

Deinstitutionalization of Social Services for Children in Bulgaria in the Focus of Regional Development Policy

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Abstract

The aim of the study is to reveal territorial differences in the localization of social services for children and how the regional policy implemented can contribute to improving the process of deinstitutionalization. The research tasks in this article are related to the analysis of the legal framework and adopted strategic documents in the field of social services, as well as their compliance with the strategies and plans for regional development. It is also necessary to study the concentration of social services by area to provide access and address the specific territorial needs of providing social services for children. Also make proposals for integrating social policy objectives in the field of deinstitutionalization by establishing a common strategic framework for the implementation of regional development policy.

The research tasks for this purpose are as follows:

- To analyze the normative bases of the adopted strategic documents in the

field of social services, as well as their compliance with the strategies and plans for regional development;

- To explore the concentration of social services by area, in order to ensure access, and satisfaction of, the specific territorial needs of the provision of social services for children;
- To make proposals to integrate social policy objectives into the field of deinstitutionalization, setting out a common strategic framework for implementing regional development policy.

The focus of the study is limited to the provision of social services for children and the administrative-territorial districts in Bulgaria, where child-care homes (0-3 years old) are still functioning, and the study period is limited to the last 5 years.

It is clear from the analysis that services are rarely envisaged for small settlements. Concentration is in large cities, mainly from accommodation or public support centers.

Keywords: Regional Development, Strategy, Social Services

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Introduction

In 2010 Bulgaria started the process of de-institutionalization of social services, which puts new requirements in the social sphere and requires a new approach to planning. Current circumstances and new practical experience in implementing the deinstitutionalization process have provoked research integration for theoretical investigation and analysis, directly linked to the provision of social services for children. The scientific studies in this area are weak, empirical evidence is fragmented, and practical analyzes are insufficient.

The article contains research and studies conducted by the authors, linked to the problems and risks that can be encountered during the process of de-institutionalization of social services for children in regional aspect.

The role and function of the social activities are linked to the general process of regional development and highlight the need for a new approach to their understanding, leading to a mixed policy of economic and social progress. The sustainability and growth of one country are related to regional development and governance. The paper reviews the authors' studies related to the problems and risks in the process of de-institutionalization of social services for children in a regional aspect.

Social support in Bulgaria is implemented in two forms: benefits and services in municipalities. It is linked to the address registration and is regulated by the Local Self-Government and Local Administration Act of 1991. The regional and municipal strategies take into account the needs for social services at the municipal level, in particular, what kind of social services are needed, what their quality is and which target groups should be covered. Conceptual links have been

identified in the field of regional development and social services for children, outlining the joint field of the two interdisciplinary areas of science.

The planning of each activity of the de-institutionalizing of social services should include representatives from all areas related to children's lives meticulously researched locally. The article is focused on the current deinstitutionalization process related to childcare in Bulgaria on a territorial basis, examining its deficits and attempting to highlight the opportunities for improving the process and offering guidelines for improving the provided social services and benefits.

The study is limited to the provision of social services for children and to the administrative-territorial areas where there are still homes for medical and social care for children, aged 0 to 3 years, while the study period is limited within the last 5 years.

Both regional and social policies are closely linked because they are an important part of the socio-economic development of each country. Social policy is a function of the power that organizes and governs society. Regional development is a process, and regional policy offers its impact instruments to reduce inter-regional and intra-regional disparities in economic, social and territorial terms, to provide conditions for accelerated economic growth and a high level of employment, as well as to ensure the development of territorial cooperation. 'The more reformist the public authority is, the more expanding is the field of social policy.

Literature review

The timeliness of the process of deinstitutionalization of social services for children raises the need for a thorough study of published theoretical and applied research

¹ In accordance with the objectives of the state policy for regional development established by the Regional Development Act, prom. SG, No. 50 of 30 May 2008, amended. am. SG. Issue 58 of July 18, 2017.

in order to improve the quality of the process from a managerial point of view and to achieve higher efficiency. The problems in the scientific literature are analyzed mainly from a pedagogical or psychological point of view, so it is important to consider deinstitutionalization as a complex and specific process that leads to changes in the policies pursued by different sectors. This article attempts to explore the interaction of regional development and deinstitutionalization processes in the context of improving regional policy and the regional dimension of modern social policy in Bulgaria.

