępczej w Polsce.

Wyniki i wnioski. Sygnalizowana od lat potrzeba stopniowego przejścia z instytucjonalnych form pieczy zastępczej na rzecz wzmocnienia i rozwoju pieczy rodzinnej w ostatnich latach przechodzi do kolejnych etapów. Choć z samą ideą wzmacniania pieczy rodzinnej trudno jest dyskutować, dostrzega się wątpliwości na poziomie możliwych skutków zaburzonego procesu deinstytucjonalizacji. W warunkach polskich piecza zastępcza jest w tym procesie od ponad dwóch dekad; wciąż jednak wskaźnik deinstytucjonalizacji nie pozwala stwierdzić, że znacząco przybliżyliśmy się do osiągnięcia wytyczanych założeń. Jednoznaczne wyniki analiz pod kątem przyczyn przedmiotowych niepowodzeń wskazują na potrzebę wzmocnienia biologicznego środowiska (praca z rodziną, diagnozowanie i minimalizowanie barier w sferze opiekuńczo-wychowawczej, zwiększanie zasobów środowiska lokalnego w zakresie polityki rodzinnej) oraz dążenia do zwiększenia liczby kandydatów na rodziców zastępczych.

Słowa kluczowe: piecza zastępcza, instytucjonalna piecza zastępcza, rodzinna piecza zastępcza, deinstytucjonalizacja, rodziny zastępcze, rodzinne domy dziecka, sąd rodzinny, dobro dziecka.

Introduction

The systemic protection of children who, for various reasons, are temporarily or permanently deprived of the care of their biological parents is an issue that is an integral part of the state's social and family policy. This issue is also a challenge for the social sciences in the context of diagnosing, developing and verifying solutions to create optimal conditions for compensating for the deficits experienced by minors (juveniles) – both *strictly* in the area of care and in many other areas of development, which, as a result of growing up in a dysfunctional family, often suffer from profound neglect and require specialised interventions. The indicated perspectives (political and scientific), although emphasising and functioning within the framework of other structures and having different tools at their disposal, strive in their activities to create optimal conditions for the functioning of minors – taking into account both the current situation and in the context of activities aimed at eliminating potential difficulties in the minor's functioning in the future.

The contemporary foster care system in Poland* not only emphasises the need to provide a child with care and meet their basic needs but also takes into account the broadly defined needs of a minor in the area of emotional or psychosocial

* Regulated by the *Ustawa z 9 czerwca 2011 r. o wspieraniu rodziny i systemie pieczy zastępczej* [Act of 9 June 2011 on family support and the foster care system] (*Ustawa*, 2011).

development. Care and educational interventions aimed at the broadest possible compensation for the losses and difficult experiences that the child has suffered are the leading paradigm in the area of work with children removed from their family homes. They can also be part of the phenomenon of childhood servitisation (Raclaw, 2019), understood as activities aimed at supporting the child to achieve the best possible development and maximise the effectiveness of their future functioning in social roles. This type of interaction is characterised by a specific standardisation – the development of repeatable mechanisms and the “adjustment” of children to them. In foster care, Mariola Raclaw also notices a kind of servitisation, pointing out the need for a more individualised approach to the needs of a child who, after a difficult experience, does not fit into the standard impact adapted to a typical developmental stage (Raclaw, 2019). The concept of servitisation clearly describes contemporary trends in foster care with a clear, yet standardised, empowerment of the child in the system, but also with an indication of the associated risks. Nevertheless, it seems that evolution in this area is justified, taking into account the different, changing approaches to childcare, which, in essence, when properly verified, can be an important element of further development.

Historically, the changing nature of foster care in Poland reached a significant milestone at the turn of the first and second decades of the 21st century. Based on the experiences of European Union countries and implementing EU recommendations in this area*. Work was then started on changes to the foster care system, aimed at a gradual move away from its institutional forms in favour of the development and support of family care. In 2012, the *Ustawa o wspieraniu rodziny i systemie pieczy zastępczej* [Act on family support and the foster care system] came into force, which was aimed at accelerating the deinstitutionalisation of foster care in Poland, a process that had begun a decade earlier.

