

Prevention of Child Abandonment:

Analysis of a Development Project in
Braşov, Romania.

Alla mia famiglia

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1. Introduction:

In December 1989, when the communist regime of Nicolae Ceaușescu collapsed, the international opinion was shocked by the images sent by journalists and televisions of the terrible conditions of around 100,000 children placed in over 700 orphanages all over the country. Children were living in huge institutions hosting around 400/500 children followed by an insufficient¹ and untrained staff, deprived of their basic needs, malnourished, lacking all normal human contact, and often psychologically, physically or sexually abused. It was clear that the problem of child abandonment was a terrible social pathology that would have consequences in the long run. Since 1989 a lot of progresses has been achieved in child protection in Romania. Priority has been given to the shift from an “institutionalized” system into a “family based” care. The condition of placement centres has been improved and programmes of child abandonment prevention and reintegration of institutionalized children has been implemented. Nevertheless child abandonment rate is still considerably high and reintegration process of young adults grown in placement centres is indeed challenging. New problems are increasing in importance as child trafficking or as the “home alone” phenomenon of children vulnerability, marginalization, and/or exclusion due to their parents migration. And critical situations are far to be solved. Twenty years after the fall of the regime too many children are still abandoned in Romania. In 2008, according to the Romanian National Authority for the Protection of Child (ANPDC), 24,427 children were institutionalized, 71,586 were in the care of the state and still 1,817 children were abandoned at birth.

The aim of this study is to investigate which are the determinant factors of child abandonment. I will examine the socio - economic characteristics of mothers and families at risk of child separation. I will try to exploit to which extent poverty is determinant and which is the role played by other social aspects as family desegregation or previous institutionalization. I believe that a deep understanding of which are the determinants of the phenomenon is crucial. In fact a deep knowledge of the problem would also help in terms of policy prescription. Far away from claiming to solve this very complex and articulated problem I will end this study giving some small suggestions and proposals that in my opinion could be implemented to lower the abandonment rate in the future.

¹ The ratio was usually 1 staff member over 20-40 children but in some extreme cases it was up to 1 over 50. (Rampini, 2005).

I collected in the field data used for this analysis. The database I constructed is made up of more than 600 observations over the years 2005-2009. Therefore all the results come from data that have never been analyzed before.

When in spring 2009 I travelled across Romania to collect the data necessary for this analysis it was my fifth time in the country. My experience in Romania dates back to summer 2001 when I have been involved in a animation camp in a orphanage in the western part of Romania. During two weeks we lived and played with institutionalized children and teenagers. As many other volunteers I was unaware that this experience would turn out to be determinant in many of my future choices. Since then, I kept on volunteering on other four camps, I followed the work of the NGO from Milan, I was trained as mission responsible and a great part of my academic interests has been determined by that first choice, too. The living conditions of the institutionalized boys and girls were rising many questions. The choice of performing a study on the origins of child abandonment comes from the desire to find an answer to some of those questions. As in all of the subsequent travels to Romania, also in this work as soon as I found some answers new questions came up to my mind demonstrating that this topic is indeed complex and articulated.

This work is structured as follows: a first section of literature review and historical and cultural background; a second section describing the project and the data collection process; in the third section I will describe the data and analyze them. Finally some conclusions and policy prescriptions will be shown.

2. Background and literary review

2.1 Figures on child abandonment

Analyzing a phenomena as child abandonment the availability of quantitative information on the extent of the phenomenon would lead to a better understanding the problem and would also help in analyzing trends over time. Unfortunately data on this theme are not always reliable. The report Progress for Children (Unicef, 2009a) present a figure of more than 2 million children in institutional care around the world, with more than 800,000 of them in Central and Eastern Europe and the Commonwealth of Independent States (CEE/CIS). Nevertheless the report warn that the global figure is likely to be severely underestimated. This mainly due to under-reporting and a lack of reliable data. In fact, many institutions are unregistered and many countries do not regularly collect and report data on children in institutional care. For the Central and Eastern Europe (CEE) and the Former Soviet Union (FSU) estimations on the number of child in care of the state and on the abandonment rate might be erroneous due to a series of reason. Carter (2005) identifies the most important as:

- Lack of reliable statistics: Many countries in the region are still in the “transition” from semi-totalitarian to democratic rule. There are few checks and balances against the state and no tradition of state-collected statistics being questioned.
- Inconsistent data collection: Responsibility for child care is generally divided between four or more ministries, each with their own budgets and information systems. Collecting consistent data across the different ministries can lead to inconsistencies.
- Problems of definition: the definitions of placement centres, substitute family and maternal shelters are not universal and could lead to confusion particularly in comparisons across country.
- Lack of clarity of purpose: Children’s institutions that were originally provided for orphans are frequently used to house children for social reasons. For example, there might exist boarding schools that give education to children who live in remote rural areas. However, children are frequently placed there because their parents are simply too poor to support them.
- Faulty collection of data: As a result of inadequate mechanisms or manipulation data collection can be poor.

Keeping always in mind the problems of liability of data on child abandonment I still believe that those have some explanatory power. Therefore I would present here some figures on institutionalized children and abandonment rates. According to the National Authority for the Protection of Child's Rights (ANPDC) in 2006 there were 73,913 children residing with substitute families or in institutions. Of those the 47,746 (the 65%) was in care of substitute families (maternal assistance, extended family, other solutions) while the other 26,167 were placed in public or private orphanages. The TransMONEE Database of the Unicef Innocenti Research Centre estimate for the same year 26,300 children in residential care.

The number of child living in public or private institution is experiencing a lowering trend. This is a positive effect of the 2005 reform in child protection system which moves from an institutional based care to a family based care (i.e. maternal assistance, substitute families). Nevertheless the number of children in residential care remain considerably high. In the area of Central and Eastern Europe (CEE) and the Former Soviet Union (FSU) in the period 1998-2005 there has been a small decline (about 13%) in the absolute number of children in institutional care. However, over the same period the child population, like the population overall, has fallen by a slightly higher amount. This implies that the proportion of child population in institutions has actually risen by about 3%. The same kind of reasoning can be applied to the abandonment rate. In fact while the number of child abandoned at birth is declining birth rate declines at a higher pace. As estimated in *The Situation of Child Abandonment in Romania* (Unicef et al., 2005) in 1989 the abandonment rate in maternity ward was about 1%, indicating that every 100 child born one was abandoned. The study indicate that both in 2003 and 2004 a rate of child abandonment in maternity wards was at the higher level of 1.8%. If the same ratio has to be calculated for the following years would be 1.2% for 2005 and 1% for 2006 and 2007². Therefore we can conclude that from 1989 there has not been a significant downward trend in regard to child abandonment.

² Data on child abandonment form the National Authority for the Protection of Child's Rights (ANDPC). Data for live births form UNSD.

2.2 Literary review

In this section I will present a review of the literature on the topic of child abandonment. I will mainly focus on Romania and on the regions of Central and Eastern Europe (CEE) and the Former Soviet Union (FSU). Although there is good evidence in literature about the consequences of institutionalization on children psychological and physical development a smaller number of studies focus the attention on the causes of child abandonment. Nevertheless those are sufficient to depict the main aspects of the problem. As we will see some researches are centred on the institutionalization at different stages in life while others are focused on institutionalization at birth and use a methodology similar to the one that I will implement.

A relatively early study of the root causes of child abandonment (Vitulo, 1992) suggested a series of reasons that can be summarized in three main categories. Firstly economic imbalances in society (mainly relating to poverty), secondly negative cultural, social attitudes and practices (including lack of acceptance of single mothers, a tendency to hide disabilities and social problems and ethnic prejudices) and finally situations of war and civil disturbance (but only in certain countries). Already from this first study the phenomena appears complex and articulated.

A subsequent study published with Unicef support (Stephenson and Anghelescu, 1997) shows that there are a number of different factors contributing in various degrees to the placement of a child in a residential institution. According to their study poverty is neither necessary nor sufficient to lead to institutionalization. Nevertheless, poverty does set the stage for conditions by which other elements, especially those relating to family dissolution, can lead to institutionalization.

Another research carried out in Romania in 1997 in seven maternity wards throughout the country and three in Bucharest find that the characteristics of mothers who abandon their child were defined as being related to marital status (single motherhood), age (teenagers), and level of education (low) (Dambeanu *et al.*, 2001). For this study the rate of child abandonment (total number of abandoned children in the reference period by the total number of children born alive) is on average 1.61% between the limits of 0.75 - 2.7%.

The stress of poverty as a cause of child abandonment has been posed by an early MONEE report. It argued that most children are in care because of poverty, disabilities appertaining to a minority ethnicity or come "from families that neglect or care inappropriately for them" (Unicef,1997: p.82 quoted in Carter, 2005: p.35). This view was modified later, despite of this fact "dysfunctional parenting" was still identified as a major

factor in child abandoning (Unicef, 2001). Similarly, a Russian study (Zdravomyslova, 1998) stress the importance on the aspect of “problem families” characterized by high abuse of alcohol or drugs. A later study carried by the NGO EveryChild criticize the strong emphases on “inadequate parents”. According to the author giving a so strong emphases on this factor is a oversimplification of the problem. In fact the overall phenomena seem to be far more complex (Carter, 2005).

The importance of poverty and single parenthood in determining the abandoning decision has been stressed again by Lie and Murăraşu (2001). Those authors studied retrospectively 55 men and 20 women who had grow up in orphanages. The sample is constituted by cases of abandonment at birth as well as cases of subsequent abandonment. The study found out that the major causes of abandonment was being born by a single/unmarried mother or by poor parents. While family adversity and parental dysfunction was the major cause of only one fourth of the abandonment.

In a report (Carter, 2005) on abandonment practice in Central and Eastern Europe (CEE) and the Former Soviet Union (FSU) in has been depicted that poverty is only part of the problem and children are in care largely for social reasons. In fact, although poverty is a significant underlying factor, the actual precipitating causes are linked to family breakdown, single parenthood and unemployment. Moreover in a research on the determinants of child abandonment in Bulgaria, Romania, Georgia, Azerbaijan and Kyrgyzstan the NGO investigate the most important reasons for children being admitted to institutions: 34% of children overall were admitted as a direct result of their families' poverty, while a similar figure, the 31% was admitted for social reasons. The remaining children, slightly over one third, were admitted for a range of other aspects. The most important are abandonment by the family, disability or illness of the child. Moreover compared to the other four countries Romania seem to have higher level of social reasons, and the lack of knowledge of, or inclination to use, contraception. This latter factor been attributable to the policies of the communist regime.

A local study about parents with children in placement centres in Timiş County (Alexiu, 2001 in IMAS *et al.*, 2004) as well as a report from Protect the Children (Protect the Children, 1993) mentions the antecedents of institutionalisation in the family as important factor in child abandonment. This suggest that lack of a parental model prevented them from developing parenting skills, and made them regard institutions as a solution for their children. Moreover, Alexiu (2001) noticed that the ethnic factor should be important in institutionalization. In fact it seem to be that children of Roma people are at greater risk of

being institutionalized than children of other ethnic groups. Evidence that ethnicity matters comes also from the report: *The Situation of Child Abandonment in Romania* (Unicef et al., 2005).

2.3 Cultural-historical heritage: the pro-natalist policies of the communist era

To understand the phenomena of child abandonment in Romania it is necessary to take into account the history of the pro-natalist policies of the Ceaușescu regime. In fact even nowadays the reproductive behaviour of high share of Romanian population seems to be strongly influenced by the policies implemented during the communist era. The first pro-natalist policies were introduced in October 1966 after a decade of demographic crisis that significantly lowered the fertility rates. The fall in fertility rates clashed with the project of the dictator of a rapid industrial growth that would require high labour supplies and with the glorious desire of governing a populous nation (Rampini, 2005). The pro-natalist policies applied in 1966 can be summarized as follows:

- Abolition of voluntary abortion except for women over the age of 45, women at fifth pregnancy, in case of rape or incest and in certain at-risk categories.
- Suppression of contraceptive importation, which actually meant forbidding their use since in Romania those were not produced.
- Taxation of childless couples was introduced: regardless of marital status women and men still childless at the age of 25 incurred in fees consisting of 10-20% of their salary.
- Increases in benefits for each successive child and from the fifth birth 30% reduction on income tax.
- Abolition of sexual education at school level.