Both regional and social policies are closely linked because they are an important part of the socio-economic development of each country. The main objective of the Europe 2020 strategy is "more jobs and better living standards". Social policy is a function of power that organizes and governs society. The more reformist the public authority is, the more social policy field is expanded. In general, the social policy is a set of regulatory impacts of the state (the district, the municipality) in order to ensure equality and justice within the economic capacity of society in meeting the basic vital needs of the people (Hristov, 2005, p. 5).

The mutual interdependence of regional development and social policy can be found in the financing of the deinstitutionalization of social services, where there is a coordinated use of funds from different operational programs and funds - OPHRD, the Regional Development OP and the Rural Development Program. That way, investment in infrastructure (funded by the European Regional Development Fund) and in workforce development - training for the staff to be employed in new services (funded by the European Social Fund) are combined (Terziev, 2015, p 130).

The modern state takes on social functions that seek to regulate imbalances and protect people at risk. Deinstitutionalization in Bulgaria

begins at a managerial level and is related to the practice, as some authors summarize. The direction of its conduct is from top to bottom and outwards (Mianatkova, 2018, p.24). The planning and construction of each separate administrative unit must correspond to the structural boundaries, requirements, parameters and specificities characteristic of the socio-economic processes themselves (Dokova, 2012, p. 35).

Social policy is at the heart of the development and governance of each country. The basis on which the regulatory framework is being developed and the existing and relevant aspects of the area under consideration are a number of international documents, among which the United Nations Convention on Human Rights and United Nations Convention on Children Rights that Bulgaria have ratified. Social policy must be in line with the reality and conditions of the country in which it is to apply, and therefore it must necessarily be adapted from the history and the foreign experience (Mianatkova, 2018, p.19).

Social policy is a set of management activities undertaken by social institutions to regulate the relationships between social groups and individuals in terms of meeting their basic vital interests, reducing social inequality and achieving social security for all citizens. It is a policy of social development, management of the whole living conditions, not just helping the fallen citizens in need (Angelova, 2008, p.81). In general terms, the nature of social services is limited to helping a certain group of people to lead a life of their own (Zaykarova, 2017, p. 119).

Regional development and deinstitutionalization

Bulgaria is divided into municipalities and districts which are administrative-territorial units and their bodies of self-government are established by law.

The area is defined as “an administrative-territorial unit which is entrusted with the management of regional policy, the implementation of state governance at regional level, ensuring the correspondence between national and local interests”.² The municipality as an administrative-territorial unit is the level at which self-management is ensured, guaranteeing the right of municipal property, own budget, as well as determination of the respective governing bodies. For better regional governance, regions that are not regulated as administrative-territorial units can also be defined. The exercise of the control, powers and competencies of the local and regional authorities in the country come from those of the state.

Regional policy aims to achieve balanced development, sustainable growth and social well-being. Regional development is a purposeful activity to achieve the objectives of regional policy, by combining all the factors specific to the territory, either to profit from or to limit a phenomenon. The role of regional development is essential to the prosperity of a nation and is practically linked to the social activities. The main objective of the implemented social policy is to improve the social dialogue between the state and the persons, the social integration and the development of deinstitutionalization.

Regional policy is “materialized” through a system of regulated normative documents and instruments, aimed at the realization of the regional development objectives in the administrative and territorial units in compliance with the Regional Development Act. Regional development is a conscious

activity aiming at homogeneity in the economic and social upsurge of a given territory as well as the growth of prosperity for society through coordinated processes. In order to achieve an effective regional policy, account must be taken of all factors relating to technical, production and social infrastructure, resource and market supply, geographic and urbanization features, administrative capacity.

Regional development combines interdisciplinary scientific and expert competence for management and control at the national, regional and local level. According to the Constitution of the Republic of Bulgaria, “the State determine conditions conducive to the balanced development of the various regions of the country and shall assist the territorial authorities and activities through its fiscal, credit and investment policy”.³

The connection between regional development and social policy is found in the Regional Development Act⁴ and the adopted National Regional Development Strategy 2012-2022.⁵ There is clearly emphasized the necessity of convergence in its three aspects - economic, social and territorial cohesion, at three levels - with the regions of the EU, national - between the Bulgarian regions and internally - between the municipalities in the different regions.