Over the past years, the phenomenon of deinstitutionalisation has been defined in numerous scientific studies, including works by Polish researchers such as Agata Skalec, Mariola Raclaw, Joanna Szczepaniak-Sienniak, Joanna Luberadzka-Gruca, and Jan Basiaga (2023, 2015a, 2015b). Deinstitutionalisation should be understood as a combination of several elements of social impact. Effective deinstitutionalisation will consist, in particular, of measures taken to develop family-based forms of alternative care to such an extent that there is no need to place children

* These recommendations are included in the *Ogólnoeuropejskie wytyczne dotyczące przejścia od opieki instytucjonalnej do opieki świadczonej na poziomie lokalnych społeczności* [Pan-European Guidelines for the Transition from Institutional to Community-based Care] (2012) issued in 2012 in Brussels by the European Expert Group on the Transition from Institutional to Community-based Care.

in institutional care, as well as supporting children and families in their efforts to optimise the conditions for development and upbringing to such an extent that they do not require separation from the family (Golczyńska-Grondas, Błaszczuk, 2020). Due to the multifaceted social issue, the deinstitutionalisation process was also analysed by the Supreme Audit Office in 2022. The report assumes that it is

[...] the process of transition from institutional care to family-based forms of alternative care. It includes work to enable children to remain in or return to functioning families, as well as creating the conditions for the development of family-based forms of alternative care alongside the reduction of institutional care (*Wsparcie systemu pieczy...*, 2022, p. 5).

Deinstitutionalisation is essentially intended to lead to the optimum in the form of a clear minimisation of the number of institutional foster care facilities in favour of the development of its family forms. However, it would be an unjustified simplification to reduce this concept to such a narrow area. Just as important as working to increase the number of family-based forms of foster care are preventive and prophylactic measures that make it possible to “reconstruct” the lack of care and upbringing in the family effectively enough to avoid having to take children away from it. The actions taken in the scope of deinstitutionalisation of foster care in Poland were preceded by a pan-European trend and recommendations of the European Union, in which NGOs are also actively involved. As Joanna Luberadзка-Gruca emphasises, effective impact in the area of deinstitutionalisation requires a coherent concept of many diverse entities involved in the process, in particular by strengthening locally provided care and support for families (Luberadзка-Gruca, 2019).

More than a decade after the *Ustawa o wspieraniu rodziny i systemie pieczy zastępczej* came into force (Ustawa, 2011), a kind of verification of the effectiveness of the assumptions adopted therein is taking place. Based on scientific research, we find numerous studies, including a report on the effects of previous actions within the deinstitutionalisation process (Bitner et al., 2018) or analyses carried out in a similar or later period, including those by Joanna Szczepaniak-Sienniak (2017), Mariola Raław (2019), Agata Skalec (2017), Agnieszka Golczyńska-Grondas and Magdalena Błaszczuk (2020), as well as an analysis by the Supreme Audit Office conducted in 2022. The above-mentioned studies have a common denominator in their conclusions – an unequivocally negative assessment of the effectiveness and achievement of objectives in terms of the deinstitutionalisation rate* in Poland,

* The deinstitutionalisation rate of alternative care is – according to the definition adopted in the annual Information of the Council of Ministers on the implementation of the Act

as well as in the area of strengthening the other components of this process, including insufficient work with families experiencing a care and upbringing crisis or showing symptoms of the need to increase competences in this area (including the activities of a family assistant, organisation of day care facilities or the functioning of supporting families); lack of effective cooperation with the family of a child placed in foster care or, finally, insufficient action to support, develop and promote family forms of foster care, including the adequacy of remuneration for foster parents and people running family foster homes (to recruit candidates for this role).

