



Results of the monitoring the Boarding School of St. Matthias the Apostle Foundation
in the village of Peria – A Non-Commercial Legal Entity of the Patriarchate of the
Orthodox Church of Georgia

Special Report

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Introduction

This report reflects the results of the monitoring conducted by the Public Defender's Office in the Boarding School of St. Matthias the Apostle Foundation (non-commercial legal entity) in the village of Peria on June 15, 2021. The purpose of the visit was to assess the protection of rights of children living in the facility, the care provided to them and their living environment. During the visit, representatives of the Public Defender's Office monitored the physical environment and documentation of the institution, interviewed members of the administration, caregivers and children.

According to the monitoring results, despite the physical arrangement of the living space and provision of necessary conditions for meeting the beneficiaries' basic needs, preparation for independent living and provision of private space remain significant challenges. Children's integration with the outside world and socialization are especially problematic, which significantly hinders the development of the skills necessary for independent living. In addition, the upbringing method of the facility is highly institutional and does not comply with the family environment tailored to the individual needs of the child. The need to arrange and systematize the documentation of the facility and its beneficiaries was also identified during the visit.

At the end of the visit, a concluding meeting was held between representatives of the Public Defender and the management of the boarding school, during which Public Defender's representatives informed the management about the problematic issues identified as a result of the monitoring and gave them relevant recommendations.

Monitoring methodology

The monitoring conducted by the Public Defender's Office was based on the guidelines developed by the UN High Commissioner for Human Rights,¹ such as obtaining credible and accurate information, confidentiality, credibility, impartiality, objectivity, sensitivity and professionalism, do not harm, respect the mandate, know the standards, exercise good judgment, seek consultation, accuracy and precision, integrity, visibility, etc.

The monitoring was conducted within the framework of the Organic Law of Georgia on the Public Defender of Georgia and was based on the Constitution of Georgia, United Nations Convention on the Rights of the

¹ United Nations High Commissioner for Human Rights, Training Manual on Human Rights Monitoring, Professional Training Series No. 7, Chapter 5, Basic Principles, Geneva, ISBN 92-1-154137-9.

Child, Code on the Rights of the Child,² Law of Georgia on Licensing of Educational Activities,³ Technical Regulation - Child Care Standards⁴ and other international and national legal acts.⁵

The monitoring methodology was developed in accordance with the standards established by international and national legislations.⁶ The monitoring was conducted through pre-designed, thematic, semi-structured questionnaires, which concerned the physical and material arrangement of the institution, food, sanitation, documentation, anti-violence mechanisms and upbringing process. Interviews with the staff and children were conducted through specially designed questionnaires.⁷

1. General information on the Boarding School of St. Matthias the Apostle Foundation in the village of Peria (non-commercial legal entity)

The Boarding School of St. Matthias the Apostle Foundation (non-commercial legal entity) in the village of Peria, based on the Law of Georgia on Licensing of Educational Activities and the Law of Georgia on Licences and Permits, represents an educational institution licensed in 2016, which has educational and upbringing components. The facility provides 24-hour service to minors living there as part of alternative state care.

During the visit of the Public Defender of Georgia to the facility, in particular, as of July 15, 2021, 101 minors were enrolled in the facility, including young children. Two of the children have the status of a person with disabilities and eight have the status of a person with special educational needs.

It is noteworthy that 11 minors have been living in the facility since 2020, although they were not enrolled in the facility at the time of the monitoring. The staff of the facility informed the social worker of the Agency for State Care about these beneficiaries shortly after the children were brought to the institution and asked for their enrollment, although the enrollment process has been delayed. According to the administration of the institution, these children have not been met by a social worker of the Agency for State Care and Assistance for the (Statutory) Victims of Human Trafficking after their placement in the institution.

² Code on the Rights of the Child, 2019, available at: <https://matsne.gov.ge/ka/document/view/4613854?publication=2> [last accessed: 12/07/2021].

³ Decree No. 1074 of the Government of Georgia on Licensing of Educational Activities, 2005, available at: <https://matsne.gov.ge/ka/document/view/3307127?publication=5#DOCUMENT:1> [last accessed: 12/07/2021].

⁴ Decree No. 66 of the Government of Georgia on Technical Regulation - Child Care Standards, 2014, available at: <https://matsne.gov.ge/ka/document/view/2198153?publication=5> [last accessed: 12/07/2021].

⁵ Decree No. 5361-II of the Government of Georgia on Licenses and Permits; Standards for the prevention and control of the spread of infection (COVID-19) caused by novel coronavirus (SARS-COV-2) for 24-hour child care facilities (including shelters for mothers and children).

⁶ Decree No. 66 of the Government of Georgia on Technical Regulation - Child Care Standards, 2014; Decree No. 5361-II of the Government of Georgia of 8 June 2016 on Licensing of Educational Activities; Decree No. 1775 of the Government of Georgia on Licenses and Permits of 26 June 2005; Standards for the prevention and control of the spread of infection (COVID-19) caused by novel coronavirus (SARS-COV-2) for 24-hour child care facilities (including shelters for mothers and children).

⁷ During the visit, the Public Defender's representatives met and talked individually to 13 children.

In addition, 10 adults of full age, former beneficiaries of the boarding school, live in the territory of the facility, both inside the building and in a building located in the yard, who could not fully support themselves while live independently and need a shelter while working or studying.