Social rapprochement is a direct result of the economic and is expressed as a process of raising the standard of living, through employment, income, etc., as well as improving the quality of education, health, culture, and above all provided access to social services. The striving to reduce social disparities and the quality of life at European, national

² Art. 142 of CONSTITUTION OF THE REPUBLIC OF BULGARIA, in force from 13.07.1991, amend. SG. Issue 12 of February 6, 2007

³ Art. 20 of the CONSTITUTION OF THE REPUBLIC OF BULGARIA, in force from 13.07.1991, amend. SG. Issue 12 of February 6, 2007

⁴ Law on Regional Development, in force since 31.08.2008, supplemented. SG. Issue 13 of 7 February 2017

⁵ National Strategy for Regional Development of the Republic of Bulgaria for the period 2012-2022, Ministry of Regional Development and Public Works, Sofia, 2012

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and regional level lies in the development strategies of each area and municipality.

The district governor organized the drafting of a strategy for the development of the social services of the area with a 5-year duration as a result of the analysis of the needs for social services in each municipality on the territory of the district. The strategy is comprised of representatives from any community in the area, the Regional Social Assistance Directorate, the Regional Education Inspectorate, the Regional Health Inspection, the Regional Employment Service, non-profit legal entities working in the field of social services and other interested bodies, persons and organizations concerned with the development of social services.

The specialized legislation clearly defines the responsibilities and powers of the state and local government authorities responsible for the implementation and control of social assistance. Legislation regulates the mechanisms for the management of social assistance, the conditions and order of granting of licenses for social services.

The Law on Social Assistance⁶ establishes the legal framework of the common social assistance policy. There are two main forms of social assistance – social assistance and social services. Social services are a guarantee of social security, and their diverse forms should be seen as complementary within the process of development and carried out in a way that does not affect the human dignity of citizens. Childcare services are provided according to the best interests and wishes of the child, parents, guardian or

trustee, or caregivers in accordance with the Child Protection Act.⁷

Social services are divided into two main groups (social services provided in the community and resident-type social services) with certain specific types included in them, in accordance with the Regulations on the Application of the Law on Social Assistance⁸. Social services in specialized institutions are provided only after exhaustion of the opportunities for community services. The creation and development of social services in the community as the core of the deinstitutionalization of services is realized in accordance with the adopted Regional and Municipal Social Services Strategies.

The deinstitutionalization of social and health services for children is a sign of development in all European countries. Our country faces the challenge of overcoming the understanding that the state is better able to take care of children than their families. Furthermore, the need should be realized to reform the institutional care system. To this end, the National Strategy “Vision for Deinstitutionalization of Children in the Republic of Bulgaria”⁹ and an Action Plan¹⁰ for its implementation are being developed and adopted. Thus, a qualitative change in the system of care for children and their families, aimed at social inclusion and participation of all children, is taking place through the replacement of institutional care with community care, family or close family environment.

The vision has a clear focus and is a political commitment on the part of the

⁶ Law on Social Assistance, Prom., SG, no. 56 of 19.05.1998, amend. and dop. SG. No. 89 of 7 November 2017

⁷ Child Protection Act, prom. SG. No. 48 of June 13, 2000, am. am. SG. issue 17 of 23 February 2018

⁸ Rules on the Application of the Law on Social Assistance, Prom. SG. issue 133 of November 11, 1998, am. and dop. SG. No. 89 of 7 November 2017

⁹ National Strategy “Vision for Deinstitutionalization of Children in the Republic of Bulgaria”, adopted by Protocol No. 8.2 of the Ministerial Council of 24.02.2010.

¹⁰ Action Plan for Implementing the National Strategy “Vision for Deinstitutionalization of Children in Bulgaria” - Adopted by the Ministerial Council on 24 November 2010

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government. Implementation includes various stakeholders, including the European Union, non-governmental organizations, professional and academic communities and many regional and municipal authorities. The mayor of the municipality manages the social services on the territory of the respective municipality, which are delegated by the state activities and local activities. He is responsible for compliance with the criteria and the standards for provision of social services and acts as employer of the managers of these services.

Regional strategies and development plans provide a forecast of the need for services that can be used to create infrastructure and

prepare the workforce for community-based services to prevent children from 0 to 3 years old from entering the homes for medical and social care. Plans and strategies aim at controlling the deinstitutionalization process. The idea is to build a wide network of quality services that are targeted at families. Such services are family-consulting centers, parents' centers, early integration centers and others.