The critical voices and appeals from both the scientific community and practitioners have been partially reflected in the actions of those in power, aiming to realistically improve the situation in the area of family care – in 2023, statutory changes were introduced to accelerate the pace of deinstitutionalisation, among others, by improving the financial situation of foster parents or increasing the number of adoptions of older children (*Nowelizacja ustawy...*, 2023). by improving the financial situation of foster parents or increasing the number of adoptions of older children (*Nowelizacja ustawy...*, 2023). The introduced changes were aimed at enriching the legal and financial tools, giving a chance to improve the reality of family foster care. However, there are still no visible social measures that could make the role of foster parents more appealing to the public, including measures to increase the prestige of family foster care.

Why is it worth it?

The need to provide a safe place for children who are temporarily or permanently deprived of their care can be determined by various factors. Orphaned children are placed in care, often also half-orphans. However, the largest percentage are children placed in response to diagnosed threats to their safety, health or life from the upbringing environment in which they have been functioning until now (Bitner et al., 2018). The decision to remove children from their family of origin may be interventionist (actions of a social worker or police officers based on Article 12a of the *Ustawa z dnia 29 lipca 2005 r. o przeciwdziałaniu przemocy domowej* [Act of 29 July 2005 on counter-acting domestic violence], and also be the result of an assessment, negatively verified by the family court, of the possibility of the child's continued safe stay in the family of origin (as an environment threatening the child's proper development or posing other risks to the fulfilment of the child's needs). The second procedure described very often

on Alternative Care and included in the NIK report (*Wsparcie systemu pieczy...*, 2022) – percentage of children in family foster care in relation to total children in foster care (both family and institutional).

involves diagnosing deep family dysfunctions that cannot be resolved in the short term. When deciding on the placement of a child, the family court bases its decision on some expert opinions, including those obtained from experts from the Advisory Team of Court Specialists, information obtained in the community by court supervisors, and school opinions, i.e., documentation in which specialists, when giving an opinion, based on their knowledge of pedagogy and psychology. By drawing on the achievements of social sciences, we can both verify the quality of family functioning and assess potential threats to the proper development of a child in their immediate educational environment. Placing a minor in care is therefore most often the result of numerous multi-level negligence and an assessment of the need to take action to improve the conditions for the proper development of the minor, as well as to implement measures to compensate for the existing deficits in particular areas of the child's development.

Activities aimed directly at a minor placed in foster care are carried out in many dimensions, such as:

- the protective dimension – relating to the provision of care in conditions that meet the child's basic needs, including the need for safety. In this dimension, foster care activities will consist primarily of providing the child with a physical place of residence (outside the current one) that is adapted to the child's needs and enables these needs to be met;
- diagnostic dimension – related to the diagnosis of potential deficits in individual areas of development (most often cognitive and social, as the most quickly observable and measurable);
- compensation dimension – directly related to the need to work with the child to compensate for previously diagnosed deficits (e.g., cognitive deficits such as learning difficulties or deficits in social skills).

The area requiring particular sensitivity and careful handling on the part of the foster carers is the sphere related to the emotions of a child isolated from their previous upbringing and placed in a new, unfamiliar environment. Minors in an unfamiliar and difficult situation, often not understanding it, experience strong emotions, which are intensified by the lack of people from their previous environment in their immediate vicinity. In the first stage of taking over the care, foster carers focus their attention and actions on creating conditions to reduce the emotional tension in the child and, as far as possible, emotional balance.

The creation of the above-mentioned conditions enabling a personalised and, consequently, effective adaptation path for the child in care is much more feasible in a situation where there are fewer people in the new environment and, therefore, fewer new relationships that the child can establish. Family-based foster care has a much better chance of creating such conditions – unlike institutional care, which is characterised by

a higher number of children and staff (from 2020, the limit for the number of minors living in an institution at any given time is 14, while in family foster homes, depending on the specifics, this number is within the limits of 3 to 8 children*).