The institution has 15 groups of caregivers, 40 caregivers and 23 teachers, and the boarding school of the facility has a psychologist. It is also planned to hire a special teacher for children with special educational needs. In addition, the institution has 4 nurses and is served by 3 doctors, one of them is a doctor of the Batumi Referral Hospital.

Day schedule of the facility

Each day in the boarding school starts with breakfast at 8:30 am. At 9:30 children move to school, which is located inside the facility building, on the 3rd floor. After school and dinner, additional and individual lessons are offered to children, during which, they do homework with the help of caregivers. The next part of the day is spent on artistic or other activities. Internet and telephone are available for children from 5:00 pm to 11:00 pm. However, this restriction does not apply to senior groups and university entrants. Almost all the beneficiaries have phones. Both the day schedule and visual inspection make it clear that artistic activities are more common in the facility and less time is devoted to sports.

2. Information about the service and documentation of the facility

According to the United Nations Child Care Standards (2010), a minor and his or her family shall have comprehensive information about the alternative care and make a decision on the form of care based on it.⁸ A similar obligation is set out in Article 30 of the Code on the Rights of the Child, while the Technical Regulation – Child Care Standards⁹ clarifies that the minor and his/her legal representative shall know the purpose of the service, the opportunities offered within the service and the rights and responsibilities of the parties, in order to ensure that the issue of alternative care is resolved through informing juveniles and considering their individual needs. Article 1 of the Regulation further specifies the documentation to be produced by the alternative care provider.

During the visit, the monitoring group monitored the facility's internal regulations, licence, upbringing programme describing the upbringing method and agenda, log of entry/exit of children into/from the special facility, documentation certifying the qualifications of employees, log of measures taken in response to the expression of opinion by juveniles, log of measures taken in response to violence, log of accidents, beneficiaries' personal files, log of entry/exit of children into/from the facility, log of feedback and protest procedures.

⁸ Resolution adopted by the General Assembly, Guidelines for the Alternative Care of Children, Determination of the most appropriate form of care, 24 February 2010, available at: <https://bettercarenetwork.org/sites/default/files/2021-03/GuidelinesAlternativeCareofChildrenEnglish.pdf> [last accessed: 12/07/2021].

⁹ Decree No. 66 of the Government of Georgia on Technical Regulation - Child Care Standards, 2014, available at: <https://matsne.gov.ge/ka/document/view/2198153?publication=5> [last accessed: 12/07/2021].

Internal regulations of the Boarding School and beneficiaries' documentation

During the examination of the internal regulations of the facility within the monitoring process, special attention was paid to the rules and methods of managing socially unacceptable behaviors of the beneficiaries, feedback and protest procedures, protection of confidentiality, rules developed to prevent infectious diseases and rules of conduct for the staff, students and volunteers. Juveniles' personal files and relevant log books were also checked.

The examination of documentation made it clear that the boarding school keeps personal files of all the beneficiaries, although these files only include children's birth certificates, health documents, identity documents, if any, and contracts. The facility does not have children's individual development plans and the staff do not have information about this document. It is alarming that the individual development plans of the juveniles living in the boarding school are not kept in the territorial unit of the Agency for State Care either. During the interview with a social worker, it was found out that no individual development plan is produced for each child.

In addition, although the boarding school keeps a log of entry and temporary leave of children, the staff has not been informed by the Agency for State Care about who is the person authorized to take a child out of the facility. Therefore, it is up to the boarding school to decide who can take a child out of the facility, or enjoy the right to see him/her. Such an approach poses a risk to the safety of children, especially in terms of their protection from violence.

It should be noted that the internal regulations include a subsection "**Care and Control**" relating to the **rules and methods of managing socially unacceptable behaviors of the beneficiaries**, according to which, *"Socially unacceptable behaviors, emotional expressions of children shall be restricted only by means that do not degrade them."* However, this record is problematic and does not meet the standards of managing socially unacceptable behavior. The record is very general, focusing only on the restrictions, not indicating the specific rules or methods that should be used in the process. Furthermore, the document does not even emphasize that the restrictions shall not be violent.

The **feedback and protest procedures** are regulated by a subsection of the internal regulations - "**Protest and Feedback Procedures**". Nevertheless, the facility does not maintain feedback or protest log books. And, the protest and feedback procedure proposed by the internal regulations is problematic in several aspects. In particular, although the regulations contain a record that allows the staff and beneficiaries to express their opinions anonymously, the facility does not have an anonymous box or any other mechanism for expressing an opinion anonymously.

In addition, according to the record, complaints filed against the facility are reviewed only at the end of each month and no mechanism is provided for possible emergencies that may need to be resolved urgently. It should be noted that the internal regulations do not contain a record relating to the registration or review of complaints filed against the administration of the institution. And, the feedback and protest procedures and their consideration are mainly related to the priest's hour and letters left in the form of cards in the church. In

addition to this, the record in the internal regulations, according to which all reasonable cases of feedback shall be recorded by the administration, is vague and contains shortcomings related to interpretation.

Confidentiality is regulated by the subsection “**Protection of Confidentiality**”. It should be noted that according to the relevant record, a special room, specifically a psychologist's room, shall be allocated in the facility to protect the confidentiality of conversations. However, after examining the physical environment of the building and interviewing the administration revealed that this record is not implemented in practice, as there is no psychologist’s room in the building. The psychologist was only hired this year, although she is a staff member of the boarding school and not of the facility. Consequently, the psychologist’s role in relation to the involvement in the activities of the facility is not defined in detail.