The effect of this set of norms has been immediate. In the following year the fertility rate rose and the number of legal abortion drastically dropped. Nevertheless a decade later the fertility rate started decreasing again (Rampini, 2005). Therefore in 1974 a new series of pronatalist policies has been implemented: the labour code has been reformed. Higher flexibility, exclusion in the overtime work and less dangerous tasks for pregnant women were introduced and easier pregnancy permissions were provided. But in 1983 once again the population growth was falling and the number of abortion was higher than the live births. New policies had been implemented: the minimum age required for marriage had been lowered and the presence of policemen in hospitals to prevent the illegal abortion has been augmented. Since 1986 advertisement campaign promoted the model of numerous family and procreation as a patriotic duty.

All these pro-natalist policies had a determining impact in the child abandonment phenomena. In fact when in 1980s Romania was affected by the economic crisis also the

family system implode. Poverty worsened living conditions and facilitated the creation of violent family entourage, and the child subsidies were not any more sufficient to support the situation. Romanians faced the impossibility to maintain their offspring and the state intervened by supporting the families who could not afford to raise a big number of children, promising to assume legal responsibility for them, placing them in institutions created with that purpose. In the collective mentality spread the idea that the responsibility to raise children belonged of the state rather than of the parents and that the state could replace parental care. Mothers claimed poverty as a reason to abandon their newborn and the saying “the government wanted them, so the government should raise them” became well-established in the public consciousness, and turned out to be a means for legitimizing such acts (Unicef *et al.*, 2005). Child abandonment became a normal practice. The doubling numbers of births in a short period of time theoretically also meant a doubling in the number of “normally” abandoned children but more problems were added with the increase of the number of such children in unprepared infrastructures (Unicef *et al.*, 2005). The management of these problems in the complete absence of social welfare services generated a series of anomalies that were perpetuated over the years, taking on a semblance of “normality” and “acceptability.”

3. Data collection

In spring 2009 I travelled across Romania to collect the data necessary for the construction of the dataset used in this analysis. I visited two development projects: one in the town of Braşov in the central part of the country and another one in Râmnicu Vâlcea, in the south west. I have been accompanied in this trip by Lidia Dobre, responsible of the Romanian NGO, Inima Pentru Inima (IPI).

3.1 Data collection: the consulting room in Braşov

The first consulting room I have visited to perform this analysis was the maternity of the hospital of Braşov. In the maternity of Braşov the NGO Inima Pentru Inima runs a consulting room that gives material and psychological support to new mothers and pregnant women at risk of child abandoning. The data used in this analysis are extrapolated from reports (one-two pages each) written by the psychologist of the centre. All reports were in Romanian. Once back to Italy I read all of the 676 reports and from those I extrapolated the necessary information to construct the database. I inserted the information in a excel sheet. It consists of 676 cases and more than 200 variables among dummies and continuous variables.

Furthermore in the visit of the maternity I interviewed the psychologist of the consulting centre. Thanks to her experience she gave me important insights on the topic of child abandonment and some suggestions on the aspects to consider.

The data I collected range from January 2005 to February 2009. Actually the consulting room was opened in January 2004 and I would have preferred to have also data from this previous year, but a computer was donated to the NGO only in 2005: therefore while for the period 2005-2009 the reports were electronic, for 2004 those were paper based and hand-written. First of all, the handwriting was difficult to understand in a foreign language (Romanian), secondly those papers contained also pictures, photocopies of ID cards and other sensitive documents. Therefore they were not anonymous and according to privacy regulation I was not allowed to go through them. Moreover the type and quality of information between the two kinds of document were different. This problem may create inconsistency in my analysis. As a matter of fact I decided to drop this year's observations from my work. Although this choice obviously affected the number of observation I worked on I still relayed on more than 600 cases over the period 2005-2009.

3.2 The hospital of Valcea: The project by World Vision

On a second step of my trip across Romania I visited a consulting room implemented in Rm. Vâlcea. The project is run by the international NGO World Vision. I interviewed the psychologist of the consultancy and the social assistant hired by the hospital. Also, I was able to perform an interview to the officer of family planning consultancy. The insights they gave me as well as the literature they provided me have been indeed precious. Moreover they provided me with some interesting aggregate figures on the functioning of their project as well as the share of abortions in the hospital. We discussed about the possibility of using the data of their project to construct a database in order to study the origins of child abandonment. They were compiling for every woman coming to the office a report treating socio-economic information. Those reports were similar to the ones of the project run in Braşov. It would have been interesting to construct a database as the one prepared for the project of Braşov. Unfortunately due to privacy protection concerns the officers of World Vision were not allowed to give me those documents.

3.3 Problems in data collection

Privacy protection: As I said before, the reports I analysed are protected by privacy. This is obvious when we think that those contain sensible information. Just to give some examples, they indicate previous institutionalization, relationship status, sickness in the family etc. As already argued, this has been a constraint when to analyse the data of the project of Braşov for the year 2004. Those reports were handwritten and contained information about the identity of the subject. Also this has been a constraint to obtain any specific information on the project of World Vision.

Comparison between datasets: When I first started performing the analysis I would have liked to study the efficiency of the project. Therefore I was willing to compare the behaviour of mothers helped by the maternity consulting centre (“treated group”) with those of woman that has not received any help by either the state or NGOs in preventing child abandonment (“control group”). It was not possible for me to use this methodology. Firstly some types of consulting centres for mothers at risk of child abandoning are now opening all over the country which actually means that the control group was “not existent”. Secondly, it was not clear to which extent the information collected by other hospitals were comparable with those of Braşov. In fact the socio- economic characteristics were too different from one region to another to perform any kind of comparison and there was no other public hospital in the area of Braşov. Moreover also a comparison with other statistics was indeed difficult because of lack of other official data on mothers at risk of

child abandonment. Finally an attempt to study the efficiency of this project compared to another one has been made with the consultancy room implemented by World vision. Also in this case I was not able to perform this kind of analysis. There were two reasons that made impossible such kind of comparison:

- due to privacy protection concerns I didn't have the access to the information of the project of World Vision.
- The two projects are run in two different areas with different socio economic characteristics.

Incurring in those problems didn't allow me to perform an analysis on the efficiency of the project. Nevertheless I was able to determine which are the main factors inciding on child abandonment in the set of woman under analysis. This ensures a better understanding of the problem and the possibility to depict important policy prescription.

Corrections for repeated cases:

At the end of the construction of the dataset I had to correct it for a problem of "repeated cases". In fact although the number of cases is 676 the real number of mother coming in the maternity is 637. This happens because some mothers may ask the intervention of the consulting centre more than once during the period under study: either because they have a new pregnancy or because after one or two years from the birth they need again the support of the consulting centre (mainly information on contraception or implementation of intrauterine device). This issue may bias the estimates, therefore I checked for this problem reading back the "repeated cases". When the mother came to the maternity twice for the same child I merged the information. When she came twice or three times to the consulting room for different children I randomly chose which of the cases to include. The results of this work are presented in table 1.

Table 1: Number of cases analysed

	Mothers coming two times to the consulting room (two pregnancies)	Mothers coming three times to the consulting room (three pregnancies)	Mothers coming two times to the consulting room for the same child (one pregnancy)	Total
Number of mothers	27	2	8	637
Number of children	54	6	8	668
Number of cases	54	6	16	676

4. Analysis and data description

The aim of this work is to analyze the socio economic conditions underlying the phenomenon of child abandonment in the area of Braşov, Romania. To perform this investigation I collected data from the development project run by the Romanian NGO *Inima pentru Inima*³ in collaboration with the Italian partner *Bambini in Romania*⁴. The project consists of a consulting room for new mothers or pregnant women facing problems as financial troubles, fear of the role of mother or scarce support from the family that may cause the abandonment of their child. Women are provided with services of psychological support, material help, and consultancies that may reduce the incidence of child abandonment and improve the quality of life of the entire family.

The mothers that are beneficiaries of the centre are typically extremely young and not prepared for a pregnancy, or adult mothers with many children to take care of, usually unemployed, often stuck in poverty with low level of school attendance or sometimes illiterate. Many times those mothers are single or having the child out of the wedlock. A complete description of the socio-economic condition of the mothers is provided in the next section. Here I limit the analysis in order to understand the types of intervention that are provided by the centre.

Mothers may come to the centre spontaneously or addressed by the *equipe* of the hospital (doctors, nurses, obstetricians). There are several reasons that may cause an intervention. The woman can either face financial constraint and ask for material help, or have problems in her relation with the family and the partner and can ask psychological support and help in facing up the problem at home. In other cases the woman beneficiary of the project may

³ *Inima pentru Inima* (Romanian for: Heart for Heart) operates since 1997 on various sphere of child protection as: child abandonment prevention, reintegration of children in their natural families, improvement of the living conditions for institutionalized children, social and professional integration of institutionalized young people and services for children with handicap. To reach these goals the NGO hires more than 130 people as teachers, doctors, welfare officers, psychologies, psychotherapists, sociologists, economists, maternal assistants, sport teachers and administrative staff.

⁴ *Bambini in Romania*, BIR (Italian for: Children in Romania) was founded in 1999 by Don Gino Rigoldi, chaplain of the juvenile prison Beccaria in Milan. The voluntary association works on several projects both in Romania and Italy. The main projects of the association in Romania are: improvement of the living condition of children in placement centres, deinstitutionalization and reintegration in the society of young people and prevention of child abandonment. Since 2000 over 1800 Italian volunteers has been prepared and sent to Romania for a two weeks voluntary experience of animation and cultural exchange with the children and teenagers of the orphanages in the regions of Brăila, Braşov, Tulcea, Rm. Vâlcea and Turnu Severin. In Italy the major areas of work are raising awareness about the phenomena of child abandonment/institutionalization, promotion of the voluntary service and cultural exchange between the two nations. In Milan the association organizes a project of intercultural animation in Roma camps and an experience of voluntary service in Beccaria Juvenile prison.

ask for some information on contraception or on how to prepare the birth certificate for the child or the application to receive the social help from the state. In some cases the mothers escape from the hospital just after the birth. This can happen in particular cases of fear of the responsibility of the role of mother and of extreme problems at home. In those circumstances the consulting centre has to inform the police and when the mother is tracked she is accompanied to the hospital to clarify her position. Here the psychologist and social assistant assist the mother in her decision for the welfare of the child.

More in detail the range of services that the consulting centre provides are:

- Psychological support: help in dealing with the role of mothers, in improving their relationship with the rest of the family, with the partner or with the other sons.
- Material help: clothes for the newborn, powder milk (only in scarcity of breast milk), nappies, furniture for the house (heating, frame for windows or doors), etc⁵.
- Information on how to take care of the child: hygienic and sanitary norms, information on the importance of school attendance for the growth of the child.
- Consulting centre on sexual illnesses, information on contraceptive use, and information on the other services that the hospital offers in terms of contraception.
- Help with bureaucratic issues: preparing the birth certificate of the child, of other kids or of other members of the family, informing and helping the mother with the request for social help from the state.

The mothers are followed by a psychologist and a social assistant for the period of post partum and are then monitored with delivery visits for a period up to one year after the birth. The employees of the projects are both Romanian, coming from the area of Braşov. They collaborate with the municipality, the police, the general direction for the protection of child and the social assistant of the hospital.

For every mother a brief report is compiled. The reports include information about the child and about the socio-economic condition of the woman. Going through every report I constructed a database with the information extrapolated from these documents.

