



**Salvați Copiii**  
Save the Children România

**Save the Children Romania (Salvati Copiii)**

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*Save the Children Romania is a public utility organization, the mission of which is to guarantee equal chance for all children, irrespective of the environment they come from, by using its own expertise, as well as through advocacy activities and lobbying the decision makers and mobilizing the leaders of civil society.*

*Save the Children has been promoting the rights of the child for 27 years, as per the provisions of the United Nations Convention on the Rights of the Child. More than 1,500,000 children have been included in educational, protection and medical-social assistance programs, stimulating their participation in actions aimed at promoting and acknowledging their rights.*

*Save the Children is a member of Save the Children, the largest global organization promoting the rights of children, comprising 30 members and conducting programs in more than 120 countries.*

**Submission**  
**29 June 2017**

for the Universal Periodic Review of the human rights situation in Romania

to the **Human Rights Council**  
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## **Executive Summary**

The submission of Save the Children Romania (SCR) for the 3<sup>rd</sup> cycle of Universal Periodical review of Romania covers 4 key areas for the implementation of the international human rights obligations of Romania. The content of this submission is based on SCR experience and research as well as on results of consultations with children and other stakeholders.

### **Human rights obligations in relation with children in Romania**

1. Equality & non-discrimination – Roma children, children from poor families or those living in rural areas, children with disabilities or those who identify as LGBT continue to be discriminated against in important sectors such as education or healthcare.
2. Budget and resources for Human Rights implementation - Taking into account that over half of Romania's children are at risk of poverty and social exclusion, the authorities are urged to adequately allocate sufficient resources for the three fields of the utmost importance for children and their rights (education, healthcare and welfare) in order to guarantee equal chances to all children.
3. Right to education – Faced with an increasing rate of school drop-out, a ever higher number of children out of school and an inadequate financing of public education, the Government must urgently take the necessary measures in order to guarantee access to free of charge and high quality education to all children.
4. Right to health – We are urging the Government to acknowledge the shortcomings and the inequity of the healthcare system and to take all necessary steps in order to protect the life and health of all Romanian children.

### **Implementation of Human Rights Obligations**

#### **A. Equality & non-discrimination**

5. Many of the children consulted by SCR singled out countless discriminatory practices: mentally challenged children are discriminated against both by their classmates and the teachers; there is no inclusion of children with disabilities; there are numerous instances of discrimination and segregation based on economical background, school results and behaviour (including classes segregated along such criteria).
6. Ethnical segregation in schools was banished in Romania, but both official documents and studies conducted by NGOs point to a persistence of the phenomenon. The official estimates point to the existence of only 33 schools where Roma pupils<sup>1</sup> are subject to segregation, but assessments of NGOs indicate a much higher incidence (out of the 112 localities covered in the most recent study<sup>2</sup>, in more than half segregation practices were identified).
7. Stigma and discrimination of children who identify as LGBT are widely spread in schools, in families and in communities. A report<sup>3</sup> shows that 8% of LGBT children say that they have been physically assaulted or humiliated in schools, while almost half of non-LGBT children (46,5%) say that they would be bothered to have a gay classmate. It is also worrisome that teachers make homophobic remarks during classes (64% of LGBT students say that they witnessed such comments during classes) without being sanctioned.
8. Given that discrimination continues to affect major categories of children in Romania it is very worrisome that the regulations that govern the functioning of the National Council for Combating Discrimination (NCCD) do not allow for the children's direct access to it. Furthermore, the jurisprudence of the Council shows that, even in proven cases of discrimination, the penalties are minor and they would not deter similar wrongdoings.
9. It is concerning that we witness a drop in tolerance even among children. In 2013<sup>4</sup> Save the Children Romania updated a study conducted in 2006<sup>5</sup>, whereby they assessed the level of tolerance or otherwise discrimination among schoolchildren. Quantification was based on the assumption of having a Roma, a physically disabled, a slightly mentally challenged, an HIV positive classmate/desk-mate or one that comes from residential care. The study showed a very low degree of tolerance for HIV infected people, with about half of the respondents saying they would not agree to a HIV positive classmate. For the remaining categories, 13% of the children responded that they would not agree to a slightly mentally challenged classmate, 10% would not like a physically disabled classmate and 3% disagree to a child coming from residential care. In comparison with the data obtained in 2006, there was a drop in tolerance in all the tested categories.

10. The enforcement of the legislation and public policies is difficult to monitor since, in key fields such as education or healthcare, there is not enough data segregated by the ethnical criterion that would allow for the analysis of the special situation of vulnerable children and of the impact of public policies and governmental programs targeting these groups.

#### **11. Recommendations**

- a) Providing the children's access to procedures before NCCD
- b) Collecting segregated data, to enable the identification of children's situation in respect of all the relevant dimensions and collecting segregated data in key fields (education, health) to reveal the situation of children in vulnerable group.
- c) Particularly in the case of the Roma minority, prioritizing those inclusion measures which focus on the children.
- d) Securing better monitoring of segregation in education, so that less obvious segregation forms are also eliminated (segregated classrooms in the same school).
- e) Introducing education for tolerance and diversity across the mandatory school curriculum.