According to the data, the number and capacity of the services have increased every year and as of 31 December 2017 there are 612 social services for children with a total capacity of 13,624 seats.

Table 1. Social services for children by age

№	Social services for children	2015 year		2016 year		2017 year	
		Total number	Total capacity	Total number	Total capacity	Total number	Total capacity
1	Center for Community Support	111	4597	121	4887	124	4950
2	Children's street work center on the street	15	291	15	301	19	359
3	Crisis Centers for Children	16	166	17	176	18	196
4	Mother and Baby Unit	9	67	13	79	12	79
5	Family type accommodation for children / young people without disabilities	131	1564	146	1780	145	1771
6	Family type accommodation centers for children / young people with disabilities	122	1655	130	1753	129	1739
7	Family type accommodation centers for children / young people need permanent medical attention	-	-	8	64	8	64
8	Day Care Center for Children / Young People with Disabilities	1	944	3	1981	74	2015
9	Day Care Center for Children / Young People with Disabilities with weekly care	-	-	5	113	6	133
10	Day Care Center for Disabled Children and Adults	9	411	13	531	11	477
11	Transitional housing for children	17	148	17	146	17	138
12	Centers for social integration and rehabilitation	40	1472	46	1621	49	1703

According to data from the National Institute of Statistics, Bulgaria

Social services in the community for children delegated by the state are varied and at this stage the largest number of Family Type Centers for Children / Young People with Disabilities 145, the capacity of these centers is currently 1,771. Family-type accommodation centers for disabled children/ young people are the next largest service.

The public support centers have the largest capacity of 4950 seats.

As evidenced by the data, there is a cluster of services, the Center for Public Support, the Family Type Center, and the Centers for Social Rehabilitation and Integration. That is why we analyzed the data from the strategic documents for planning of social

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services by area. We have investigated the areas where there are still homes for medical and social care for children, where children from 0 to 3 years of age are mainly raised. Some institutions feed other institutions, leading to the removal of children from 0 to 3 years of age. It is further important to see what services are available there. Placement in resident-type social services is the last possible stage in the deinstitutionalization of a child by an institution. A child is directed to a resident type service only if it is impossible to accommodate in a family.

The main services to be targeted by specialized institutions are family-type accommodation centers, residential centers, the Mother and Baby Unit, resident type, and community-based services such as Day Care Centers, public support and naturally the foster care service. Family-type accommodation centers are a form of social service to meet the daily needs of no more than 15 children. They are provided with the opportunity to live in a family-friendly environment, with the children accommodated in them enjoying the services of a social worker, a psychologist, speech therapist, physiotherapist or other specialist if necessary.

Day care centers for children with disabilities are provided with the opportunity to provide full day care services to children with food, health, education, rehabilitation or other everyday needs, as well as the possibility of organizing their free time and personal contacts. In the centers for social rehabilitation and integration, complex services related to rehabilitation, education, vocational training and orientation, social legal consultations as well as preparation of individual programs for social inclusion are provided.

Health mediators support the population of vulnerable and minority groups in the area of social care and healthcare. In 2007,

thanks to the efforts of the Ministry of Health, the Ministry of Labor and Social Policy, the Directorate of Ethnic and Demographic Issues at the Council of Ministers and, last but not least, the non-governmental organizations working in this field started the development of the profession of "health mediator". The goal is active social work with people at risk and health education to overcome cultural differences and improve communication between vulnerable groups and institutions as well as overcoming the existing discrimination. In 2013, there were 130 health mediators paid by the state budget in about 70 municipalities.

As of 31 December 2017 there are 16 HMSCCs, where children from 0 to 3 years of age are institutionally managed by the Ministry of Health. These homes must cease their activities by 2020. On the basis of analyzed and systematized data from the Regional Strategies for the Development of Social Services in the Areas with Existing HMSCC, the following conclusions can be made in the following areas:

For Blagoevgrad region – until the beginning of 2016 7 services directly linked to children up to 3 years of age are provided. They are mainly concentrated in Blagoevgrad, Gotse Delchev and Yakoruda, and by 2020. The development of the services reaching 11 in number in several of the big settlements in the area is envisaged. COS of 2 pcs. with capacity of 60 seats increased to 9 pcs. with 165 places, non-disabled children/young people are increased from 2 to 6, with their capacity increasing from 30 to 81 places, and the disability-related disability from 5 to 7 in the case of children with disabilities. The number and capacity of DDCs is maintained by 2020. CSRI will grow from four to nine, and foster care will increase with a larger number of foster families from 15 in 2015 to 70 to 2020. The role of health mediators is

represented in the Blagoevgrad region, where there will be seven jobs by 2020. Their role so far has been underestimated, but they work with the most marginalized people in the local communities, face extreme cases and contribute to successful initiatives. Thanks to mediators' approaches, their lives and health are improved. By 2020 three new services will be launched: Children's Center on the Street (2 - Satovcha and Yakoruda), Crisis Centers for Children (4 in Gotse Delchev, Petrich and Satovcha) and DDCs Weekly Care Center in Yakoruda.

For Burgas Region – HMSC on the territory of the Burgas District should be closed down by 2020. At the beginning of 2016, on the territory of Burgas District provide many services related to children with a capacity of more than 945 seats. In Burgas, Karnobat, Nessebar, Pomorie, Sozopol and Sredets there are 6 CBOs with a capacity of 248 seats, which is to increase to 7 CSOs, with 289 seats. Mother and baby unit in Burgas will be opened, as well as another crisis center to complement the existing ones in Burgas and Sredets. Existing CCNT with disabilities and without disabilities, as well as those with a need for constant medical care, retain their number and capacity by 2020. Day care center for weekly carers as well as Center for work with children on the street in Burgas also remain unchanged. The number and capacity of Centers for Social Integration and Rehabilitation from Burgas, Karnobat, Nessebar and Chernomorets increased from 4 persons. (109 seats) at 7pcs. (149 places). DSPs increase from 4 to 6, and a new one is revealed in Pomorie. The foster care is strongly supported in the Burgas region, with foster families expected to reach 52 from 2015 to 84 in 2020. And here is the role of the enemies, which from the three will reach 17 in 2020.

For Vidin Region – by the end of 2015 in the region of Vidin there were 10 services, which corresponds directly to the target group of the survey. Existing services are concentrated in the towns of Vidin, Balchik and Novo Selo, which is extremely insufficient for the needs of the population. There is a planned opening of several different types of centers and other settlements in the area, which will improve the situation. The HMSCC in Vidin with a capacity of 80 seats will be closed by 2020. The number and capacity of the COS by three will be the most significant at eight, with newly opened units in the towns of Belogradchik, Vidin, Gramada, Novo Selo, Dimovo, Makresh and Chuprene. CCNT for children/youth without disabilities from 3pcs. in Novo Selo will develop up to eight units with a capacity of 105 seats in Belogradchik, Dimovo, Makresh and Novo Selo. The existing Children's Street Center, the Crisis Center for Children, the Center for Social Integration and Rehabilitation in Vidin and the Family-type Center for Children/Young People with Disabilities in Belogradchik will retain its number and capacity for accommodation. By 2020 three CCNT will be opened for children/youngsters in need of permanent medical care in Vidin with a total capacity of 45 places and DDCs of 2 in Vidin will be 4 in 2020. with headquarters Vidin, Gramada, Dimovo. Mediator activity is not planned to develop further, while foster care is growing, and foster families of 73 in 2015 will reach 120 in 2020.

For Vratsa Region – there is not a great variety of social services for children. The existing ones are further developed and the HMSCC will close doors. *The Early Childhood Development project* provides services for children from 0 to 3 years old and their parents, related to the formation and development of parenting skills, early intervention of

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disabilities through the establishment of an Early Childhood Intervention Center disability, family counseling and support, health counseling for children, and a reduction in the crèche fee (in whole or in part) to encourage children to fall into crèches and hence in the education system. The number and capacity of the CCNT is increasing as well as the populated areas where they are positioned. The most significant is the increase of the COS by two with a capacity of 100 seats in Vratsa and Roman in eight units with a capacity of 223 seats in Borovan, Byala Slatina, Vratsa, Kozloduy, Mezdra, Oryahovo, Roman and Hayredin. Social Integration and Rehabilitation Centers and Day Care Centers for Children with Disabilities have doubled, and the Mother and Baby Unit retains its capacity of six seats in Vratsa. Foster care has developed from 93 to 168 foster families in 2020, and the number of mediators is maintained by two.