It is noteworthy that in the context of the COVID-19 pandemic, no changes have been made to the internal regulations to ensure effective management of the pandemic.

The behavior and obligations of the employees are regulated by the chapter "**Rules of Conduct for the Employees, Volunteers, Students**". However, there are no records referring to students or volunteers in the internal regulations, while information about employees is scattered in different subsections and mostly concern the forms of response to violations, some of which need to be specified and clarified. For example, there is a record referring to the punishment of an employee in accordance with the Criminal Code, on the issuance of information without verbal or written consent of a 10-year-old beneficiary. However, it is unclear particularly which article of the Criminal Code is meant.

The internal regulations oblige employees to inform the administration about incidents of violence. According to the document, the institution has restrictions on clothing. In particular, according to the internal regulations, it is inadmissible to be dressed inappropriately, provocatively, or to express an opinion in an obscene/unacceptable way. However, the record does not specify what is meant by inappropriate, provocative clothes and thus it is open to interpretation.

According to the subsection on additional issues, children should be provided with opportunities to leave the facility and visit various places in the village. However, interviews with children revealed that the above is limited to seasonal vacations only. The socialization of children is not promoted, including in terms of communication with their peers living in the village.

Information in the behavior management subsection, which establishes certain restrictions as one of the strategies for managing the child’s behavior is also problematic. It is true that it is partly specified what this restriction means, for example, the restriction of a favorite activity, but the record also includes a general instruction that, in similar cases, entitles the caregiver to use other types of restrictions and it is not specified what is meant by other types of restrictions, which leaves the above open to interpretation.

3. Physical environment of the building

According to the United Nations child care standards, it is essential that the living environment of minors be safe and that necessary conditions be provided for their growth and development.¹⁰ In addition, according to the Technical Regulation - Child Care Standards, child care should be provided in an healthy environment (Standard No. 7), safety should be protected and sanitation conditions should be provided (Standard No. 15), beneficiary-oriented environment should be ensured (Standard No. 14) .

During the monitoring process, visual inspection of the building made it clear that the physical environment of the facility was well-maintained and repaired. However, it did not meet the accessibility criteria for persons with disabilities. Intern alia, the building has no elevator. Only an iron portable ramp is provided for wheelchair users to enter the facility. Consequently, the inner perimeter of the building is not adapted and cannot meet the needs of persons with disabilities.¹¹ It should be noted that the school of the facility is located on the 3rd floor of the facility building. In addition, the yard of the facility needs to be equipped with appropriate inventory for children's entertainment.

It should be noted that the building of the facility has sufficient natural and artificial lighting, as well as central heating system.¹² Space per child is sufficient and sanitary norms are maintained. Electricity, water supply, sewerage, artificial ventilation, fire safety and heating systems are functioning properly.

Internet is available in the entire building, although there is no telephone specifically intended for children enabling them to use it independently. When children who don't have their own telephone, need to call they have to apply to a caregiver or another employee of the institution, or another beneficiary who has a telephone.

In addition, no public information on the agencies working on children's rights according to the child care standards or their hotlines are publicly posted in the building..

Bedroom and Leisure Space

Children are distributed on the floors of the Boarding School according to gender and age. Each group with a maximum of 7 children has 2 bedrooms. The bedroom has bunk beds and interconnected beds. All the rooms have natural and artificial lighting. Bedrooms usually have one table, however, not all of them. There is a closet in the bedroom where children have their own shelves and hangers. It should also be noted that some bedrooms have a TV, a computer and a sink, though not all of them. Such a difference between bedrooms is not regulated and this difference is partly explained by the older age of children.

¹⁰ Resolution adopted by the General Assembly, Guidelines for the Alternative Care of Children, General conditions applying to all forms of formal alternative care arrangements, 24 February 2010, available at: <https://bettercarenetwork.org/sites/default/files/2021-03/GuidelinesAlternativeCareofChildrenEnglish.pdf> [last accessed: 12/07/2021].

¹¹ Although there are currently no wheelchair users or persons with other similar needs in the facility.

¹² No contactless thermometer was installed on the walls.

Each group has its own caregiver who sleeps in one of the bedrooms during her night shift, together with children. The above was explained by the desire of children, their age and the fact that they have difficulty in sleeping at night. It should be noted that during interviews with the administration of the institution, the same argument was named as the basis for placing a caregiver in the bedroom of even the 14-15-year-old minors. However, one of the minors said that the above did not depend on their desire.

The facility has 7 living rooms and on average, one shared leisure room for 2 groups, which is equipped with a TV, a computer and furniture. The building has a shared area for children, which includes spaces for various activities. The area includes a hall, a library and rooms for various music and art classes.¹³

Young children sleep in the room together with their caregiver. They also have a separate leisure room with a TV, furniture and toys. Generally, the bedroom furniture fits the age group of children. However, in a group of 4-5-year-old children, beneficiaries sleep in beds intended for infants. There are shared closets and shoe racks in the building, in which children of each floor store their shoes and clothes that they wear when they go outside. Toilets are not tailored to the needs of persons with disabilities.

Sanitary facilities and hygiene

There is one sanitary facility per group. Sanitary facilities are operational, technically strong and clean, supplied with hygiene items. Toothbrushes for low-age groups are kept in a closed position, in a special closet. Sanitary facilities are isolated and divided according to gender. The ventilation and flush systems are functioning properly. There is one shower, as well as one sink (cold/hot water) per 7 beneficiaries. However, the sanitary facilities are not adapted.