#### **B. Budget and resources for Human Rights implementation**

12. More than half (51%) of the Romanian children are at risk of poverty or social exclusion<sup>6</sup>, and the poverty affects the children much more than the adults (13 percents difference). Almost one third of the Romanian children aged under 6 live in severe material deprivation<sup>7</sup>.
13. Data show that neither the participation of parents in the labour market, nor the social transfers succeed in protecting the children from the risk of poverty. Thus, 45% of the Romanian children living in households with high work intensity are at risk of poverty, while, after the social transfers, the decrease in risk of poverty among children is of only 4%.
14. The inadequacy of the social transfers is caused by both general allocation and targeting/coverage of the most vulnerable. Out of the seven programmes on which the social welfare system is based on, only 3 target the families and children and only one of this three takes into account the vulnerability of the beneficiaries (the family support allowance). Among the poorest quintile of the population, only 10.5% was covered by the family support allowance.<sup>8</sup>
15. The priority given to children in the allocation of public resources is far from satisfactory. The budget expenditure to the GDP for three key areas of the children's rights (education, welfare and healthcare)<sup>9</sup> altogether represents one of the lowest in the EU member states. Additionally, though as a percentage in the GDP the total public expenditure was only 27.57% lower in Romania compared to the European average, expenditures for the three key areas for children was 41% lower than the European average.
16. Between 2012 and 2014 Romania ranked last in the European Union in expenditure for education as percentage of the GDP<sup>10</sup>. Furthermore, differences between average spending per pupil among counties across Romania are significant (in some cases even double) and the most disadvantaged pupils from this perspective are those living in counties with a high level of poverty.<sup>11</sup>

#### **17. Recommendations:**

- a) Reflecting the relevant policies for the rights of the child in the course of the development, debate, adoption and execution of public budgets at all levels.
- b) Establishing a Ministry of European Funds, in order to make full use of European Funds to reduce child poverty and exclusion, as well as education inequalities.
- c) Supporting the county and local authorities in tackling child poverty, in particular by enhancing child rights budgeting at local level.
- d) Strengthening the welfare system to support children and families at risk of poverty.
- e) Revising the financing of the education, so that basic financing is truly sufficient to provide normal educational conditions for all children and supplementing the computation criteria, so as to reduce the disadvantages faced by various categories of vulnerable children.

#### **C. Right to education**

18. The number of children out of school is on the rise. In 2015, 282.017 children aged between 7 and 17 were out of school, compared to 272.121 in 2014 and 241.553 in 2013<sup>12</sup>.
19. As for participation in kindergarten education, there subsist a significant gap between children in the urban and rural areas. The gap tends to widen, from 6.5 p.p. in 2012/2013 school year to 15.9 p.p. in 2014/2015 (97.7 % urban and 81.8 % rural).<sup>13</sup> On breaking down participation by age, we can see

- that the biggest gap is in the group of children aged 3. The option of the parents in rural areas of not sending their children to kindergarten is caused, among other things, by various elements that make access difficult (such as remoteness from home, insufficient school buses, etc.).
20. Equally worrisome is the difference between the enrolment rate in pre-school education as reported by the authorities (see above) and the effective participation rate in this essential level of education (51% in 2014<sup>14</sup>). This gap is confirmed by SCR's experience in working with children from vulnerable groups. Thus, in the recent years, most of the children who benefit of our summer kindergarten programme (targeting, every year, about 700 children who are about to enter primary school but hadn't gone to kindergarten) had been enrolled in pre-school education without attending it. The reasons most frequently indicated by the family are the lack of financial resources and the impossibility to cover the associated costs (clothes, supplies, food and transport).
  21. The school drop-out is also on an alarming rise. In a single school year (2014/2015), 34.293 children dropped out from the primary and lower secondary education (8.402 more than the previous school year) and 27.225 dropped out the upper secondary education (3935 more than the previous school year).
  22. As to the efficiency of the national educational system, the results of international testing are worrisome. At the PISA testing of 2015, only 4.3% of the Romanian 15 years old students were among the high performers (scoring above level 5 in at least one of the 3 three PISA areas of testing), while 24.3% were among the low performers (scoring below level 2 in all 3 PISA areas of testing). PISA results also prove the impact of the socio-economical status on the education in Romania as well as the authorities' incapacity of developing and implementing support programmes aimed at guarantying to all children equal chances to a quality education. Thus, only 11.3% of the students from the most disadvantaged quarter managed to overcome their background and score among the first 25%<sup>15</sup>.
  23. The studies conducted by SCR<sup>16</sup> point out that verbal and physical violence is still present and even tolerated as a pedagogical method in school in Romania. In a survey conducted by Save the Children, 86% of the interviewed children declared that they were reprimanded when they made mistakes, teachers insulted 33% of the children and 7% declared that teachers beat them. Physical abuse occurs twice as high in the rural areas, in boys and especially in the Roma population.
  24. Another SCR study on bullying<sup>17</sup> shows concerning data about bullying in school. 73% of the children stated that they had witnessed bullying situations in their school, whereas 58% said that they had witnessed bullying situations in their class. The same study shows that any child who is somehow different from the others can become a target for bullying, especially those that look different (physical aspect emerged as one of the most common triggers of bullying), act differently or do not share the mainstream features (shyness, academic results, disability or special education needs, children diagnosed with mental disorders), the new comers to a group, children from a less favourable socio-economic environment, children of different ethnical background, etc.