Many studies analyse the level of effectiveness in the area of care and strengthening the development of a child in family foster care concerning institutional forms. Particularly, the literature emphasises the negative impact on individual areas of a child's development, especially intellectual and social development (Radlińska, Kasperska, Błażejowska, & Pogonowski, 2024; Bieńkowska & Kitlińska-Król, 2018; Mielczarek, 2018). In a report published in 2018, entitled *Postępy deinstytucjonallizacji pieczy zastępczej w Polsce* [Progress in the deinstitutionalisation of foster care in Poland], the factors that harm the development of a child in institutional foster care include "[...] limited contact with people from outside the institution, failure to take into account the personal preferences of the charges, lack of influence on decisions regarding functioning" (Bitner et al., 2018, p. 7). Similar analyses and conclusions were made in the analyses of European researchers, in which institutional forms of foster care – in the form which was in force before the change to reduce the number of children in care – often contribute to the deepening of the process of social exclusion and stigmatisation of the children placed in them, and the specificity of their functioning can significantly limit participation in social life, thus disrupting social development (Gudbrandsson, 2006).

The risks identified in foster care are significantly reduced in family-based care, and its many advantages, such as the chance to build a bond with a permanent carer, a greater likelihood of correctly diagnosing the minor's condition and adapting the response, or even the opportunity to experience and observe proper relationships in the family, create an opportunity to build a space in which the child can receive support appropriate to their needs.

Deinstitutionalisation – is there a need for limits?

The literature on the subject abounds in various studies emphasising and justifying the benefits of family care in comparison with the numerous limitations of institutional care. However, it would be incorrect to unequivocally criticise the effectiveness of existing care and educational facilities, which, in situations where a child needs

* The legislator indicates the possibility of applying an exception in a situation where the principle of non-separation of siblings is observed; in such a case, it is permissible to maintain the number of children in a given form of alternative care with an excess of the statutory limit.

to be protected, are a more favourable place of residence for a minor than a family home where they could have been harmed. This statement is, of course, obvious and should not exempt us from striving to create the best possible conditions for the safety and proper development of minors, which we see today in family care. However, it should be borne in mind that today's determination of decision-makers to achieve the highest possible rate of deinstitutionalisation seems to be a measure that does not take into account all the risks associated with the system's lack of readiness for a somewhat rigorous closure of the idea of institutional facilities (the ban on the creation of new institutional facilities introduced in 2023 as part of statutory changes). Indeed, even though *de facto* two decades of deinstitutionalisation measures in the field of foster care in Poland have passed, the number of family-based forms of foster care is disproportionate and insufficient to meet the scale of needs related to the protection of minors in the context of temporary, long-term or permanent stays. Moreover, the limitations on the number of children in institutional care, without a simultaneous provision of a suitable "substitute" in the form of family care places, carries the risk of resorting to solutions that are not fully adequate to the children's needs. One can imagine a situation of increased pressure to make decisions about the return of minors placed in care to their families to create space for more children to be taken into care, while at the same time not fully verifying whether the family of origin meets the conditions for the return of the minor (lack of willingness of the parents/guardians). For obvious reasons, this situation is not safe for the minor and can often lead to an intensification of the phenomenon of "child drift" (Racław, 2019), i.e., the need to replace children already in foster care in the past (due to the lack of readiness of families or insufficient time allocated for real and effective work with the family and, as a result, the repetition of mistakes). This is where the idea of the temporary nature of foster care arises. In essence, the belief that the child can return to their biological family should prevail for non-orphaned children. This perspective is accompanied by the belief that it is necessary to work with the family and strengthen its level of functioning with the use of various forms of support, mainly local, to eliminate or satisfactorily reduce barriers to the proper, expected and socially accepted pattern of family functioning. Such support is considered to be the resources of the local environment (advice centres, local therapies, support families). The role of the family assistant is also invaluable in this respect – as an entity supporting family members in their efforts to eliminate negative forms of family functioning by recognising and strengthening family resources using the possibilities of the local environment.