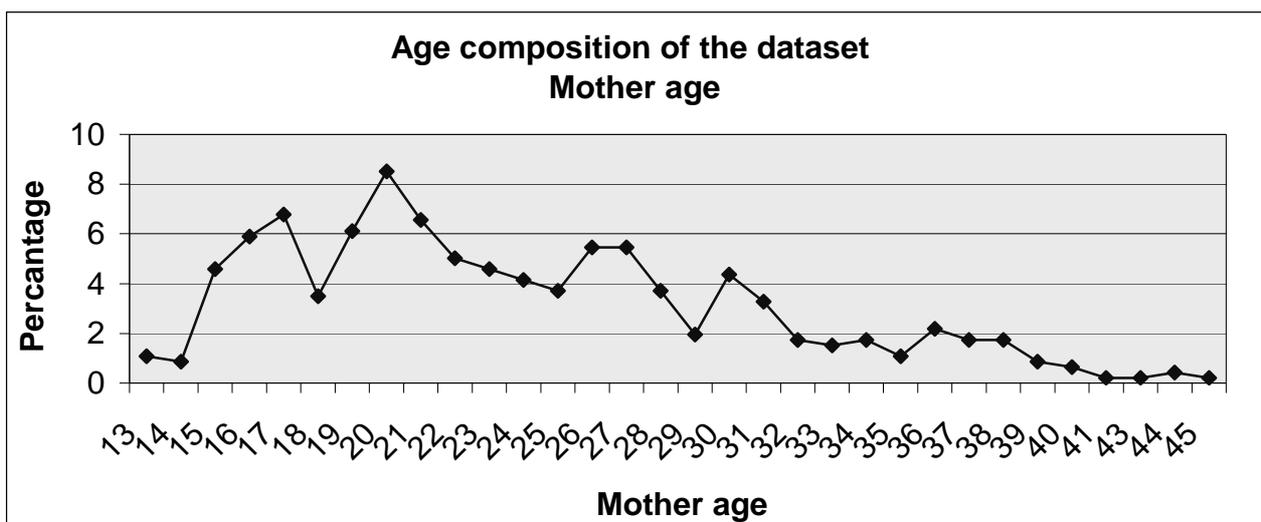
⁵ No economical transfer in terms of money is provided.

4.1 data description

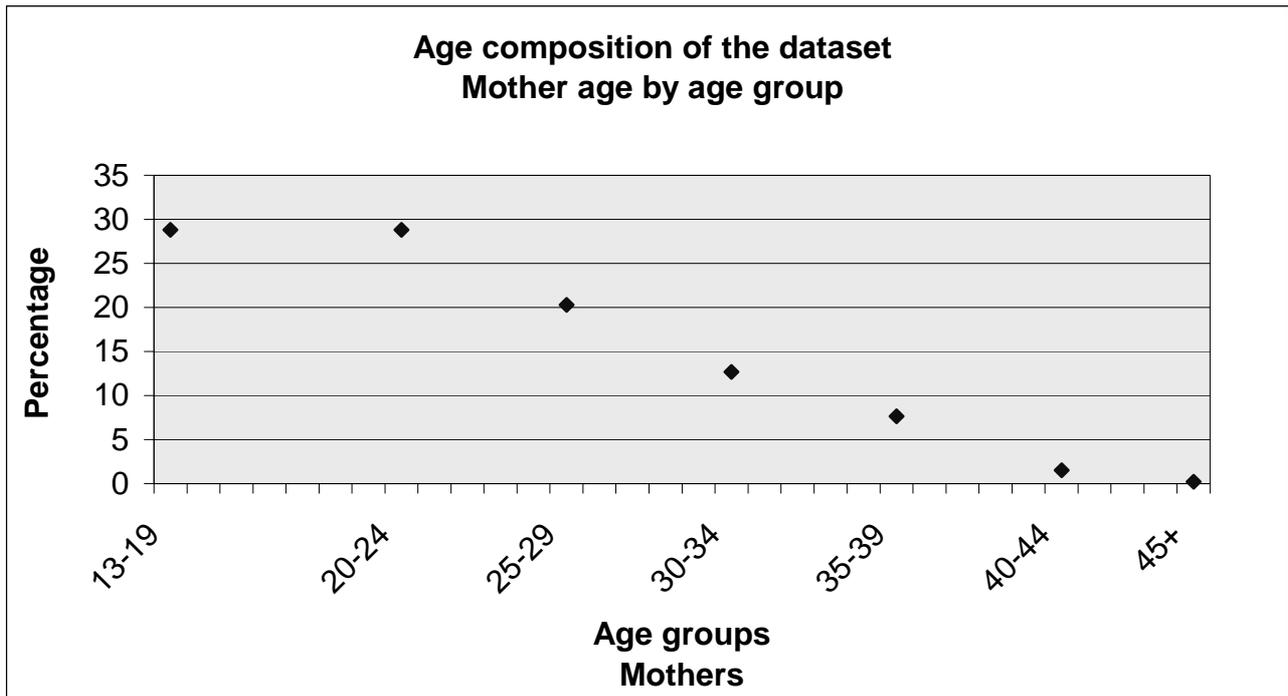
As we said before a high percentage of the mothers helped by the consulting room are either extremely young or either mothers of many children. The literature on the topic depicts that these two categories of woman are more likely to abandon their child. According to a research performed by Unicef on child abandonment in Romania (Unicef *et al.*, 2005) babies abandoned in maternities are most often either first-borns (34%) or have four or more siblings (26%). Moreover a report on institutional childcare in Central and Eastern Europe affirms that very young parenthood together with single parenthood are precipitating factors contributing to children being abandoned and placed in institutional care (Carter, 2005). Young mothers might not be mature enough to be able to assume the responsibility of raising a child, or might not have the material and financial means for a child as they are themselves dependants. Furthermore, the immediate or extended family may encourage abandonment due to community stigma or for other social reasons (Unicef *et al.*, 2005).

Analyzing the age groups of mothers in my study we see that the percentage of young women is very high. From Graph 2 we can notice that the majority of women are aged between 13 and 24 years old and almost the 30 per cent are teenagers. The age range between 13 and 45 and the mean age is approximately 24. A complete tabulation of mother ages is reported in appendix, table A.1.

Graph 1: Age composition of the dataset: Mother age

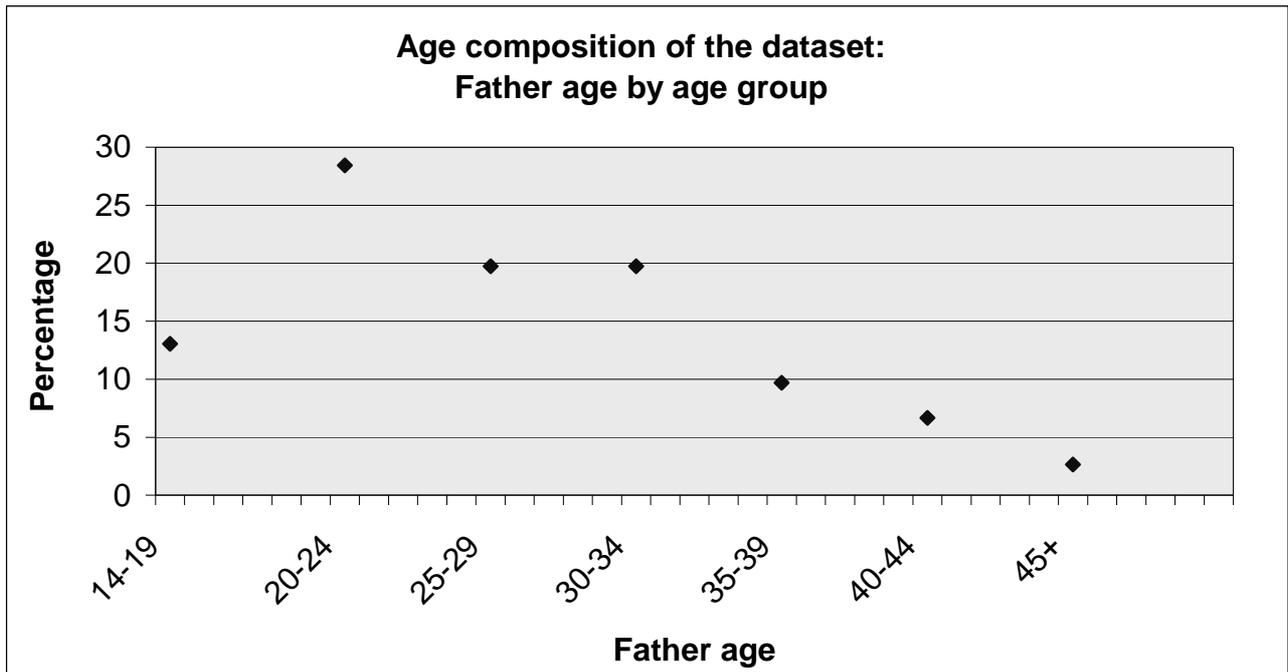


Graph 2: Age composition of the dataset: Mother age by age group



When compared with the age groups of the fathers in the database we see that the range of age is larger: from 14 years old to 60 years. And the mean is higher, with a value of approximately 28 years old. Despite of this fact also the fathers considered in the database seem to be very young. The majority of them are younger than 26 years old and 13 percent of those are teenagers (table A.2). This finding is consistent with the idea that younger couples are more prone to need the help of the consulting room, either because not prepared for the pregnancy, unable to take the responsibility of raising a child or not having the support of their parents.

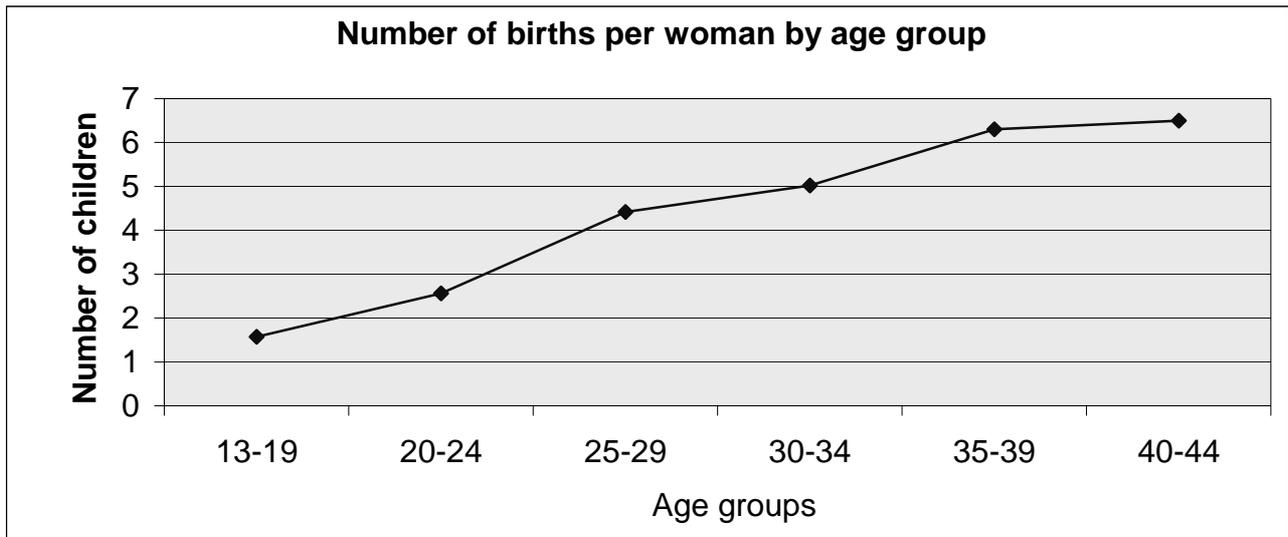
Graph 3: Age composition of the dataset: Father age by age group



As seen before young woman and mothers with many child to take care are the most vulnerable categories for child abandonment. I will now analyze the number of child per mother in my sample. The mean number of children of the woman considered in the dataset is 3.64 and the number of children by mothers range between 1 up to 13 (Table A.3). Those numbers include also the new born for which the mother may ask an intervention form the consulting room. Therefore one represent the case in which the mother is at the first pregnancy, two the case in which the mother is at the second pregnancy and so on. Since the number of the child is strongly related with age I divided my sample by age groups of mothers (Table A.4). As I can see from Graph 4 the mothers between 30 and 35 years old, as well as those in the cohort of 40-44 have very big families with on average more than six children each (6,3 for the group 30-34 and 6,5 for the group 35-40)⁶.