## **25. Recommendations:**

- a) Promoting complementary interventions (educational and social) in the process of school integration/reintegration of children out of school.
- b) Training the teaching staff and providing the necessary specialists, in sufficient numbers, to ensure inclusive education (school counsellors, support professors, school psychologists).
- c) Identifying and implementing solutions which lead to the elimination of the hidden costs of education (including pre-school education) by providing gratuity or full compensation of transport, uniforms and school supplies, increase of the access to free school canteens, etc.
- d) Extending the "School after School" services and providing free access to these services for vulnerable children

## **D. Right to health**

26. Romania continues to show a very high rate of infant mortality (7.6 per thousand in 2015) and a high rate of mortality in children under 5 (1.9 per thousand in 2015)<sup>18</sup>.
27. As for newborn health, a study<sup>19</sup> that SCR conducted in partnership with the Ministry of Health shows that staff in maternity hospitals is insufficient, that some critical tests cannot be performed at

- night or during holidays and that logistics for good quality healthcare is insufficient or obsolete. The rate of C-section surgery is alarming (32%).
28. The phenomenon of abandoning newborn babies in maternity hospitals is still spread, with 977 newborn babies abandoned in 2015<sup>20</sup>. Most of the mothers are young women on their first baby, deprived of family support, but also the mothers of babies born with malformations. Professional staff that could help mitigating this phenomenon, or at least its repercussions, i.e. social workers, is not available in even as much as half of the maternities. Out of the 163 maternity hospitals included in the above mentioned SCR study, only 73 hired a social worker.
  29. With regard to mortality in children under 5, it is concerning that almost half of the death cases (48%) could have been avoided. In 2013, the main death causes in this age group (1-4 years old) were respiratory diseases (23.5%), followed by trauma lesions and external causes (21.4%)<sup>21</sup>.
  30. Equally worrisome in the last few years is the drop in the vaccine coverage rate for the vaccines included in the national coverage schedule, a trend that goes hand in hand with the occurrence of a large number of cases of diseases that can be prevented through vaccination. In 2015, 31% of the 12 months old were not completely vaccinated (as per the age standards), i.e. 1.2 % more than the previous year<sup>22</sup>
  31. Healthcare, including primary medical care, is far less accessible to children from rural areas. Official data shows that the medical network developed mainly in the urban areas, with 92.2% of all hospitals, 95.7% of the medical clinics, 85,9% of all independent general medicine practices, 71.2% of the pharmacies, 98.4% of the specialist centres, 95.9% of the medical laboratories.<sup>23</sup> This information is painting a landscape of unequal opportunities to healthcare for almost half of the children in Romania (42%)<sup>24</sup> living in rural areas.
  32. Medical care in schools is faced with countless challenges and coverage is unsatisfactory. Under this aspect, too, the situation is far worse in rural areas (in 2014, only 16 out 1.772 school medical units were in place in rural areas)<sup>25</sup>.
  33. Roma children are a group of extreme vulnerability from the point of view of their access to healthcare. The mortality rate for children under 10 years of age is three times as high in the Roma population<sup>26</sup> and their rate of access to prevention is far lower than the rate in the general population. In comparison with the general population, 4 times as many Roma children were never given a vaccine, whereas the number of Roma girls that were never given a vaccine is 11 times higher than in case of girls in the general population households.

#### **34. Recommendations:**

- a) Improving prenatal care by ongoing training of medical staff; establishing, particularly in vulnerable communities, community centres to gather together all relevant specialists (medical doctors, midwives, social workers and community nurses) and provide free services;
- b) Granting transport facilities for pregnant women and mothers from the rural area to access the specialized investigations available only in urban medical units.
- c) Improving the permanent access to medical investigations (including during night time and non-working days) in all the departments of gynaecology, obstetrics and paediatrics.
- d) Strengthening the network of Roma health mediators and ensuring the presence of social workers in all hospital units.
- e) Securing the necessary equipment for hospital units of gynaecology, obstetrics, neonatology and paediatrics.
- f) Developing and implementing efficient policies to improve vaccine coverage and permanently ensuring the vaccines stocks.
- g) Supporting the local authorities to develop health services in the rural area and financially stimulating the medical staff conducting their activity in this area.

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