Legislative changes introduced by the *Ustawa z 9 czerwca 2011 r. o wspieraniu rodziny i systemie pieczy zastępczej* [Act of 9 June 2011 on family support and the foster care system] impose an obligation on the organiser of foster care to co-

operate with the family of origin, which is one of the components of the deinstitutionalisation process. The effectiveness of cooperation in this area has been and remains insufficient (Szczepaniak-Sienniak, 2017), and the main reason for this is considered to be the difficulty in contacting the family of origin, despite best efforts. The most common barriers to effective cooperation include the inability to find participants at their place of residence, failure to respond to attempts at contact, irregular visits by children or a complete lack of them, and a lack of regularity and consistency in the implementation of the work plan on the part of the child's family of origin. In this context, the theme of emotional bureaucracy (Raclaw, 2016), which the researcher diagnoses in the foster care system, may also be significant. While it is difficult to disagree with the perspective of perceiving professions in the field of working with dysfunctional families as some of the most emotionally burdensome, requiring empathy and involving sacrifices (often at the expense of one's personal life), the risk of real procedural issues in the perspective of official-client subordination cannot be excluded. The lack of sufficient research in this area may give rise to a sense of caution in drawing this hypothesis, but it may perhaps inspire research into the conditions of low work efficiency with the family to improve the deficient areas of its functioning and thus enable the return of the minor placed in care to the family of origin.

Another issue that requires reflection in the context of the legitimacy of complete deinstitutionalisation (total elimination of institutional foster care) is the threat to the security of so-called "intervention removals" of minors. The current legal regulations provide for the removal of a child in an intervention situation – as a direct response to a risk to the child identified by a social worker. The social services representative decides on the placement of the minor together with the police officer called to the scene and a health professional (Section 12a, *Ustawa*, 2005). The lack of transparency in the current availability of foster care places and the relative ease of determining the possibility of immediate admission of a child into institutional care (the possibility of quick direct contact) means that such interventions are "handled" by institutional facilities, whose contact details can be obtained by a social worker in a relatively accessible way (e.g. from the Internet) or are in their possession due to many years of work in the profession and in a given local environment - and the possibility of emergency placement of a child is determined on an ongoing basis. The above is generally not practised in the context of family foster care, as the possibility of direct (or indirect, e.g., through a foster care organiser) and immediate contact with family foster care is usually significantly hampered. In the case of emergency placements of minors, youth welfare facilities are therefore the main target location for the effectiveness of removing the minor.

The current significant restrictions on the number and age of children and the number of foster care facilities, combined with the lack of sufficient alternative family

care options, can significantly affect the effectiveness of the protection of minors in situations of risk. Currently, work is underway to introduce changes in the form of a nationwide central register that would provide up-to-date access to information on vacancies in foster care (both institutional and family-based), which should be assessed unequivocally as positive. Introducing such a solution could streamline the procedures for determining a place for the possible emergency admission of a minor, with an expansion of the range of options to include family care.

In the context of deinstitutionalisation, it is also worth considering the voices emphasising the issue of children with special needs (children with disabilities). As J. Luberadзка-Gruca (2019) points out, both the lack of a sufficient number of specialised families* (Sajkowska, Szredzińska, 2022) and often the lack of adequate specialisation and the lack of technical capacity to provide proper care (due to the child's degree of disability) mean that when it is necessary to care for a child with special needs, adequate options in this area are only available in an adapted care and educational facility. Quantitative limitations in this area, related to both the insufficient number of facilities and the observed increase in the number of children placed in need of specialist support (*Wsparcie systemu pieczy...*, 2022), create a risk of placing minors in substitute care institutions, such as social welfare homes or care and treatment centres. This practice is counterproductive in the context of pursuing the goals of deinstitutionalisation, as its aim is not to replace one institution with another (Luberadзка-Gruca, 2019).