The stocks of hygiene products are replenished every month. However, if personal hygiene items are needed, children have to apply to a nurse in each individual case.

The building was clean during the monitoring. The entire perimeter of the facility is cleaned three times a day. The facility has special disinfectants and cleansers that are stored in properly arranged, isolated and ventilated storerooms. Disinfectants are mixed by a nurse. The conduct of disinfection is recorded only in the kitchen. Sanitizers were available in the kitchen and dining rooms during the monitoring.

3.1. Physical environment of the building and regulations related to the Covid-19 pandemic

Care facilities are required to adhere to the standards of the prevention and control of the spread of the infection (COVID-19) caused by novel coronavirus (SARS-COV-2),¹⁴ which were developed for 24-hour child care

¹³ Music band room, felt and mosaic work rooms, chess space, enamelling and tapestry work rooms.

¹⁴ Order No. 01-537/O of the Minister of Internally Displaced Persons from the Occupied Territories, Labour, Health and Social Affairs of Georgia of November 4, 2020 on the approval of Standards for the prevention and control of the spread of infection (COVID-19) caused by novel coronavirus (SARS-COV-2) for 24-hour child care facilities (including shelters for mothers and children). The document is available on the website:

<https://www.moh.gov.ge/uploads/publicinformation/2020/11/10/1d2549dc2c7ccfb2411d07ddc97eb1b7.pdf> [last accessed: 12/07/2021].

facilities (including shelters for mothers and children) based on the recommendations of the World Health Organization. These standards refer to sanitation procedures, social distancing, allocation of isolation rooms and testing periodicity.

The monitoring showed that the above regulations are not properly implemented in the facility. No thermal screening¹⁵ is provided when entering the facility, no social distancing stickers are available in children's spaces, no disinfecting doormats are placed in all the places needed, while the staff do not wear masks. Covid-19-related information is not visibly posted on appropriate boards, in common areas.

The institution has a stock of personal protective equipment, which is managed by the head of the economic unit. The facility is supplied with disinfectants by the Ministry of Health. Disinfection is carried out daily, with chloramine, both generally and locally. The staff of the institution undergo rapid testing for coronavirus once every 2 weeks. Interviews made it clear that there had been cases of infection among the facility staff and beneficiaries. It should be noted that the clothes and linen of the infected persons were washed separately.

One room is allocated for isolation, where 2 beds are placed. However the room does not have an independent entrance, is connected to the nurse's room and does not have an individual toilet.

4. Food

In a care facility, it is essential to provide adequate amounts of food to ensure the proper growth and development of children.¹⁶ The food provided should be healthy, nutritious and tailored to the beneficiaries' needs. In addition, it is necessary to take into account the dietary needs and age of the beneficiaries (Standard No. 6).

The visual inspection of the facility, interviews with the staff and examination of the documentation made it clear that the boarding school has a menu that is changed every 3 days. 2 pediatricians and a chief nurse are involved in compiling the menu, while the food-related accounts are produced electronically.¹⁷ Meals are served four times a day and one of them is a three-component dinner. A nurse keeps accounts of the suitability of products, dates and amounts of supply. Water safety is checked twice a year.

The staff employed in the food facility works in 2 shifts. The kitchen employs a total of 10 cooks, 2 assistants, person responsible for washing the dishes and a cleaner. 5 cooks, an assistant, a person responsible for washing the dishes and a kitchen cleaner are available in the facility every day. The kitchen has a hood, hot water,

¹⁵ The facility had only old thermal screening log book.

¹⁶ Resolution adopted by the General Assembly, Guidelines for the Alternative Care of Children, General conditions applying to all forms of formal alternative care arrangements, 24 February 2010, available at: <https://bettercarenetwork.org/sites/default/files/2021-03/GuidelinesAlternativeCareofChildrenEnglish.pdf> [last accessed: 12/07/2021].

¹⁷ The examination of the documentation made it clear that the dates of production and the number of beneficiaries were incorrectly indicated.

appliances and dishes. The rules of storage of small utensils and pots are observed. Chopping boards are kept separately, in a closed drawer.

The head of the economic unit is responsible for receiving and storing products. The facility also receives food in the form of donations, which is registered accordingly. Perishable food is resupplied in every 3 days and non-perishable food - once a month. One of the storerooms is connected directly to the kitchen and it has no independent entrance. The storeroom has two mesh windows and ventilation. However, products, including fruit and cereals, are stored on the floor. Products in refrigerators and freezers are kept separately, in accordance with the relevant rules.

The kitchen is cleaned several times a day. The room has a mesh window and ventilation. There is a staff dining area at the entrance to the kitchen. The kitchen staff were dressed according to the rules during the monitoring. In particular, they were wearing robes, gloves and hats.

It is forbidden to take food to the room and eat it later.¹⁸ It should also be noted that according to children, they fast if they wish so. However, on Wednesdays and Fridays, only fasting food is prepared for everyone. An individual menu was developed for one overweight juvenile on the basis of an endocrinologist's prescription.

The facility staff, kitchen staff, nurses and the manager of the economic unit were trained on nutrition issues by the National Food Agency. The facility was inspected by the Agency last year.

Food waste is collected in a closed container, which is then placed in a bin outside the facility after each meal. The bin is emptied by the relevant service every other day.