⁶ The variables reporting the mother age and the number of births both have some missing values. Therefore these statistics are constructed with a smaller sample than the original one (296 observation). It might be that mothers with larger families are more prone to declare the number of children they are raising since this may be a cause of hardships and difficulties. As a matter of fact the figures here presented could be slightly biased upwards. Despite of this the number of child per woman appear to be so high that even under the hypothesis that the true value is to some extent lower than the value here reported we can freely argue that the average family of the mothers in the age groups 30-34 and 35-40 are of large dimension.

Graph 4: Number of births per woman by age group



Another important factor that matters in terms of child abandonment is the marital status. As previously reported single mothers might be more prone to abandon their child because of the difficulties of raising a child alone with no psychological and material support from the partner. Moreover those women might be afraid of being stigmatized and of facing hostility from their own families and the community (Unicef, 2006). The proportion of married women visiting the consulting room is considerably low. This finding is consistent with other studies on child abandonment in Romania stating that only 20 per cent of mothers abandoning the child are married (Unicef *et al.*, 2005)⁷. As we illustrated in table 2 the proportion of married women is only the 12,57 per cent of the database⁸.

⁷Marital status could be considered related with ethnicity since according to the 2002 National Census, the percentage of unmarried Roma mothers is quite a bit higher than others. Since it is often reported a higher level of child abandonment in Roma community than elsewhere, the impact of marital status may be capturing also the effect of ethnicity. Despite of this I am confident that my analysis is not biased by this factors since statistics about Roma marital status should be treated with caution. Authors (Unicef *et al.*, 2005) argue that most Roma women are in fact married according to Roma tradition, although not “legally married”, as defined by Romanian law. Moreover the marriage status I am considering is the one declared by the mother and not the official one, and I assume there is no incentive on misreporting it. Finally, according to the National census, among all children born to unmarried mothers, no more than 22% were Roma, while about 70% were Romanian.

⁸In many of the reports compiled by the psychologist of the centre the woman tend to declare the marital status only in case of positive answer (i.e. marriage is reported when the mother is actually married but there is no record if the woman is not married). This issue caused a problem in the definition of marriage, consensual union, broken relationship, occasional relationship etc. I solved this issue deciding whether reporting a missing value or a negative answer making assumption on the other variables. From time to time I will define how the variable is constructed. For marriage I considered as not married all the woman that were in consensual union but did not declare to be married. Also I considered as not married those declaring to have the child from an occasional relation but not out of the wed-lock. This last hypothesis can be considered a bit strong since it could be argued that a woman declaring to have a son on a occasional relationship in than not willing to declare she is married. On the other hand I noticed that woman having a child from a

Table 2 : Marital status: Married – Unmarried

Variable	Number	Percentage
Unmarried	320	87.43
Married	46	12.57
Total	366	100

A much higher proportion of women (approximately the 40 per cent) declare to be in a consensual union (Table 3).

Table 3 : Marital status: Consensual Union

Variable	Number	Percentage
Consensual union	256	40.19
Observations: 637		

The proportion of children coming from occasional relationship⁹ is approximately the 27 per cent. (Table 4).

Table 4 : Marital status: Occasional relationship

Variable	Number	Percentage
Occasional relationship	71	27.10
Observations: 262		

In 24% of cases mothers declared that their relationship with the partner was broken at the time of entering the consulting room (Table 5). In many situations when informed about the pregnancy, fathers had reacted with indifference, rejection, refusal or denial, and many had left the mother of the child (Unicef *et al.*, 2005). In other circumstances the child is born out of the wedlock and the partner might be reluctant to recognize the newborn and may abandon the woman.

Table 5 : Marital status: Broken relationship

Variable	Number	Percentage
Broken relationship	50	23.58
Observations: 212		

Furthermore I created a variable which sums up all mothers whom are alone in raising the children: "Single mother". This variable includes all cases of broken or occasional relationship between the two parents and absence of the father (prison, partner emigrated

occasional relationship in my sample are all very young (25% teenagers and 78% under 24 years old) and marriage is reported as positive mainly for older woman. So I tend to think that the values reported as occasional relationship does not refer to woman married.

⁹This variable is a dummy variable taking value 1 if the woman stated that the child comes from an occasional relationship and takes the value 0 if the woman affirms she is either married or either on a stable relationship with the father of the child.

abroad, etc).^{10 11} This seems to be one, together with poverty, of the major cause of child abandonment. In a study on a sample of institutionalized children, Lie and Murărașu, show that the most common reason for abandonment, either at birth or in the subsequent years, was having a single mother (43% for boys and 70% for girls). Also they argued that 75% of the children were abandoned because the mother was single and/or too poor to care for the baby. I will exploit in detail in the next section the impact of single parenthood on separation decision. For the moment I show that a value as high as 47 per cent of mothers for which I have information about marital status in the sample are labelled as singles.

Table 6 : Marital status: Single mother

Variable	Number	Percentage
Single mother	122	42.96
Observations:284		

Moreover I considered cases in which the father declares that he is not willing to recognize the child. “The role of the father, albeit often neglected, is of utmost importance when trying to understand child abandonment and institutionalisation in Romania” (Unicef *et al.*, 2005). In our dataset we found out that in approximately the 9 per cent of cases the father refuses the child.

Together with father also the mother’s family has a great importance in influencing the abandonment decision. As we argued before many women are extremely young, economically dependent from the family, and psychologically vulnerable. For those women the support of the family is of crucial importance. More than 8% of mothers in my study declare that their family is not willing to help them in rising the child, suggesting to abandon their son and in many cases not supportive to receive them at home with their baby. The reasoning for this position can be found both in the economical problems that the family is facing or in the dishonour that the pregnancy could cause in front of the community. In approximately 5% per cent of cases in my sample the families disapproval is a strong source of hardship and is determinant for the mother’s decision. Because of fear and incapacity of discussing the problem with their parents a 6 per cent of women in

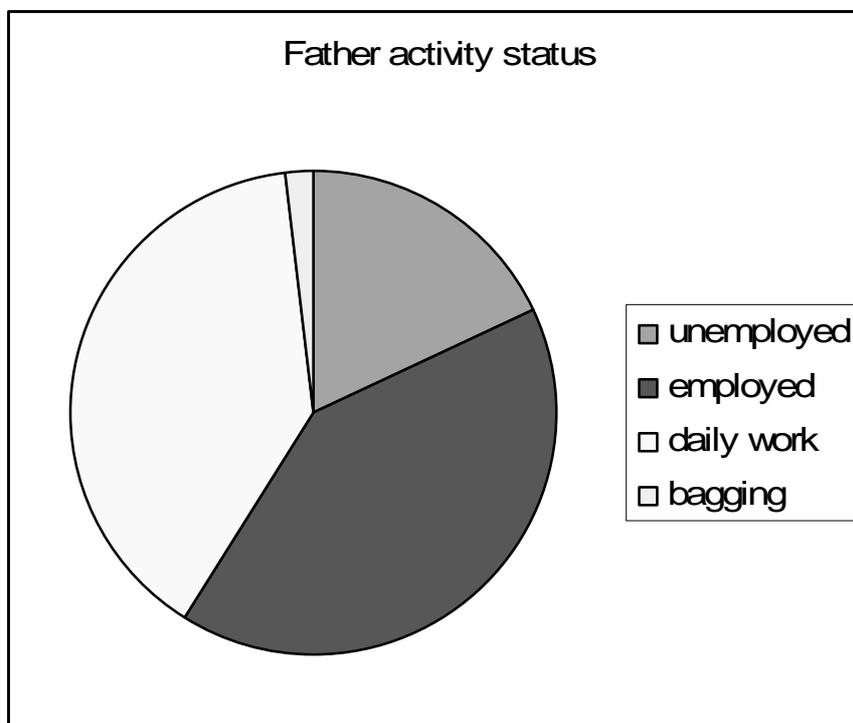
¹⁰ Lie and Murărașu (2001) suggest to include in this variable also the cases of death of the father (which for studies on abandonment at birth means father’s death between the time of conception and the birth of the child).I controlled for this variable but I didn’t have any observation in my sample. Anyway this suggestions should be kept in mind for studies on child abandonment at a different stage in life.

¹¹ This variable is a dummy variable taking value 1 if the woman stated that the child comes from an occasional relationship and takes the value 0 if the woman affirm she is either married or either on a stable relationship with the father of the child

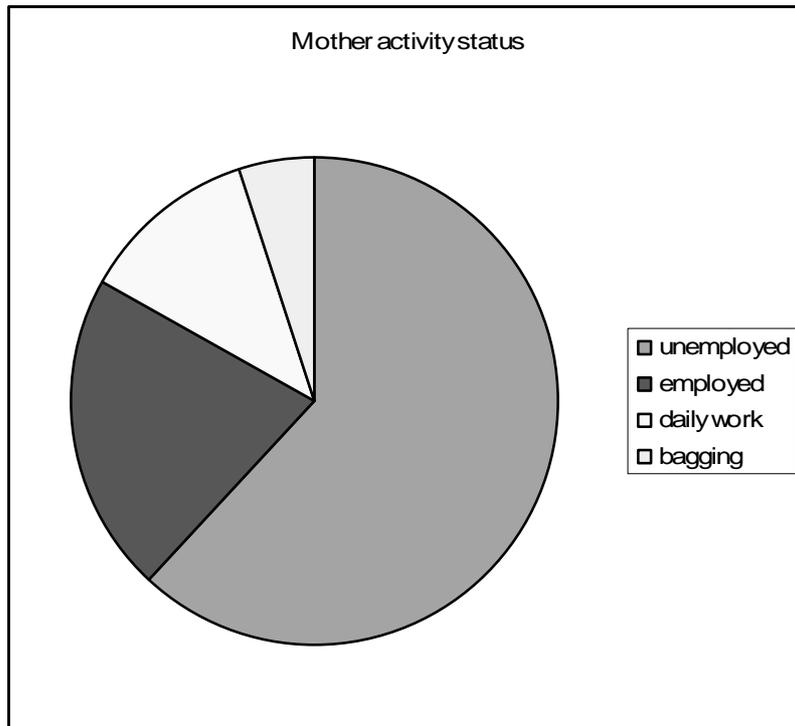
the dataset took the pregnancy secretly and sometimes incurred in the risk of having serious health problems for not being under control by any doctor.

All the social factors discussed so far are of great importance for the study of child abandonment. Although those are not exhaustive. In fact much of the phenomenon is related to poverty and unemployment. According to literature (Unicef, 2006a) unemployment is one of the causes of child abandonment. Some authors (Unicef, 2006b) affirm that very low wages, large scale unemployment, and increased poverty were likely to slow down the reduction of abandonment rates. I am going to explore some factors as employment/unemployment and living condition (house characteristic, presence of heating, access to an improved water source, electricity access etc.). Of the cases for which I have information on activity status around 41% of fathers are employed while another 39% are day labourer principally bricklayers and farmhands. Approximately 18% are unemployed and roughly 2% achieve their substances through bagging. For mothers the 62% of those for which I have information are unemployed and 21% employed 12% daily labourers and 5% rely on bagging.

Graph 5: Father Activity status



Graph 6: Mother activity status



Many women enter the consulting room declaring to have no place to go with the child when left the maternity of the hospital. This may happen either because the mother is homeless or because she is not received at home with the baby (for example if the family of a young woman is not supporting her with an unwanted son or if the partner is not recognizing a child born out of the wedlock). The proportion of women in the latter situation is about 4% and another 3% of mothers declare themselves to live in the street even before the birth. Also for the remaining part of the sample living conditions are characterized by overcrowding and lack of basic infrastructures. Unfortunately these information are not available for the entire dataset. Of the 356 women answering about the dimension of their house about 51% declare to live in a house constituted of one room. The mothers giving information about other household members are 199. In this group the mean number of household tenants is 5 and this value ranges between 1 up to 14. For 163 women information on both size of the dwelling and household components are available. Of those, 18 families (11 per cent) of six members are living in a house composed of one single room. These results are in table A.8.

Information regarding house facilities are available only for a small part of the cases of this study. Nevertheless I found interesting to show some of these figures. Twenty one families are living in houses with no electricity, thirteen don't have access to a improved water

source, and six families declare to live with no heating. The latter finding even if affecting six families become more relevant when we think that the city of Braşov (altitude 650 meters) is situated in a mountainous region and characterized by cold winters.