Why is the deinstitutionalisation process in Poland ineffective?

The targets set in recent years for the proportion of children placed in family-based foster care about the total number of children in care nationwide are regularly not achieved. This includes the assumption that the deinstitutionalisation rate will increase to 90% in 2020 (Szczepaniak-Sienniak, 2017). The deinstitutionalisation process and its main objective – to move away from the placement of minors in institutional care – despite two decades of implementation, is still insufficient on a national scale. This does not mean, however, that its implementation is not

* A form of professional foster care aimed specifically at children with a disability certificate or a certificate of severe or moderate disability; children placed in care under the *Ustawa z dnia 9 czerwca 2022 r. o wspieraniu i resocjalizacji nieletnich* [Act of 9 June 2022 on the support and rehabilitation of minors] and teenage mothers with children with special needs. on the support and social rehabilitation of minors and on minor mothers with children with special needs.

possible. Examples of this are areas where no child has been placed in institutional care for years (Konin district, city of Kielce, Luberadзка-Gruca, 2019). The source of the above-average effectiveness of these areas is the effective cooperation between the district and the municipality, resulting in an increase in the number of children returning from care to a family home, or the professionalisation of foster care, including both improving their competencies or employing specialists, as well as organising various parenting and educational skills workshops for parents (Luberadзка-Gruca, 2019).

If we look at the proportions of comparing the scale of the achieved deinstitutionalisation index concerning the period of its implementation, it is difficult to disagree with the negative assessment of the effectiveness of the deinstitutionalisation process to date, as stated in a report by the Supreme Audit Office or similar positions in this regard by researchers of the phenomenon and experts on the conditions of alternative care in Poland. One of the voices signalling the causality of failure in the effective transition from institutions to forms of family care is the analysis of the progress of deinstitutionalisation, indicating that the effectiveness of this process should be strengthened by improving both the cooperation in this area between the municipality and the district, as well as the cooperation between the organiser of foster care and its various forms and the family court. Attention is also drawn to the need to increase the role of non-governmental organisations that are statutorily involved in supporting the deinstitutionalisation process and to strive to increase the number of places in family foster care. The report of the Supreme Audit Office, although correctly assessing the actions of decision-makers (from the level of the Minister, through the district and commune) in favour of supporting the deinstitutionalisation process, indicates their still insufficient level, emphasising the lack of consistency in planned and implemented activities, insufficient number of foster families or insufficient support for existing ones (*Wsparcie systemu pieczy...*, 2022).

Current studies, based on various analyses and surveys, provide valuable information on how to improve the effectiveness of the deinstitutionalisation process. Over the years, these voices have not been heard enough. An increase in the effectiveness of measures for a more efficient implementation of deinstitutionalisation measures can be observed in 2023–2024, in particular the statutory changes that came into force with the amendment of the *Ustawa z dnia 9 czerwca 2011 r. o wspieraniu rodziny i systemie pieczy zastępczej*, raising the level of remuneration for professional foster families and for people running family-type children's homes, or the new rules related to formal issues, raising the level of remuneration for professional foster families and for people running family-based children's homes, or new rules related to formal issues when signing contracts with professional families and those running family-based children's homes.

The role of the family and guardianship court in the deinstitutionalisation process

The systemic conditions of activities within foster care are based on the activities of entities performing tasks in several areas – they are the result of cooperation in the areas of social policy, family policy and the justice system (family and guardianship courts). So far, this article has emphasised the importance of the activities of the representatives of the so-called “support institutions” (social workers, family assistants), as well as the “implementers” of foster care activities (institutional care workers, foster parents, and family foster homes). Aside from the aforementioned entities, the family and guardianship court has a crucial role to play in the system of alternative care measures, in terms of decision-making and efficiency. It fulfils this role in the following areas:

- decision-making regarding the placement of a minor in foster care (placement of a child – both intervention, based on Article 12a, and as a result of a court decision preceded by an analysis of the family situation),
- issuing a decision on deprivation of parental rights (a stage enabling adoption proceedings),
- adjudicating on adoption.