5. Health care

According to international standards and legislation of Georgia, one of the important responsibilities of a care institution is to protect the health of the beneficiaries and meet their needs in this regard.¹⁹ It is essential for the facility, where children grow up, to have a safe environment for health, to promote a healthy lifestyle, to provide immunization and routine preventive screening. In addition, it is important to inform beneficiaries about personal hygiene, sexual health education, various diseases and expected consequences of the use of harmful substances (Standard No. 9).²⁰

The monitoring revealed that the facility employs 4 nurses, one of whom is permanently present in the facility. The institution is served by 3 doctors.

¹⁸ One of the children said that they cannot eat even if they are hungry during intervals or late.

¹⁹ Resolution adopted by the General Assembly, Guidelines for the Alternative Care of Children, General conditions applying to all forms of formal alternative care arrangements, 24 February 2010, available at: <https://bettercarenetwork.org/sites/default/files/2021-03/GuidelinesAlternativeCareofChildrenEnglish.pdf> [last accessed: 12/07/2021].

²⁰ Decree No. 66 of the Government of Georgia of January 1, 2014 on Technical Regulation - Child Care Standards, available at: <https://matsne.gov.ge/ka/document/view/2198153?publication=5> [last accessed: 12/07/2021]

Nurses monitor the vaccination schedule of all children and their health status. The enrolled beneficiaries must have form No. IV-100/a, although if a child has no health certificate, a doctor examines him/her before being enrolled in the facility, assesses his/her health condition and only after this, the child can be enrolled.

Deficiencies were identified in terms of non-systematization of children's medical documentation. In particular, not all children's individual development cards contain child's health records, documentation of medical care provided and treatment prescribed. According to one of the nurses, these documents are kept with a doctor of the polyclinic where children are registered.²¹ Sometimes copies are brought by nurses and kept for internal use. Examination of the medical records kept in the facility revealed that some consultation sheets were quite old,²² or there were only the documentation of children who needed particular medical care, which was produced by a nurse on her own initiative, which indicates that the facility has no internal regulations in this regard. It is noteworthy that during interviews, the medical personnel specifically indicated that they did not have "unhealthy" children.²³

The nurse is responsible for purchasing and storing medicines. However, it should be noted negatively that the facility does not have internal regulations relating to the registration of medicines and the relevant log book is maintained by a nurse on her own initiative. Medicines are stored separately, in a nurse's room. Psychotropic drugs are stored in a sealed position. The rules for storing medicines that children take regularly in accordance with a doctor's prescription are observed in the facility. There was also family medical equipment on site. In addition, a nurse maintains a log book of accidents,²⁴ in which only one case was registered in 2021, while the last record in the log book of infectious diseases was made in 2014.

The log book of Covid patients is kept in a form provided by the Ministry of Health, electronically, and the data is sent to the Ministry. During the pandemic, children were screened for temperature on a daily basis and the relevant log book was produced. Currently, children are screened for temperature only when needed and no log book is produced. Both the staff and children are tested for the virus once every 2 weeks.

The facility has a contract with a pharmacy and two dental clinics. As for medical facilities, according to one of the nurses we interviewed, there are numerous medical facilities in the city and thus they have not had a problem with accessibility in this regard. It is welcome that children are vaccinated against the flu virus every year. However, according to the staff of the institution, routine preventive examination of children remains a challenge. Children are taken to a medical facility only in case of a specific need.

As for the beneficiaries' sexual health education and provision of information about the consequences of taking harmful substances, the staff of the institution noted that they had invited a gynecologist for the girls and an

²¹ Batumi Children's Polyclinic. According to a nurse, if necessary, a request is sent to a doctor and documentation is received in this manner.

²² According to a nurse, recent consultation documents are not available on site, but they exist.

²³ According to a nurse, "sick" children are not admitted, as other children of typical development will make fun of them and they will become victims of bullying. They also mentioned that they have 2 children with disabilities, although they have been there since their birth and therefore there has not been any problem in practice in this regard.

²⁴ It should be noted that measures taken in response to the incidents of violence are not recorded separately.

urologist for the boys, who talked to the children who wanted to get information about reproductive health. A priest talks to the minors about the consequences of the use of harmful substances.

It was found out during the monitoring that there was one case of child expulsion due to mental health problem and difficult behavior.²⁵ Determination of status was identified as a significant problem. In particular, the institution has two children with mental health problems, one with a diagnosis of hyperactivity²⁶ and the other with a behavioral disorder,²⁷ although the issue of granting status to them has not been on the agenda in any of the cases. The involvement of social workers in this regard is unsatisfactory.

Nurses and nannies have been trained on first aid, but they still avoid taking responsibility without doctors and call an ambulance, which takes a maximum of 15 minutes to arrive.

6. Protection from violence

International and domestic law sets standards for the protection of children from violence. It is essential that minors be protected from all forms of violence. In this regard, it is important for the care facility to be guided by legislation on violence against children, to have internal regulations relating to the protection of beneficiaries from violence, to keep written accounts of incidents of violence in the institution and actions taken in response (Standard No. 11). In addition, one of the most important issues is the provision of child rehabilitation and support services.