Also education is a crucial factor in child abandonment (Unicef *et al.*, 2005; Unicef, 2006; Dambeanu *et al.*, 2001). In fact the majority of mothers abandoning their children have a low level of education or no education at all (Unicef, 2006a). Firstly mothers illiterate or with low schooling will experience higher difficulties in raising their son and may prefer to choose for separation. As explained by a gynaecologist interviewed for the 2005 report *The Situation of Child Abandonment in Romania*: “most mothers who abandon their children are illiterate, and have no skills to raise the children” (Unicef *et al.*, 2005: p. 81). Secondly education is crucial in a society characterized by low knowledge on family planning and contraceptive use. In Romania the percentage of women using a modern method of contraception among those of reproductive age who are married or in union in 2004 was only the 38%¹²¹³ and the abortion rate was extremely high at a value of 27.8%.¹⁴¹⁵ In this kind of context school is the first place for young generations to learn about contraception. As reported by an obstetrician interviewed for a study of child abandonment in Romania: “The main cause for child abandonment is ignorance. Contraceptive measures are presented in school, and are a subject as commonly debated as teeth brushing. Unfortunately, this information on contraceptives does not reach the most vulnerable segment of the population that has not had any form of schooling.” (Unicef *et al.*, 2005: p. 80). Finally years of schooling are often perceived as a synthetic risk factor in determining the roots of child abandonment, because those determine the social and economic status of the family, with all the consequences which this has on all life components (Unicef *et al.*, 2005).

Unfortunately in my study I have information about school attendance only for a small subsample of the database (180 mothers and only 23 fathers). Nevertheless those information illustrate a similar situation to the one found by other studies on child

¹²Data from the World Contraceptive Use 2007, United Nation, DESA, Population Division.

¹³The contraceptive use as well as the reproductive behaviour of large part of Romanian population seem to be strongly influenced by the pronatalist policies of the communist regime. Rampini (2005) argues that these policies has a serious impact in conditioning sexuality and procreation customs. This is a cultural heritage of the eve of Ceauşescu still difficult to eradicate twenty years after the dictatorship.

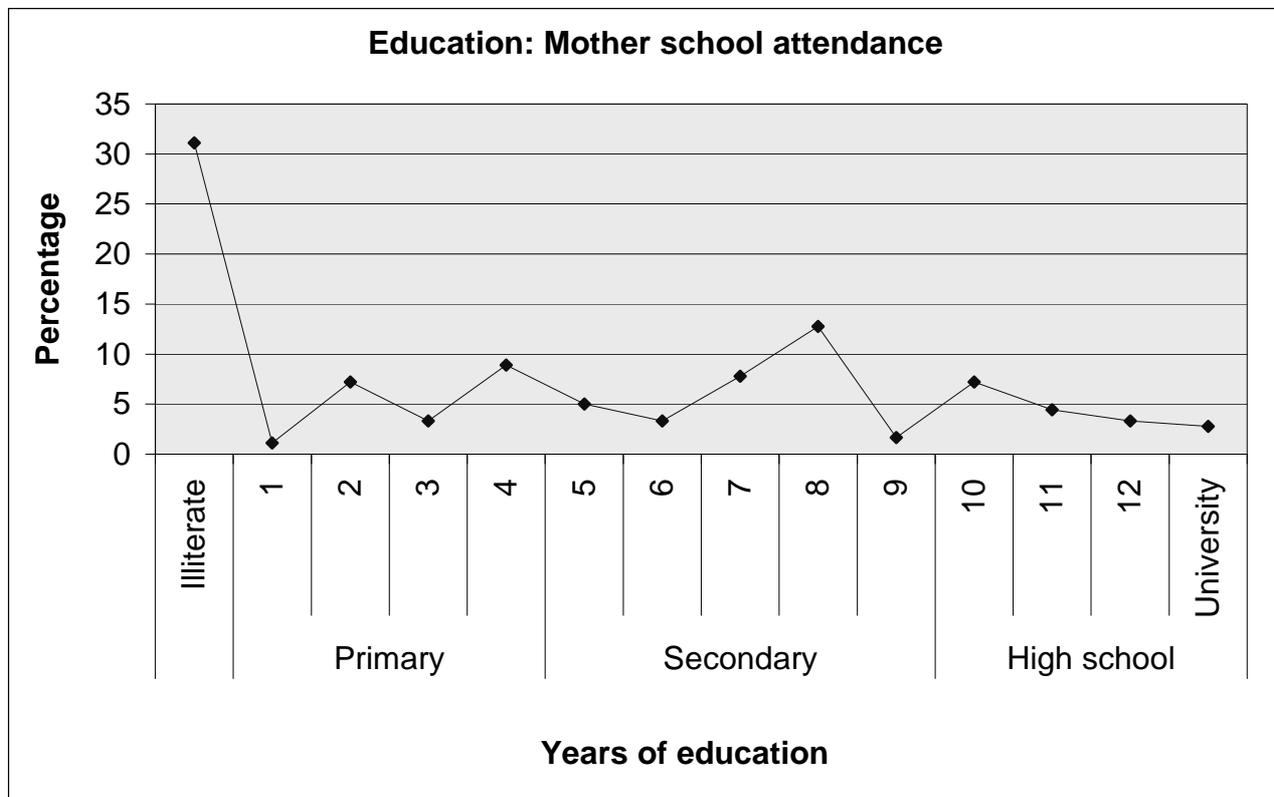
¹⁴ Data refers to 2004. Abortion rate is defined as the number of abortion per 1000 woman aged 15-44. Data from world abortion policy 2007. United Nations, DESA, Population Division.

¹⁵ This latter value is consistent with idea of some authors (Rampini, 2005) that the abortion is used as a mean of contraception.

abandonment (mainly Unicef *et al.*, 2005). The percentage of women with no education or very little schooling is very high with a 31% of illiterate women plus a 48% that have not completed the compulsory years of school (9th grade). In the 3% of cases mothers are university students. Here the risk of abandonment of the child is originated primarily on the psycho-emotional immaturity of the mother, on pressure from the family who does not accept the child, and on the mother's wish to continue her studies without the responsibility of a child. Those information are shown in Graph 7 and Table A.9.

As argued before we have only few observations on father's school attendance. Over the men for which I have figures the 31% are illiterate and another 57% did not complete the secondary school (Table A.10).

Graph 7: Description of the dataset: Education - Mother



Unicef 2006 defines as “Dysfunctional families” those in which the stability and capacity to raise children are negatively affected, include phenomena such as domestic violence, alcoholism, lack of communication, etc. The study argues that those factors might result in abandonment and/or institutionalisation. In order to control this hypothesis I included in my analysis variables as: alcoholism (both of the mother and of another member of the family) and domestic violence. The abuse of alcohol is quite relatively rare and present in around 1% of mothers and approximately 1% in the other members of family, for a total of eleven families affected by the problem. Also domestic violences are fortunately quite rare, those are reported for the 1% of the sample under analysis. Nonetheless this value might

underestimate the phenomenon since it is widely argued in literature (Gavazzi, 2005) that due to shame and fear many women are not willing to declare of suffering violence inside the family.

A local study about parents with children in placement centres in Timiș County (IMAS *et al.*, 2004) as well as a report from Protect the Children (Protect the Children, 1993) mention the antecedents of institutionalisation in the family as an important factor in child abandonment. Firstly parents who experienced the lack of a parental presence themselves might consider the separation of the child from the original family as more “natural” than others. Secondly a mother that already abandoned one of her son might be more “accustomed” to this choice and may behave accordingly in subsequent pregnancies. To check if these hypothesis hold I constructed three variables on previous institutionalization (mother, father and other person in the family but not sons) and a set of variables for the separation of other children in the couple. Of those couples with another children roughly 10% already decided for abandoning at least one son in placement centre or to maternal assistance, 3% chose adoption and 8% of the families has at least one child raised either by grandparents, uncles or other relatives. Therefore a total of 66 families (22% of those with more than one son) already took the decision of separating themselves from their child. In next section we will see if this behaviour can influence the future of the newborn. Antecedents of institutionalisation of mother, father and other relatives is not very widespread in my sample. Around 3% of families had one member that experienced the life in placement centre, the majority of those are mothers.

It is very important to investigate the social capital of mothers and their relation with institutions. It seems to be possible that women receiving social help from the state (poverty pension, child financial support, single parenthood subsidy etc.), and followed by the family doctor are less likely to abandon their son than others. While women out of the welfare system seem to be more vulnerable groups at risk of child abandonment. In fact many mothers are not receiving any public help because even if eligible they are unable to apply for such services since they don't have valid identity documents and/or birth certificate of other family members or are illiterate or simply uninformed. To avoid these problems the consulting room is providing a service of information on public subsidies as well as help in requiring the birth registration and the identity documents. Here I will investigate to which extent the lack of documents is diffuse and how strong is the relation between family and institution.

Firstly the share of mothers incoming to the maternity with no identity card is the 19% which means an absolute number as high as 121 mothers. This is a serious problem not only because such documents are essential if social benefits or other financial assistance from the state are to be obtained but also because the birth registration for the child becomes more complex. The theme of birth registration goes away from the point of my analysis, nevertheless it should be mentioned that it is a matter of utmost importance. Firstly the right of every child to an identity is a fundamental human right and birth registration is a State's official recognition of a child's existence, enabling the right to a name, nationality and family relationship. Moreover it constitutes an important first step in building a culture of protection. Without birth registration, children's access to basic social services such as education and health care may be at risk (Unicef, 2007). Some authors, in a study focused on Romania, argue that there is real danger in discharging a child without identity documents, as they can be sold, trafficked, neglected and, in extreme situations, killed, without any such act being legally reported (Unicef *et al.*, 2005). In almost 300 cases the psychologist and social assistant of the consulting centre I am studying had to stress the importance of registering the child and when needed they helped mothers in obtaining the birth certificate and/or in requiring the identity documents for themselves or for other family members (mainly other sons).

Mothers coming to the maternity with no identity documents affirm they lost them, forgot or never had them. Those parents make a statement about their identity at admission to the maternity ward, but such statements may include false information. In an interview for the 2005 report *The Situation of Child Abandonment in Romania* a nurse from the paediatric department affirms "these mothers are either negligent, or they do this on purpose, but they never have any identity documents with them". (Unicef *et al.*, 2005: pg. 48) It is important to notice that this phenomenon has to be considered together with fugues from the maternity. As earlier noticed a consistent proportion of mothers escape from the hospital after childbirth. In the sample I am considering 61 women (roughly the 10 percent) are "run away" mothers. When asked to justify this behaviour many mothers argue that they were confused ("I didn't know what to do") in fear of taking the responsibility of raising the child ("I was frightened") and alone ("I did not know who to appeal to"). Others argue that they didn't intend to abandon their newborn but they left the hospital for the existence of other children who need to be taken care of at home or to face the situation with the

partner and/or the family (“I did not run away. I went home to talk to my husband about what we should do with the child”)¹⁶.

Table 7: Description of the dataset: Percentage of mothers escaped from the maternity

	Number	Percentage
Mothers escaped from the maternity	61	9.58
Otherwise	576	90.42
Observations	637	100

Eleven mothers declared to have at least one son without an identity document and 8 affirm to have one or more children in lack of birth certificate. Although the phenomenon is affecting only a small part of the database as argued before it should not be undervalued. The proportion of women receiving a social benefit for their offspring is the 74% of mothers that are not at first birth for a total of 268 families. The number of women receiving a pension for poverty are 179 and those with a pension for having a person with handicap in the family are 13. Among the women labelled as “single” those with a single parenthood pension are approximately the 31% (52 mothers).

The percentage of woman not registered to the family practitioner is low, only 9 woman, but the result rise awareness if we think that 20 mothers (either registered or not) declare they didn’t visit any doctor during the pregnancy.