Decisions on foster care placements are made by a team of professionals working directly in the community (depending on the specifics of the case, these are: social worker, family assistant, foster care coordinator, probation officer, or community police officer), as well as the opinions of specialists in the fields of pedagogy, psychology or psychiatry (opinions commissioned from the *Opiniodawczy Zespół Sądowych Specjalistów* [Opinion-Giving Team of Court Specialists] or court experts). The procedure that ultimately leads to the court’s decision to place a minor in foster care depends on the character of the cooperation with the various entities, including the ability to work efficiently with the court, taking into account their own capabilities and resources. This interdisciplinary approach is the key to making the right decision, taking into account the best interests of the child and being guided by those interests. Furthermore, the court’s consideration of the right course of action in deciding the child’s future is the basis for these decisions. However, the length of court proceedings – especially in the context of limiting or depriving parents of parental authority – is a strong point in the discussion between the alarming practices of those working in foster care (including in the area of adoption), and the judges themselves emphasising that a significant barrier to efficient adjudication is the incorrect organisation of the courts, in particular the excessive workload in the departments, most often resulting from understaffing.

The efficiency of proceedings before the family court is a factor that significantly influences the effectiveness of the deinstitutionalisation process. The long (even several years) wait for a court decision on the deprivation of parental rights over a minor or the completion of the adoption procedure significantly prolongs the process of a child “leaving” institutional or family foster care. As a result, the number of children in foster care continues to increase in a situation of temporarily increased child admissions (e.g., from 2022, the admission of children from war-torn Ukraine). It should be emphasised that decisions that have such a significant impact on the child’s future life (deprivation of parental rights, adoption or even a decision to return the child to the biological family) should not be made under time pressure. They require consideration and deliberation; they should also be made using all possible tools (expert opinions, interviews in the community). However, if significant delays in decision-making in this area are due to such mundane reasons as too many cases in the judge’s office and numerous vacancies in family courts, this state of affairs should be assessed unequivocally negatively and the need for measures to improve the functioning of courts in this respect should be recognised – which may have a direct impact on measures to improve the deinstitutionalisation process in Poland. The conclusions of detailed research in the area of deinstitutionalisation of foster care, conducted as part of a nationwide diagnosis in this area, indicate courts are at the top of the list of entities with which both institutional facilities and family foster care providers indicate the need for closer cooperation (Klimek, Kawa, Szczepaniak-Sienniak, 2024).

In conclusion, deinstitutionalisation is a multi-stage process in its basic assumptions, and the realisation of its objectives takes place over the years. In Poland, foster care has been part of this process for over two decades. Although today there are “deinstitutionalised” districts in Poland in terms of foster care, the deinstitutionalisation rate still does not allow us to say that we have come significantly closer to achieving the set goals. The unambiguous results of the analyses in terms of the causes of these failures indicate the need to strengthen the biological environment (working with the family, diagnosing and minimising barriers in the sphere of care and education, increasing the resources of the local environment in the field of family policy) and striving to increase the number of candidates for foster parents. The percentage of family foster care compared to institutional forms, which is well received, is 77.7% to 22.3% in 2021 (*Wsparcie systemu pieczy...*, 2022) – only seemingly can it be an optimistic figure, as many as 2/3 of foster families in care are related families (Klimek et al., 2024). This result is not the result of the state’s social or family policy – it is the result of recognising the wider family environment, motivating and working together with the representatives of the services working with the family (social workers, family assistants, court guardians). The hardships and sacrifices involved in being a foster family are real and constitute a significant barrier to making this decision. However,

the rewards that come with the opportunity to form a special relationship with children can outweigh these difficulties. The state should not rely solely on the altruism of its citizens. A systematic and dignified increase in the financial support for foster families and those running family-based children's homes should be a priority and may motivate potential candidates to take on these roles.

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