Protest and feedback mechanisms

There are no specific rules for protest or feedback in the facility. Children seek help from those who they perceive as their supporters. Most of the juveniles state that, if necessary, they seek assistance from a caregiver in the first place, and then from a priest, while the last one they apply to is the head of the institution, whom they trust the most. This was confirmed by the staff of the facility as well, who noted that there is no formally prescribed protection from violence or feedback procedure in the facility. In case of a problem, children go to a psychologist²⁸ or a priest. However, if the problem is particularly acute, children address the head of the institution. **The lack of communication with social workers is especially acute. Some of the beneficiaries do not even have information about who their social worker is.**

²⁵ The child had behavioral and eating disorders, harmed others and himself. They could not manage his behavior and used to call an ambulance to take the child to a psychiatric facility. He was injected several times (Diazepam 5 ml) in the facility, on the basis of a doctor's recommendation, and was also restrained several times by male caregivers.

²⁶ Tevdore Dolbaia – was consulted by a psychiatrist of children and adults and was diagnosed with hyperactivity syndrome. He was prescribed Atarax and Glisite – a nootropic drug.

²⁷ Giorgi Seidov - was consulted by Ana Chumburidze at Clinical Hospital No. 5. He was diagnosed with other behavioral disorder F91.8 and was prescribed Truxal and Carbamazepine.

²⁸ They have started to communicate with a psychologist, though rarely, after a position of a psychologist was created in the facility in February 2020.

Response to violence

It should be noted that the institution has several log books to record the cases of violence and measures taken in response. None of these log books, however, are filled in. Neither hotline numbers are posted in the building. During interviews, several children were able to name only the 112 Service. It should be noted that the person responsible for the referral procedure in the institution is a priest. In addition, the staff of the institution has not been trained by the State, including on issues of violence, since 2015.

The topic of protection from violence is discussed during the priest's hour. As one of the children mentioned, the hotline numbers were given to children at school and they were told to call the relevant service as soon as they noticed violence, but according to the girl, *"We all threw the numbers away and considered it a joke"*.

It is noteworthy that during interviews, children tried to pay special attention to the fact that there had not been violence in the institution and that the staff treated them well. In some cases, when the question asked by the Public Defender's representatives had a different content, the children still tried to talk about the non-violent environment in the facility. One of the beneficiaries noted that she did not need to know who she could ask for help in case of violence. According to her, in this case, she can talk to a supervisor, or call a social worker. As it turned out, the juvenile knew that by calling 112, she could only call an ambulance.

Although the children interviewed unequivocally denied any form of violence in the institution, they spoke relatively openly about the forms of punishment. For example, making them stand in the corner, or grounding them until they apologize to the caregiver, however, these methods are mainly used towards young children. According to the beneficiaries, caregivers used to shout at them and even spanked them at an early age.

It is important that when talking about violence, children necessarily point out that such a treatment is acceptable to them. One of them was even grateful for such treatment and said that punishment taught her a lesson. According to the same child, when getting angry, she starts shivering and the caregiver shouts at her for that.

It is noteworthy that there are 3 children with complex behavior in the facility, while 2 beneficiaries undergo medical treatment due to mental health problems. However, since 2015, the staff of the institution have not been trained on how to manage complex behavior, prevent aggravation of cases or how to respond to similar cases. According to the boarding school psychologist, her function is to get involved in and respond to critical situations, to work with people with special educational needs. However, no individual behavior management plan has been developed. One of the forms of responding to conflicts, according to the beneficiaries, is to consult a psychologist, which they do both voluntarily and on the initiative of the psychologist.

The monitoring results made it clear that the facility does not have a systematized or pre-defined action plan for addressing violence against children, providing information to minors, preventing or responding to cases in a timely or effective manner. This is particularly problematic given that the staff have not been trained on the relevant issues, while the beneficiaries are less informed about the agencies they can address if they face or

suspect violence. The issue is further exacerbated by the alarming lack of the visits paid by a social worker to the institution.

7. Right to education

Juveniles' access to preschool and general education is guaranteed by both the Convention on the Rights of the Child²⁹ and Georgian legislation.³⁰ This includes access to both preschool and formal and non-formal education. Of particular importance is the obligation of institutions providing alternative care under Article 30 of the Code on the Rights of the Child relating to the education of minors, including non-formal education. Article 8 of the Technical Regulation - Child Care Standards is also noteworthy in this regard, which attaches special importance to education for the development of skills necessary for the realization and development of the child, his /her preparation for independent living. The standard sets out the obligation to promote preschool, general, vocational and higher education, in terms of identifying children with special educational needs and providing appropriate services, encouraging non-formal education (Standard No. 8).

All the children of the facility receive education. Several of them are going to get higher education. According to the children, after school, they have additional lessons, during which they do their homework. Minors are assisted by caregivers in doing their homework.

It is problematic that the boarding school is located on the 3rd floor of the building. According to children, caregivers go to the school floor during breaks and pay attention to children's behavior. Representatives of the administration of the institution are also aware of the challenges related to the functioning of the school in the facility building. They explained during the meeting that it was planned to build a school in the near future.

It is welcome that the facility has a number of arts, crafts and music groups, where children can engage in after school. In particular, there are 17 types of so-called studios: handicraft, tapestry, piano, chess, choreography, etc. Children can engage in any of the activities they wish. It should be noted that all these activities are available in the facility, which is visited by the relevant teachers. Interviews with the administration made it clear that children can also engage in other activities outside the institution.³¹ However, according to the beneficiaries, this is not so common.

During distance learning because of the Covid pandemic, students mainly used Teams and messenger programmes. However, despite distance learning, they were sitting in the classrooms on the 3rd floor of the facility, while teachers and other children, who were with their parents, were engaged online. According to

²⁹ United Nations Convention on the Rights of the Child, 1994, Article 29, available at: <https://matsne.gov.ge/ka/document/view/1399901?publication=0>

³⁰ Code on the Rights of the Child, 2019, Articles: 10, 36, 50, 30.