According to some studies also ethnicity counts in terms of a higher probability of child separation. The 2005 report *The Situation of Child Abandonment in Romania* mentions that 57% of mothers who had abandoned their children were Roma. Moreover the study argues that “as child bearing begins earlier in traditional Roma communities, young Roma women from poor communities are a particularly vulnerable group for early pregnancies and potential abandonment” (Unicef *et al.*, 2005). Although controlling for ethnicity in my study would have been very interesting the reports compiled by the psychologist where not reporting this kind of information. In fact being part of the Roma community can be a source of discrimination in Romania. Therefore to maintain the trust relationship between

¹⁶ In the Unicef report (2005) is compiled a complete list of mother’s answers to the question “Why did you run away from the maternity ward and not appeal for child protection services?”. Some of those answers are reported here, other considerations are taken from personal communications with: Social Assistant in the hospital of Rm. Valcea, (Ro) and the Psychologist of the project in Braşov (Ro).

doctor and patient as well as to limit the feeling of hardship of the mother the psychologist of the centre prefer not to ask this type of information¹⁷.

For our analysis it is also very important the characteristic of the child at birth. We start analyzing the gender of children in our set of data. The topic is relevant since the sex of the child may influence the abandonment decision of a woman. In fact we might expect that son is more likely to be raised in the family than a daughter, because of higher expected economical returns. On the other hand some studies focused on Romania (Unicef *et al.*, 2005, Unicef 2006a) argue that parents may be more prone to abandon girls believing that boys are better able to take care of themselves.¹⁸ This thought seem to fit quite well with the situation of street children as well as the children in Placement Centres and seem to be less applicable to children that may be given in care to maternal assistance. Therefore I prefer to assume that the gender bias here goes in the direction of a preference for males justified mainly by higher possibilities of future income, care of parents in old age and no expenditure in terms of bride-money. We will analyze in detail the effect of gender on child abandon in the next chapter. For the moment we notice that roughly 55% of the child in my analysis are girls while the boys are approximately 45%. This means that a higher percentage of woman with a female child are asking the intervention of the consulting room than those with a male child. This data is even more representative if we compare it with official statistic. In fact according to the World population prospect 2006 by UNDP the female/male ratio at birth in Romania in 2005 is about 94.4 girls per 100 boys (which means approximately 49% female and 51% males).

Table 8: Description of the dataset: Sex of the child

Sex of the child	Number	Percentage
Female	320	55.08
Male	261	44.92

¹⁷ In my sample a possible way of studying the belonging to Roma community was to work on villages with high percentage of Roma residence or working on surnames of parents to depict the ethnicity of the family. To perform this kind of analysis in a proper way a extremely strong understanding of the social and cultural characteristics of the Roma community of the region of Braşov would have been required. Surely this would be an interesting possible way of extending this kind of studies.

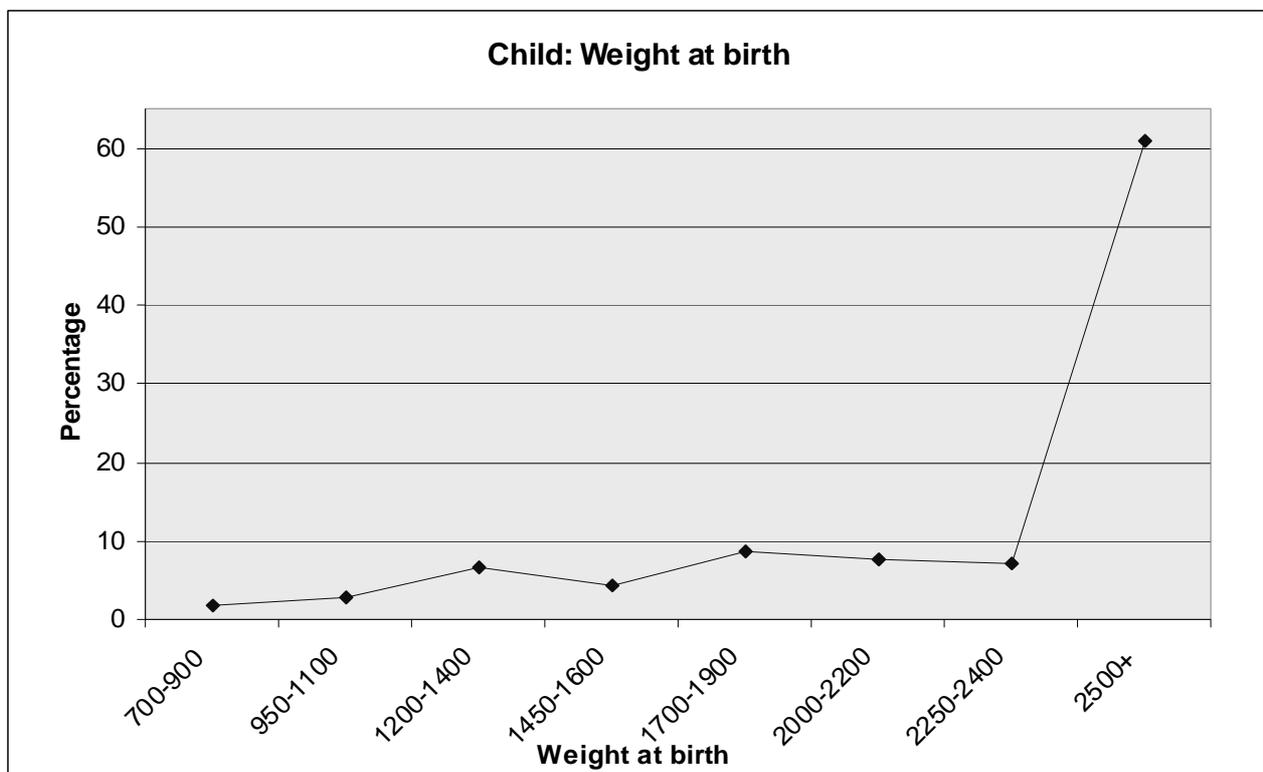
¹⁸ Although statistics on the number of children living in the street are hard to interpret due to the difficulties in quantify the extension of the phenomenon several studies argue that about two thirds of street children in Romania are boys and only one third girls. "The explanation stressed for this difference is that girls are more vulnerable on the streets, and more likely to become victims of emotional and physical abuse, including sexual abuse. Thus many families prefer to keep their daughters at home." (Unicef, 2006: p. 55).

Moreover we expect that sickness at birth as well as underweight and pre-term to be factors that may determine the separation decision. Sickness at birth may reflect higher costs for the family as well as higher efforts to raise the child. In a study (Unicef *et al.*, 2005) performed in Romanian Placement Centre over the period 2003-2004 the “sickness of the child” is reported as one of the expressions used during interviews by mothers to justify the decision to give up the child, either temporarily or permanently.

Also birth weight is one of the relevant determinants for abandoning a child (Unicef *et al.*, 2005). According to interviews with neo-natologists “the risk of abandonment is higher for the premature baby, especially if the mother has other children at home; mothers run away from hospital, some returning after a certain period (2-3 weeks). In other cases, the child is abandoned by its mother who fears not being able to cope with a premature baby requiring special care” (Unicef *et al.*, 2005: pg. 27).

Our sample is characterized by a very high level of underweight children. The mean weight is 2.572 kg, and the values ranges from a minimum of 700 grams up to 4.200 kg. Approximately 39 per cent of the children considered in the dataset are underweight at birth¹⁹. Graph 8 (and Table A.16) show the distribution of child weight, stressing the emphasis on the values below 2,500 kg.

Graph 8: Child: Weight at birth



¹⁹According to common practice underweight is here defined as every weight below 2.500 kg.

The rate of neonatal mortality is here approximately 13 over 1000 births. Which is consistent but slightly higher than average of the country (10 over 1000 births).²⁰

²⁰Source: The State of the World's Children 2009, United Nations Children's Fund (data refers to 2004).

4.2 Analysis

In the last section I described the characteristics of the mothers requiring the help of the consulting centre. Here I will investigate to which extent those factors influence the mother's behaviour. Firstly I would like to clarify some concepts. When the mother is not able to take care of the newborn at home a series of alternative possibilities can be implemented:

- **Maternal Centre:** The mother and the child are received in a family type residential centre. There they are provided with accommodation and feeding for a period of time in which the mother is supposed to partially solve her problems.
- **Child integration in the extended family:** The child is in care of a parent usually grandparents or uncles.
- **Maternal Assistance:** The child is temporary entrusted to a maternal assistant which is a substitute family that has to provide care for him. The substitute family is trained and economically supported in this work. Although separated the child can maintain relations and contact with his/her natural family.
- **Adoption:** The mother/family can decide to ask the adoptability of the newborn.²¹

In this study I define abandonment (or separation) as all cases in which the mother relinquished her responsibility to care for the child and physically separated herself from the baby. In this definition I included both cases of mother maintaining her rights on the child and cases when the mother/family gives the consent for adoption.²² Moreover, even though maternal centre and integration of the child with the extended family are considered as successful cases I will concentrate my analysis on the situation solved with the child integrated at home with his/her natural family or mother.

The analysis is aimed at understanding to which extent the socio-economic factor influence the mother's abandonment decision. In order to explain these phenomena I constructed the variable "Prevention" which is a dummy variable taking the value 1 when,

²¹ International adoption are closed since 2001.

²² Sometimes a different definition of "abandonment" and "separation" is given. In fact, abandonment is often used to refer to a situation in which parents give their consent for adoption and therefore renounce to have any right on the child. While separation is used to define a relationship between child and parents when those maintain their right on the child and although they relinquished their responsibility and are physically separated from him/her the baby is not adoptable. Since in my database cases of adoptability were really rare and investigating this phenomena was not the aim of my work I decided for a different definition and I used separation and abandonment as synonymous.

after the consulting with the psychologist the mother decide, to bring the child at home with her and raise him. The variable takes value 0 otherwise. I run a probit model with prevention as a dependant variable and a series of socio economic indicators as independent variables. Table 9 shows the results in coefficient form while Table 10 shows the marginal effects.

Table 9: Probit

	Prevention					
	(1)	(2)	(3)	(4)	(5)	(6)
Mother Age	-0.011 (1.02)	-0.013 (1.23)	-0.015 (1.39)			
No responsibility of the father	-0.762 (3.19)***	-0.750 (3.15)***	-0.790 (3.31)***	-0.769 (3.18)***	-0.805 (3.32)***	-0.915 (2.44)**
Income	0.001 (3.41)***	0.001 (3.42)***	0.001 (2.98)***	0.001 (3.67)***	0.001 (3.24)***	0.001 (2.84)***
Negative Family	-0.572 (2.31)**	-0.437 (1.72)*	-0.412 (1.62)	-0.428 (1.67)*	-0.405 (1.58)	-0.411 (1.14)
Sickness at birth	-0.635 (1.99)**	-0.662 (2.08)**	-0.695 (2.16)**	-0.690 (2.06)**	-0.734 (2.17)**	-0.806 (1.77)*
Secret Pregnancy		-0.563 (2.07)**	-0.657 (2.40)**	-0.562 (2.01)**	-0.658 (2.34)**	-0.383 (0.91)
Escape			-0.794 (3.17)***		-0.746 (2.94)***	-0.958 (2.92)***
Mother aged 13-16				-0.247 (0.60)	-0.239 (0.57)	-0.234 (0.29)
Mother aged 17-20				-0.308 (0.93)	-0.285 (0.84)	-1.091 (1.78)*
Mother aged 21-24				-0.262 (0.76)	-0.274 (0.78)	-0.920 (1.47)
Mother aged 25-28				-0.280 (0.80)	-0.277 (0.77)	-1.363 (2.11)**
Mother aged 29-32				-0.148 (0.39)	-0.198 (0.51)	-1.139 (1.73)*
Mother aged 33-36				-0.938 (2.33)**	-0.908 (2.21)**	-2.010 (2.71)***
Mother aged 37-40				-0.593 (1.35)	-0.650 (1.46)	-1.695 (2.34)**
Number of the child						0,0875 (2.03)**
Constant	1.037 (3.91)***	1.125 (4.17)***	1.276 (4.58)***	1.102 (3.51)***	1.205 (3.71)***	1.643 (2.78)***
Observations	432	432	432	427	427	281