For Dobrich region – Services for children till 2016 on the territory of the district are only 7-8, again being connected with the COS, the CCNT, the NSSR, the DSSD and the Foster Care. The services are centralized in the district town, with a few exceptions, Kavarna and Shabla has a COS. Planned services by 2020 will cover more settlements in the area, which will help to better meet the needs of the needy. The *Together We Can Continue* Social inclusion project, the Social Services Complex for Children from 0 to 7 Years and Their Families and the Center for Personal Development Development, different from the services that have been considered so far, will be developed on the territory of Dobrich Region. HMSCCs with a capacity of 20 seats will be closed, while NSSR and CCNT for children/young people with disabilities will increase in number and capacity. There will be a Children's Street Center, Crisis Centers

for Children and Community Centers. Foster care and mediators will develop as services.

For Kardzhali Region – There are a few services for children scattered throughout the region. The development of services by 2020 is noticeable mainly in the district town. COS and CCNT for children /young people without disabilities increase their number and capacity, while the CCNT for Disabled Children / Young People and DSSD retain their number. Crisis Centers for Children, CCNT of children/young people in need of permanent medical care, CSRI and Mother and Baby Unit in Kardzhali are revealed. The number of foster families and mediators are planning to increase by 2020, and HMSCC with a capacity of 85 seats to close doors. The provision of integrated social services for early childhood prevention and active social inclusion as well as Health and Counseling Center for Maternal and Child Health are the services that differ from the ones currently considered and are currently available in the territory of Kardzhali district.

For Pleven Region – The existing services for children from the priority group of research are mainly in the district town. The number of services is not large and there are no drastic changes planned to number and capacity of services. One of the largest HMSCC with a capacity of 150 seats will be closed. Well-developed foster care service and 102 foster families will increase to 168 by 2020. COS of 6 in 2015. with a capacity of 155 seats will develop up to 9 items. with a capacity of 205 seats in Belene, Cherven Bryag, Dolna Mitropolia, Petarnitsa, Gulyantsi, Knezha, Levski, Nikopol and Pleven. The CCNT for children / young people without disabilities and NSSR will increase their number and capacity, and Centers for Children, the Center for Disabled Children/Children with Disabilities and children's/youth center for weekly care is preserved. Services like Mother and Baby

Unit in Pleven with capacity of 8 seats and Levski DSSD with capacity of 20 seats will be revealed. Pleven has a Regional Center for Early Intervention of Disabilities and operates a project to provide integrated social services for children and parents from vulnerable groups.

For Sliven Region – has the widest variety of social services for children than the ones considered so far. The area is based on development of COS and 1 in the city of Sliven with a capacity of 64 seats, in 2020. There will be 4pcs. in Sliven, Nova Zagora, Kotel, Tvarditsa with a total capacity of 210 seats. CSF for children/young people with and without disabilities, NSSR and DSSD will increase the number, capacity and settlements in which they are positioned. Center for Street Children, “Mother and Baby” and community centers will retain the number and capacity to 2020. Newly services Crisis center for children, CCNT for children / young people need constant medical care center for replacement care Center for Maternal and Child Health, Family Advisory Center / Service Complex / are the new services available for the area mainly in the town of Sliven. The foster care will also be encouraged by 80 foster families by 2015. Will seek to increase to 140 for the area, and mediators will keep their number at 11. HMSCC is not intended to close.

For Stara Zagora Region – there are two HMSCCs that will cease to operate until 2020. The area has a wide range of existing and planned services for children. CSO and CCNT for children / young people without disabilities will significantly increase their capacity and number. Crisis Centers for children and Mother and Baby Unit preserve their number and capacity, and Inter-Country House “World without Borders”, Social Inclusion Services and Early Childhood Development Center will

keep the number and increase their capacity by 2020. The Health-Consultation Center for Maternal and Child Health and the Center for Early Medical-Social Intervention will be developed within the territory. Host families are planned to increase from 61 to 85 and mediators from 6 to 8.