³¹ This was also confirmed by the beneficiaries we interviewed. One of the them was involved in culinary classes outside the institution. There is also a band at school that works/plays at various facilities in Batumi. School-leavers go to private teachers outside the facility.

the children we interviewed, they have not encountered any technical problems relating to computer equipment, Internet or computer programmes.

Preparation for independent living

One of the most important goals of supporting minors, protecting their rights and meeting their needs is to strengthen and prepare them for independent living. This obligation is enshrined in both the United Nations Convention on the Rights of the Child³² and international child care standards.³³ Preparing a child for independent living is also considered by the Code on the Rights of the Child as one of the obligations and goals of alternative care.³⁴ The obligation of institutions in this regard is further defined by the Technical Regulation - Child Care Standards, which requires that a minor, within the framework of alternative care, be able to develop skills necessary for independent living, receive education and be involved in the process of devising plans after leaving the institution (Standard No. 13). Particular importance is given to the detailed recording of these issues in children's individual development plans and the effective monitoring of their implementation. In addition, it is necessary to inform children and advise them about leaving the state care and devising future plans.³⁵

Interviews with juveniles showed particularly strong lack of awareness of the form of state care, the stages of leaving the care and preparing for independent living. Although the psychologist said that caregivers worked to develop independent living skills in children and often talked to the 11th and 12th graders about choosing a profession, some of the children at the meeting said they could not imagine their life outside the institution. Children are not eager to leave the state care. Particular dependence on the facility is in part conditioned by the fact that a large percentage of children have been living in the boarding school since their infancy or early childhood. However, the above is especially conditioned by the environment that is largely isolated from the outside world, in particular, by the facts that the public school is located on one of the floors of the boarding school and that non-formal education and arts classes are available inside the institution. All this leads to the alienation of children from the outside world, which poses a special risk to their preparation for independent living.

Children are not socialized. In particular, interviews with them made it clear that they rarely leave the institution and do not know their peers living in the village. It is noteworthy that one of the beneficiaries said in an interview that at first he did not enjoy the fact that school was inside the facility building, but he then got used to it and now he does not want to go outside the boarding school at all. Another beneficiary also

³² United Nations Convention on the Rights of the Child, 1994, Preamble.

³³ Resolution adopted by the General Assembly, Guidelines for the Alternative Care of Children, Support for aftercare, 24 February 2010, available at: <https://bettercarenetwork.org/sites/default/files/2021-03/GuidelinesAlternativeCareofChildrenEnglish.pdf> [last accessed: 12/07/2021]

³⁴ Code on the Rights of the Child, 2019, Article 30.

³⁵ Decree No. 66 of the Government of Georgia of January 1, 2014 - Technical Regulation - Child Care Standards, Article 13, available at: <https://matsne.gov.ge/ka/document/view/2198153?publication=5> [last accessed: 12/07/2021]

mentioned that she had to leave the boarding school only to get medical services. The rest of the time she spends in the facility.

The fact that caregivers sleep in the beneficiaries' rooms, including in the rooms of adults aged 14-15 and older, is also a concerning issue. This negatively affects the development of independent living skills in children and violates the private space of both children and staff.

It is noteworthy that one of the employees recalled an occasion when the beneficiary returned to the facility because he likely found it difficult to live independently. The monitoring revealed that minors could not go to the city independently, without a caregiver. They have "pocket money" given by their parents.

Therefore, it is necessary to additionally work with minors, individually talk to them and ensure their involvement in the development of individual development plans, so that minors have full information on the forms of alternative care and realize the need for readiness for independent living. In addition, the role of caregivers and administration is particularly important in helping children develop skills needed for independent living. In this regard, the lack of visits of social workers of the Agency for State Care to the facility is alarming. This was indicated both by the employees of the institution and children, some of whom do not even know who their social worker is, while some of them only have met their social worker only in few cases. There was a case where the beneficiary said she was given the number of a social worker but she threw it away. This fact indicates alienation and distrust towards state social workers.

8. Results of interviews with children

One of the main directions of the visit to the boarding school was to interview beneficiaries living there. The interviews revealed that juveniles felt anxiety about the entry of the monitoring team into the facility.³⁶ Nevertheless, many beneficiaries expressed their desire to talk to the Public Defender's representatives. However, some of them were emotional at the beginning and seemed to have negative expectations about the interview. The juveniles, regardless of the content of questions asked by the Public Defender's representative, tried to emphasize that there was no violence in the facility.

Interviews with juveniles made it clear that most children were involved in non-formal education and various activities. However, children rarely leave the institution building. The children participating in the interviews showed special trust towards the priest and the head of the facility. However, it is problematic for children not to be informed about the state agencies they can apply to in case of violence.

The beneficiaries mentioned that the facility did not restrict their freedom of speech or expression. They are free to express their opinion on any issue. However, it should be noted that when talking about freedom of

³⁶ In this regard, it should be noted that the monitoring of the facility coincided with the events related to the Javakheti Ninotsminda St. Nino Orphanage, a non-commercial legal entity of the Georgian Patriarchate, and the public statements on alleged violence made by L.S., a former beneficiary of the assisted living facility of the village of Peria, which brought the mentioned institution in the spotlight of the media.

expression, one of the minors recalled the instruction of the head of the facility - *"It is better to talk here, rather than babble publicly."* Given that the institution does not have a feedback or protest mechanism or a response methodology, this issue remains somewhat beyond regulation.