Absolute value of z statistics in parentheses

*** significant at 10%; ** significant at 5%; *** significant at 1%**

Table 10: Dprobit

	Prevention					
	(1)	(2)	(3)	(4)	(5)	(6)
Mother Age	-0.003 (1.02)	-0.004 (1.23)	-0.004 (1.39)			
No responsibility of the father	-0.258 (3.19)***	-0.253 (3.15)***	-0.267 (3.31)***	-0.260 (3.18)***	-0.272 (3.32)***	-0.289 (2.44)**
Income	0.000 (3.41)***	0.000 (3.42)***	0.000 (2.98)***	0.000 (3.67)***	0.000 (3.24)***	0.000 (2.84)***
Negative Family	-0.187 (2.31)**	-0.138 (1.72)*	-0.128 (1.62)	-0.134 (1.67)*	-0.125 (1.58)	-0.111 (1.14)
Sickness at birth	-0.213 (1.99)**	-0.223 (2.08)**	-0.234 (2.16)**	-0.234 (2.06)**	-0.249 (2.17)**	-0.251 (1.77)*
Secret Pregnancy		-0.184 (2.07)**	-0.218 (2.40)**	-0.183 (2.01)**	-0.218 (2.34)**	-0.103 (0.91)
Escape			-0.270 (3.17)***		-0.251 (2.94)***	-0.304 (2.92)***
Mother aged 13-16				-0.074 (0.60)	-0.071 (0.57)	-0.060 (0.29)
Mother aged 17-20				-0.090 (0.93)	-0.082 (0.84)	-0.325 (1.78)*
Mother aged 21-24				-0.077 (0.76)	-0.080 (0.78)	-0.264 (1.47)
Mother aged 25-28				-0.083 (0.80)	-0.081 (0.77)	-0.419 (2.11)**
Mother aged 29-32				-0.043 (0.39)	-0.057 (0.51)	-0.355 (1.73)*
Mother aged 33-36				-0.327 (2.33)**	-0.314 (2.21)**	-0.675 (2.71)***
Mother aged 37-40				-0.196 (1.35)	-0.216 (1.46)	-0.578 (2.34)**
Number of the child						0.029 (2.03)**
Observations	432	432	432	427	427	281

Absolute value of z statistics in parentheses

*** significant at 10%; ** significant at 5%; *** significant at 1%**

In the first regression we see that the condition of the child at birth are significant: sickness of the newborn has a negative impact on the probability of prevent abandonment. The result is significant at a 5% level. As expected help from the family and from the father in raising the child are important in the separation decision. Firstly when the father is not willing to recognize his son we have negative and significant effect on the probability to prevent abandonment. In fact the dummy variable “no father responsibility” is significant and has a negative value (marginal effect -0.258). Secondly the family of the mother not been supportive has a negative significant impact on abandonment prevention. Moreover we see that the income is significant at 1% level thought having a 0 value.

In all these regression mother age turned out not to be significant. To investigate in detail the reasons of this result I included in the regression a set of dummy variables, one for each age group. For example the group “mother aged 13-16” includes all woman in age between thirteen and sixteen years old, upper and lower bound included. We will analyze the effect of those variables in regressions 4-6.

In regression 2 I added the variable “secret pregnancy”. This regressor takes value 1 when the pregnancy is fulfil secretly from the family and 0 otherwise. It is significant at 5% level and has a negative value. Therefore having a secret pregnancy has a negative effect on the prevention of child abandonment (marginal effect -0.184). Adding this variable didn't influence the other coefficient and results remained similar but the “negative family” is less significant (now at a 10% level). The reason may lie in the correlation between those two coefficients (0.29) in fact as argued before pregnancy is often kept secretly by young mothers to avoid family discussions. In regression 3 I added the case of mother escaping from the maternity of the hospital. It is a dummy variable taking value 1 in case of fugue and 0 otherwise. As expected this regressor has a negative sign stating that the woman running away from the hospital after birth has negative impact on the probability that she will then decide to raise the child. This latter regressor is significant at 5% level.

When adding the age groups set of dummy variables to the model the coefficients of the previously discussed regressors remained significant and with the same sign. Of the groups inserted the only one that is significant is the one of mothers aged between 33-36 years old. The regressor has a negative sign indicating that this group is particularly vulnerable to child abandonment. It would be interesting to explore weather this result is related or not with the other births of mothers. In fact in this age group mothers are likely to have many sons to raise and therefore may experience problem in taking care of another child. Unfortunately I have information about the number of births for mother only for a smaller part of the dataset. Therefore adding the variable “number of the child” to the model reduces the observations to almost half of them and make the model incomparable with the previous one (regression 6). Another important consideration concern mothers aged 24 years old or younger (age groups: 13-16; 17-20; 21-24). In the previous section we saw that the majority of woman (57%) asking the help of the consulting room or sent there by the medical staff were younger than 24 years old. Also, a proportion as high as the 30% were teenagers. Therefore, of the woman in need of the help by the centre most of them are young or extremely young. Nevertheless at the moment to take a decision weather to abandon their newborn those mothers does not act differently that those of

other age groups and been a teenager or a young woman does not affect the probability of child abandonment.

To better understand this point we can look at a variable describing whether a mother changed or not her decision to separate from the child before and after being part of the project. This is a dummy variable taking value 1 when the mother entered the consulting room with the thought of separating herself from the child and after the help received she opted for raising the newborn. This variable needs to be considered with some caution since it describes only cases in which the mother after birth was convinced of abandoning her son, while in most cases mothers are confused and preoccupied but didn't take a decision already. Nevertheless the variable can give us some interesting results. Among mothers aged 17-20 and 21-24 the number of women changing their resolution after being part of the project are a relatively high percentage: respectively the 11 and 15 per cent of women in the age group. On the other hand mothers aged 33-36 rarely change their mind in abandonment decisions. Only 3% of the women in this age group decide to raise their child although firstly stating they would opt for separation. This result does not seem sufficient to affirm that the project has better results for young women. Nevertheless it is giving us an interesting result. Among all women considered the majority are young but of those a relatively high share that at a first step would abandon their newborn in a second time chose to raise the child. On the other hand a low percentage (7%) of mothers requiring the help of the consulting room is aged between 33 and 36 years old but of those a small share change drastically her separation decision after being part of the project (Table A.17).

We run now a new set of regressions to investigate aspects related to antecedents of abandonment, marital status, and gender bias. Results are described in Table 11 and Table 12.

Table 11: probit

	Prevention				
	(1)	(2)	(3)	(4)	(5)
Mother Age	-0.008 (0.49)	-0.008 (0.49)	-0.011 (0.61)		
Sickness at birth	-0.818 (1.72)*	-0.828 (1.74)*	-0.968 (1.81)*	-0.967 (1.82)*	-0.983 (1.86)*
Income	0.001 (2.48)**	0.001 (2.22)**	0.001 (2.60)***	0.001 (3.17)***	0.001 (3.18)***
Other child abandonment	-0.547 (1.70)*				
First-born separated		-0.673 (2.24)**			
No responsibility of the father			-0.652 (2.30)**	-0.571 (2.12)**	-0.576 (2.14)**
Single mother			-0.949 (4.08)***	-0.954 (4.52)***	-0.947 (4.47)***
Gender				0,302083 (2.13)**	0,302778 (2.13)**
Twins					0,113889 (0.35)
Constant	1.067 (2.33)**	1.108 (2.40)**	1.467 (3.23)***	0,634722 (4.94)***	0,626389 (4.80)***
Observations	227	228	228	254	254

Absolute value of z statistics in parentheses

*** significant at 10%; ** significant at 5%; *** significant at 1%**

In the first regression we analyze the effect of antecedent institutionalization on child abandonment. The variable “Other child abandoned” is a dummy taking value 1 when another son of the mother is separated and 0 otherwise. The regressor is significant and has a negative sign indicating that precedent institutionalization negatively influence the probability of prevention (marginal effect -0.152). The idea is that if a family already chose for abandoning a son it is likely to repeat the same choice in the future. The result of the regression confirms that taking an abandonment decision has a negative impact on the probability of raising a child at home. The same result appears when we include in the regression a dummy for the separation of the first-born. Having the older sibling abandoned has a negative effect on the probability of prevention. The result is significance at 5% level. It would be interesting to include in the regression information about other siblings separation. As argued in the description of the dataset I constructed a set of dummies for child abandonment up to the 10th sibling of the newborn. Nevertheless those information are available only for a subsample of the database and running a regression with those (or at least some of those) variables would imply losing too many observations.

In the third regression I added “no father responsibility” and “single mother”. As discussed earlier the father not willing to recognize the child has a negative impact on the probability of preventing abandonment. Here I included in also single mother to check weather this result was not drove by the mother being single. Both coefficients are significance and have negative sign (marginal effect -0.188 -0.239).

Table 12: dprobit

	Prevention				
	(1)	(2)	(3)	(4)	(5)
Mother Age	-0.002 (0.49)	-0.002 (0.49)	-0.002 (0.61)		
Sickness at birth	-0.253 (1.72)*	-0.259 (1.74)*	-0.317 (1.81)*	-0.328 (1.82)*	-0.334 (1.86)*
Income	0.000 (2.48)**	0.000 (2.22)**	0.000 (2.60)***	0.000 (3.17)***	0.000 (3.18)***
Other child abandonment	-0.152 (1.70)*				
First-born separated		-0.195 (2.24)**			
No responsibility of the father			-0.188 (2.30)**	-0.170 (2.12)**	-0.172 (2.14)**
Single mother			-0.239 (4.08)***	-0.253 (4.52)***	-0.251 (4.47)***
Gender				0,073611 (2.13)**	0,073611 (2.13)**
Twins					0.038 (0.35)
Observations	227	228	228	254	254

Absolute value of z statistics in parentheses

*** significant at 10%; ** significant at 5%; *** significant at 1%**

In the forth regression I checked for gender bias in the decision of child abandonment. The variable is again a dummy variable and it takes value 1 when the child is a male and 0 when she is a female. The coefficient is significance at 5 % level and have a positive sign indicating that being a boy rather than a girl increases the probability of prevention. A possible explanation for this is related with higher possibilities of future income, care of parents in old age and no expenditure in terms of bride-money.

Finally in regression 5 I added a variable to check weather the child being twins had an impact on the abandonment decision. In fact it might be possible that mothers facing economical difficulty or woman preoccupied about the role of mothers are even more vulnerable in front of a twin pregnancy. Nevertheless in my study this variable has no significant effect showing that there is no discrimination for twins.

In a third set of regressions I investigate the effect of the social capital on the abandonment decision. The results are shown in Table 13 and 14. Receiving social help either as poverty pension, single parenthood subsidy or a benefit for the other son has a negative effect on the probability of abandoning the newborn (regressions 1, 2 and 3). Those coefficients are significance at a 1% level. Those repressors are by definition related with income. In fact the earnings of those pension are considered as part of income. Therefore it is likely that some of the effect that income has on the probability of child abandonment to be captured by those variables.

In regression 4 I checked to which extent the mother been homeless could influence the separation decision. It is evident that not having a house has a negative impact on the probability of prevention.