For the region of Haskovo – The task set for the area is to realize quality care for the children in established foster families, which by 2015 were 132, while for 2020 are planned to reach 181 and to introduce three health mediators. The aim is to close the House of Medical and Social Care in Haskovo. The regional strategy for development of social services /2016-2020/ provides for the construction of four crisis centers with a total capacity of 50 people. The services that will be provided will be as follows: social and legal consultations; psychological and legal support; mediation with institutions and social systems; family counseling; training to acquire basic behavioral skills; programs for education and vocational guidance. All of them are associated with children and victims of domestic violence or victims of traffic. CCNT will increase from 5 to 8 pcs. with a total capacity of 106 seats, COS from 5 to 7 pcs. with a total capacity of 250 seats. The establishment of three Centers for temporary placement of children and families at risk with a total capacity of 50 seats is envisaged. The community center for children at risk will increase its capacity from 80 to 100 seats. In Haskovo, the services are mostly available in the district and the town of Dimitrovgrad, the envisaged new ones do not include the smaller settlements but are concentrated mainly in the big cities in the area.

For the Yambol region – the area has a wide range of services available to children from the priority age, but most of them are concentrated in two settlements – Yambol

and Kabile. The only new service that is planned by 2020 is the Complex for Social Services for Children and Families in Elhovo with a capacity of 50 seats. The number and capacity of COS, Early Intervention Disability Centers, and Temporary Accommodation Centers are planned to increase, and the Center for Sickness and Child Abuse, (CCNT), NSSR, and the Educational and Educational Day Care Center for Children, Adolescents and Families, including a crisis center and a public support center keep their number but increase capacity. The mediator is no longer to be developed as a service, and foster families will increase by 2020 from 25 to 44.

In summary, services for children in the areas with existing HMSCCs are predominantly concentrated in district towns. COS, CCNT, NSSR and foster care are the most common and most numerous services. They are located mainly in the district towns and in the larger settlements of the districts, which does not create a prerequisite for a balanced territorial distribution according to the needs of the population. Strategic documents rarely provide services for small settlements, in most cases only available if a resident institution existed. For the new planning period, the concentration of services in the district towns should be changed so that a larger number of users can benefit from their supply. For the regions of Sofia-city, Varna, Veliko Tarnovo, no current strategies for social services.

Social workers and managers of social services are an important factor in the success of deinstitutionalization. With their knowledge, skills and qualities, they are the basis for the effective functioning of social services (Zaykarova, 2017, p.127).

Apart from the progress made and good results on the path of deinstitutionalization for children, a significant problem is the geographically uneven distribution of new

social services. The lack of accompanying and supportive services may not adequately meet the needs of children, not just those brought by the institutions but also those of the families at risk.

When compiling strategic documents at regional and municipal level, account should be taken of the need to balance services and the full territorial coverage for the needs of the population. Financing, albeit delegated by the state of the municipalities, is determined on the basis of capacity, which may be a deterrent for the creation of new services. Funding is determined year on year by virtue of a decision of the Council of Ministers, based on certain costing standards. It is imperative to create more flexible rules regulating the commitments of municipalities to create sustainable and diverse services. The service must exist, even if a single child needs it because the remoteness would create a feeling of insecurity and abandonment in the user, and bring additional financial costs for him.

Conclusion

The study is devoted to the state of affairs and the problems of social services for children in Bulgaria as this is a top priority in social policy not only in our country but also across the EU. The analysis reveals the uneven territorial distribution of social services for children, their concentration in the large cities or settlements where HMSCCs existed.

Deinstitutionalization is a long-term, well-planned and structured transition process. The challenges faced by municipalities and districts are that there is no real assessment of the needs of certain types of social services and there is also no real assessment of the needy target groups within the specific municipality. Municipal development plans are being prepared in many places formally

without taking into account real needs. This causes the paradox of not reforming or closing existing services that are not effective, and at the same time social services are opened in the community for which there are no real users. Due to the inadequate assessment of local needs, uneven openings of social services in the community is reached.

The need for legislative changes is tangible. Changing the responsibility of parents leaving their children, changing social assistance for families at risk of abandoning their children, facilitating the adoption process, and protecting children from rehabilitation. Legislative changes are needed, restricting and imposing strict conditions for institutional care for children under the age of three years. Services that help overcome short-term parenting difficulties and referral to appropriate services.

It is necessary to establish an institutional unit to improve the process of deinstitutionalization by regulating, coordinating, monitoring and assessing what is happening in the field of child support and protection and the model can be applicable to other forms of deinstitutionalization provided for to go to Bulgaria.

The role of regional development in improving the provision of social services is visible. Good planning and programming is essential to the success of the deinstitutionalization of social services. And the planning of each activity should involve representatives from all areas related to the lives of children, and this should be explored locally.

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