It has been found that children have no information about the forms of violence and find it difficult to distinguish between upbringing method and violent treatment. In particular, one of them noted: *"It was good that they shouted at me, because it taught me a lesson..."* The child thought that he deserved to be shouted at, because *"no one is an angel"*. Children pointed out that they were made stand in the corner during eating, spanked or grounded only in childhood. One recalled an occasion when one of the caregivers spanked her in her childhood, though she said the caregiver did it for her own good. According to her, such a behavior is justified, *"she was nervous and spanked me"*.

Children did not know what an individual development plan was or what was written in it. It should be noted that minors do not know social workers and do not have confidence in them. According to the children we interviewed, if necessary, they voluntarily go and talk to the psychologist.

The beneficiaries said they were not obliged to attend prayers or religious services. The facility has no restrictions on clothing.³⁷

With all of this in mind, interviews with juveniles made it clear that children are, to some extent, disconnected from the outside world. Some of them cannot even imagine living outside the facility. It is also problematic to inform them of the forms of child abuse and the agencies that they can refer to in similar cases. Children do not know their own social workers, and even if they know, they usually do not trust them.

Conclusion

The visit to the Boarding School of St. Matthias the Apostle Foundation in the village of Peria once again showed the challenges of large-scale residential care facilities that the Public Defender's Office has been pointing to for years. Despite the well-maintained physical infrastructure of the facility, provision of material-basic conditions and nutritious food, the institutional arrangement of large facilities not only fails to fulfil, but also contradicts the obligation of raising a child in a family-like environment tailored to his/her individual needs. The rules of the facility, closed environment, arrangement of the school and various activities inside the boarding school building, make children unhealthily attached to the facility, hinder their socialization, development of skills necessary for independent living and readiness to leave the state care.

The children of the facility, to some extent, are deprived of personal space and the issue is exacerbated by the placement of caregivers in the juveniles' bedrooms, as well as their presence on the school floor, in the corridors, during breaks.

³⁷ Despite the fact that fasting depends on the desire of the children, Wednesdays and Fridays are mandatory for everyone.

Informing the children living in the facility of their rights, protection mechanisms, forms of violence and effective response mechanisms for cases of violence is problematic. Juveniles find it difficult to distinguish between the forms of violence and upbringing. There is also an urgent need to train the facility staff on difficult behavior management, child abuse and child protection referral procedures.

It is also problematic that some minors live in the facility without formal enrollment and this process is managed drastically ineffectively, with delays. In addition, the monitoring revealed that no social worker of the Agency for State Care and Assistance for the (Statutory) Victims of Human Trafficking has met with children after their placement in the facility. It should be noted that in general, the lack of visits of social workers of the State Care Agency to the institution is alarming. They do not have individual, effective, trust-based communication with children, which substantially hinders the protection of the rights of minors and consideration of their best interests.

The monitoring results once again showed the need for timely, effective, result-oriented measures to be taken by the State to facilitate the deinstitutionalisation process and to ensure that minors placed in state care are brought up in a family-like environment tailored to their individual needs.

It is especially important to expand services aimed at supporting and empowering children and their biological families and to increase the resources of such services. This can facilitate the process of reintegration of juveniles and prevent the removal of children from their biological families.

Recommendations

To the Agency for State Care and Assistance for the (Statutory) Victims of Human Trafficking (LEPL):

- Ensure regular visits of social workers to the facility, in order to assess the documentation of minors, their living environment, care provided to them, and to talk to children individually;
- Develop an individual development plan for each child in accordance with the Technical Regulation – Child Care Standards, according to the periodicity specified in the Regulation and with the participation of persons responsible for their upbringing;
- Ensure that individual development plans of children are kept both in the territorial unit of the Agency for State Care and in the boarding school, so that they are accessible to children themselves;
- Inform the facility administration about persons authorized to see and take children out of the facility and provide the relevant documentation to the institution;
- Inform minors about the process of leaving the facility and promote the development of skills for independent living and, in this regard, evaluate the activities carried out by the institution;
- Provide timely assessment of juveniles living in the institution without the relevant enrollment decision and facilitate the process of their formal placement in state care if this need arises.

To the Boarding School of St. Matthias the Apostle Foundation:

- Sort the documentation of the institution in accordance with the Technical Regulation - Child Care Standards. Inter alia, produce all log books provided for in the mentioned Regulations;
- Develop an effective anonymous feedback and protest mechanism and effective feedback response system;
- Add the work performed in the care unit of the boarding school and its volume to the job description of the facility's psychologist and describe the above in detail. Allocate a room in the building where a psychologist will be able to interview children individually;
- Provide the children living in the institution with a telephone, which they will be able to use independently for 24 hours a day;
- Separate bedrooms for caregivers and beneficiaries, except infants and young children, as needed;
- Arrange the yard of the institution and equip it with the necessary equipment for leisure activities;
- Post hotline numbers in an accessible place of the building, including the numbers of the Emergency Response Center, LEPL Agency for State Care and Assistance for the (Statutory) Victims of Human Trafficking and Public Defender's Office;
- Separate school from the building of boarding school;
- Plan effective activities that ensure the socialization of minors and their involvement in informal, sports and other activities in accordance with their interests and desires, and in particular the development of their skills for independent living.