Table 13: probit

	Prevention			
	(1)	(2)	(3)	(4)
Mother Age	-0.005 (0.44)	0.012 (0.81)	-0.021 (1.01)	0.021 (1.43)
Sickness at birth	-0.575 (1.83)*	-0.816 (1.94)*	0,098611 (0.21)	-0.841 (1.79)*
Income	0.001 (1.91)*	0.000 (0.57)	0.001 (1.69)*	0.000 (1.13)
Receive social pension	0,463194 (3.53)***			
Receive benefit for the other son		0,556944 (3.50)***		
Receive single parenthood pension			0,647222 (2.59)***	
Homeless				-0.777 (1.90)*
Constant	0,447917 (2.50)**	0.038 (0.09)	0,354861 (1.09)	0,328472 (1.38)
Observations	432	275	133	292

Absolute value of z statistics in parentheses

*** significant at 10%; ** significant at 5%; *** significant at 1%**

Table 14:dprobit

	Prevention			
	(1)	(2)	(3)	(4)
Mother Age	-0.001 (0.44)	0.003 (0.81)	-0.007 (1.01)	0.005 (1.43)
Sickness at birth	-0.190 (1.83)*	-0.263 (1.94)*	0.045 (0.21)	-0.270 (1.79)*
Income	0.000 (1.91)*	0.000 (0.57)	0.000 (1.69)*	0.000 (1.13)
Receive social pension	0,114583 (3.53)***			
Receive benefit for the other son		0,1625 (3.50)***		
Receive single parenthood pension			0,190972 (2.59)***	-0.245 (1.90)*
Homeless				
Observations	432	275	133	292
Absolute value of z statistics in parentheses				

* significant at 10%; ** significant at 5%; *** significant at 1%

5. Conclusions and policy prescriptions

In the previous section I described the characteristics of the mothers beneficiaries of the project and I identified some of the factors that may influence in the abandonment decision. As depicted the phenomena of child abandonment in Romania is very complex and it is involving a wide and variegated series of aspects. My analysis was focused on the area of Braşov and on the mothers that were requiring help from the consulting room in the maternity of the hospital. The aspects that influence their decision on child abandonment are various. Nevertheless I can summarize some of the main results. Poverty seem to be a significant underlying factor. In fact income and subsidies have a positive effect on child abandonment prevention. On the other hand also social indicators as family breakdown and single parenthood are determining aspects in the phenomena of child abandonment. Moreover some characteristics of child at birth as gender and sickness of the newborn may influence the separation decision. Having a son rather than a daughter seem to have a positive impact in the probability of abandonment prevention. On the other hand giving birth to a child affected by disease may have negative impact on the probability of choosing to raise the newborn. Furthermore I showed that antecedents of institutionalization matters in terms of other sons separated in the family. Having a sibling that has been abandoned influence negatively the probability of child abandonment prevention for the newborn.

As depicted the factors influencing child abandonment are many and extremely different one to another. Therefore it seem impossible to give policy prescription that pretend to be valid universally. Despite of this fact I will try to present some suggestions that may be combined together in an attempt to reduce the child abandonment rate.

- Firstly I would propose to improve among vulnerable groups the information on public subsidies. As argued many of the mothers I studied seem to be unable to apply for those social benefits being illiterate, in lack of necessary documents or not well informed. Advertisements could be useful in informing the woman of the existence of benefits as: poverty pension, single parenthood benefit, handicap pension, or child subsidy. Also, a possibility would be to implement consulting centres at the local level where a mother can be helped in preparing documents for the applications or accompanied to municipality.
- Secondly a improvement of information on contraceptive use and reproductive health seem to be needed. A lack of information on contraception is documented by the relatively high share of woman in the consulting room asking information about

contraceptives and/or the implementation of the intrauterine device. And many ask information on the sexually transmissible illnesses. Many information on this topic are given at school. Surely a good practice would be to maintain the emphasis and the stress on those lectures. But this practice would not reached the most vulnerable group: mothers out of the school system. To reach those woman I would propose newspapers, television and wall charts advertisements on the topic.

- Finally I would suggest doctors, nurses and obstetricians to follow brief trainings on the theme of child abandonment. As said the proportion of woman escaping form maternities is very high, at a 10% of the woman in my study. One of the main reason to a mother to try the fugue after birth is fear, sense of inadequacy and incapacity to face the new situation. The medical staff reassuring those women before and after the pregnancy, on the support that the state can provide them in terms of subsidies, medical care or in coping with underweight and sickness child would may be very useful to reduce the number of “run-away” mothers. This would affect positively both the woman and the child in terms of abandonment prevention.

These polices far from been exhaustive can be good hints in a attempt to reduce abandonment rate.

Finally as the topic is very complex and articulated I believe that other studies on related aspects would be very useful. A comparison of the causes of child abandonment across the country as well as across the region would be indeed interesting. Also works aimed to demonstrate whether ethnicity or religion has an effect on abandonment would exploit an not enough developed theme and could contribute to the understanding of a very articulated and difficult concept.

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Appendix 1:

Table A.1: Description of the dataset: Age of mothers.

Mother age	Number of mothers	Percentage			
13	5	1,09			
14	4	0,87			
15	21	4,59			
16	27	5,90			
17	31	6,77			
18	16	3,49			
19	28	6,11			
20	39	8,52			
21	30	6,55			
22	23	5,02			
23	21	4,59			
24	19	4,15			
25	17	3,71			
26	25	5,46			
27	25	5,46			
28	17	3,71			
29	9	1,97			
30	20	4,37			
31	15	3,28			
32	8	1,75			
33	7	1,53			
34	8	1,75			
35	5	1,09			
36	10	2,18			
37	8	1,75			
38	8	1,75			
39	4	0,87			
40	3	0,66			
41	1	0,22			
43	1	0,22			
44	2	0,44			
45	1	0,22			
Total:	458	100			
Variable	Observations	Mean	Std. Dev.	Min	Max
Mother age	481	24,15	6,8	13	45

Table A.2: Description of the dataset: age of fathers.

Father age	Number of fathers			Percentage		
14	1			0,33		
15	1			0,33		
16	1			0,33		
17	5			1,67		
18	10			3,34		
19	21			7,02		
20	18			6,02		
21	14			4,68		
22	14			4,68		
23	21			7,02		
24	18			6,02		
25	9			3,01		
26	17			5,69		
27	16			5,35		
28	9			3,01		
29	8			2,68		
30	17			5,69		
31	14			4,68		
32	8			2,68		
33	10			3,34		
34	10			3,34		
35	11			3,68		
36	5			1,67		
37	3			1,00		
38	6			2,01		
39	4			1,34		
40	9			3,01		
41	6			2,01		
42	2			0,67		
43	2			0,67		
44	1			0,33		
45	1			0,33		
47	1			0,33		
49	2			0,67		
50	2			0,67		
51	1			0,33		
60	1			0,33		
Total	299			100		
Variable	Observations	Mean	Std. Dev.	Min	Max	
Father age	286	27,65734	7,753758	14	60	

Table A.3: Description of the dataset: Number of children per mother:

Variable	Observations	Mean	Std. Dev.	Min	Max
Number of children per mother	369	3,64	2,41	1	13

Table A.4: Description of the dataset: Number of children per mother by age group:

Number of child per woman by age group	
Age groups	Number of child
13-19	1,57
20-24	2,56
25-29	4,42
30-34	5,02
35-39	6,30
40-44	6,50
Observations: 296	

Table A.5: Description of the dataset: Marital status

Variable	Number	Percentage
Unmarried	320	87,43
Married	46	12,57
Total	366	100

Variable	Number	Percentage
Consensual union	256	40,19
Observations: 637		

Variable	Number	Percentage
Broken relationship	50	23,58
Observations: 212		

Variable	Number	Percentage
Occasional relationship	71	27,10
Observations: 262		

Variable	Number	Percentage
Birth out of the wed-lock	6	0,96
Observations:637		

Variable	Number	Percentage
Single mother	122	42,96
Observations:284		

Variable	Number	Percentage
No presence of the father	35	21,47
Observations: 163		

Variable	Number	Percentage
The father is in prison	10	1,57
Observations: 637		

Table A.6: Description of the dataset:

Activity Status - Mother

Mother activity status	
62%	Unemployed
21%	Employed
12%	Daily work
5%	Bagging

Table A.7: Description of the dataset:

Activity Status- Father

Father activity status	
18%	Unemployed
41%	Employed
39%	Daily work
2%	Bagging

Table A.8 Household characteristics

Number of Rooms	Number of household members														Total
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	
1	1	8	15	15	13	18	3	3	3	3	2	0	0	0	84
2	0	3	8	9	8	6	5	7	4	2	1	1	1	1	56
3	0	0	6	5	2	4	1	0	0	1	0	0	0	0	19
4	0	0	0	0	1	0	1	0	1	0	0	0	0	0	3
6	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
Total	1	11	29	29	24	29	10	10	8	6	3	1	1	1	163

Table A.9: Description of the dataset: Education - Mother

The education system		Mother school attendance	Number of mothers	Percentage
		Illiterate	56	31,11
Compulsory	Primary	1	2	1,11
		2	13	7,22
		3	6	3,33
		4	16	8,89
	Secondary	5	9	5,00
		6	6	3,33
		7	14	7,78
		8	23	12,78
		9	3	1,67
Not compulsory	High school	10	13	7,22
		11	8	4,44
		12	6	3,33
	University	University	5	2,78
		Total	180	100

Table A.10: Description of the dataset: Education - Father

The education system		Father school attendance	Number of fathers	Percentage
		Illiterate	7	30,43
Compulsory	Primary	1	1	4,35
		2	1	4,35
		3		0
		4	7	30,43
	Secondary	5		0
		6	1	4,35
		7		0
		8	3	13,04
		9		0
Not compulsory	High school	10	3	13,04
		11		0
		12		0
	University	13		0
		Total	23	100

Table A.11: Description of the dataset: Percentage of mothers escaped from the maternity

	Number	Percentage
Mothers escaped from the maternity	61	9,58
Otherwise	576	90,42
Observations	637	100

Table A.12: Description of the dataset: Percentage of mothers without a valid identity card

	Number	Percentage
Mothers without the identity card	121	19,00
Otherwise	516	81,00
Observations	637	100

Table A.13: Description of the dataset: child registration

	Number	Percentage (among families with at least another child)
Other child with no identity card	11	3,68
Other child with no birth certificate	8	2,68
Observations: 299		

Table A.14: Description of the dataset: social help

	Number	Percentage
Families receiving poverty subsidy	179	28,10
Families receiving handicap pension	13	2,04
Observations: 637		
Families receiving child pension	268	73,83
Observations: 363		
Families receiving single parenthood benefit	52	31,33
Observations:166		

Table A.15: Description of the dataset: Sex of the child

Sex of the child	Number	Percentage
Female	320	55,08
Male	261	44,92
Observations: 581		

Table A.16: Description of the dataset: Weight of the child

Weight at birth - All children		
Weight at birth	Children	Percentage
700	1	0,31
800	1	0,31
850	1	0,31
880	1	0,31
900	2	0,61
950	1	0,31
980	1	0,31
1000	2	0,61
1100	5	1,53
1200	9	2,76
1250	1	0,31
1300	5	1,53
1350	2	0,61
1400	5	1,53
1450	1	0,31
1500	2	0,61
1520	1	0,31
1600	10	3,07
1700	1	0,31
1750	3	0,92
1780	1	0,31
1800	10	3,07
1900	13	3,99
2000	6	1,84
2100	10	3,07
2200	9	2,76

2250	2	0,61
2300	12	3,68
2400	9	2,76
2500	15	4,60
2600	11	3,37
2700	14	4,29
2800	22	6,75
2850	1	0,31
2900	15	4,60
3000	23	7,06
3050	1	0,31
3100	17	5,21
3101	1	0,31
3200	19	5,83
3300	12	3,68
3400	9	2,76
3500	10	3,07
3600	9	2,76
3700	6	1,84
3800	3	0,92
3900	5	1,53
4000	1	0,31
4100	2	0,61
4200	3	0,92
Total	326	100

Variable	Observations	Mean	Std.Dev.	Min	Max
Weight at birth ²³	324	2568,40	778,12	700	4200

Variable	Observations	Mean	Std.Dev.	Min	Max
Weight at birth second twin ²⁴	15	1916,67	639,66	1200	3200

Variable	Number	Percentage
Number of underweight child at birth	181	41,61
Total	310	

Variable	Number	Percentage
Number of underweight child second twin	11	78,57
Total	14	

²³ If it is a twin childbirth this variables only consider the first of the two children. A complete tabulation of the weight of all children (second twin included) is reported in the table above.

²⁴ This variables only consider the second child in a twin pregnancy. A complete tabulation of the weight of all children (first and second twin included) is reported in the table above.

Table A.17: Description of the dataset

	Number of mothers	Number of mothers that changed their decision	Percentage of mothers that change their decision (among mothers in the age group)	Number of mothers requiring help in relationship with the family	Percentage of mothers that request help in the relation with the family (among mothers in the age group)
Mother aged 13-16	30	2	6,67	3	10
Mother aged 17-20	114	13	11,40	12	10,53
Mother aged 21-24	93	14	15,05	4	4,30
Mother aged 25-28	84	12	14,29	4	4,76
Mother aged 29-32	52	5	9,62	3	5,77
Mother aged 33-36	30	1	3,33	0	0
Mother aged 37-40	23	2	8,70	0	0

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