

# New Europe College Yearbook

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# THE (IM)POSSIBLE ALLIANCE AND ITS CONSEQUENCES: THE IMPACT OF TRANSNATIONAL HUMANITARIAN AID AND POLITICS TOWARDS INSTITUTIONALIZED CHILDREN IN ROMANIA (1990-2007)

## Abstract

The paper explores to what extent the Transnational Humanitarian assistance for the Central and Eastern Europe in the 1990s shaped the post-communist transformations of the social sector, using as case study the humanitarian aid for children and the government politics towards institutionalized children in Romania (1990-2007). By humanitarian aid I refer to the material or logistical assistance provided for humanitarian purposes, as it evolved during the twentieth century and culminated with the emergence of a new, transnational humanitarianism, with permanent, professional actors. For this study the social sector includes the policies regarding health, education and sanitation. The paper discusses how the humanitarians understood to work (or not) with the Romanian partners, what was the response of the Romanian government and with what consequences. The text analyses the first and only official scientific tool meant to solve the trust issues of all the parties involved in the humanitarian aid to Romania after the fall of the communist regime (*Study on the difficulties of the Alliance between Romanians and Westerners*).

**Keywords:** Humanitarian Aid, Romania, postsocialism, children, alliance

The fall of the communist regime gave the occasion for massive humanitarian actions towards Romania in what seemed to be a premiere after the end of WWII. In the Romanian case, in the first two weeks the humanitarian mission was a response to what was thought to be a military conflict. The teams sent to Bucharest were composed mostly by physicians.

But very soon, it evolved into emergency aid towards the institutionalized children. Horrifying images of dying children captured mass media attention all over the world. ‘Ceaușescu’s children’ or ‘Ceaușescu’s orphans’ triggered massive humanitarian aid towards Romania. After a short emergency phase, the humanitarian actors decided to stay in Romania for subsequent development projects meant to reform the entire childcare system. Very quickly, the international anti-communist discourse blaming Ceaușescu for the tragedy of the Romanian children evolved into severe criticism towards the entire Romanian society, based on Romania’s unwillingness to reform its residential care system and the active resistance of the local population towards humanitarians.

Important stakeholders, such as the European Community; transnational NGOs; several European countries, decided to scientifically investigate the reasons behind the Romanian reluctance (*Study on the difficulties of the Alliance between Romanians and Westerners*, 1993). During the research, fifteen Romanian academics stressed out what the notion of “alliance” meant to them when referring to humanitarian aid, namely a relation governed by respect, confidence, dignity, in a context where both partners are in need for help. They also suggested that synonyms such as *cooperation* or *co-participation* would better describe the relation between initiators and beneficiaries, as Romania developed along with the “Third World” countries during the 1970s and the 1980s. On the other hand, the Western NGOs insisted that Romanians are communist products, suffering from low self-esteem. Therefore, as beneficiaries, they could not refuse/react to the humanitarian aid even if they did not agree to it. The talks had no significative outcomes. Starting with 1994, important stakeholders, such as Doctors Without Borders, ended their missions in Romania; some (Handicap International) drastically reduced their budgets; while others (Doctors of the World, SERA) transferred their projects to Romanian partners/branches.

I argue that the impossible dialogue between the initiators of the humanitarian aid (European institutions, humanitarian organizations, formal and informal support networks) and the beneficiary (Romania) is the main responsible for the slow-moving transformation of the childcare system in post-communist Romania. In my paper I show how the Romanian case is an example on how humanitarianism requires us to believe that a set of extraordinary circumstances exist, requiring immediate attention and justifies what Nietzsche has called “an excess of history”. This excess hides contingencies, contexts, and alternative explanations with the result

that they are forgotten as inconvenient extras thus stanching any debate over the validity of a claim or idea; in this case, the claim is the naturalness or taken-for-granted nature of humanitarianism.<sup>1</sup>

An overview of the existing literature is by no means a reflection of humanitarian actions worldwide.<sup>2</sup>

In the last 20 years a great deal of works on transnational humanitarian actions has been published.<sup>3</sup> Europe, including Central and Eastern Europe, is rarely present as recipient of humanitarian aid, with one important exception, Yugoslavia during the war. A breakthrough is an issue of *Eastern Journal of European Studies* (2014),<sup>4</sup> with its special section dedicated to humanitarian aid in Eastern Europe after the fall of the communist regimes. As for the post-socialist Romanian case, the humanitarian aid has been addressed through the angle of international adoptions.<sup>5</sup> Further on, since 2017, during a Marie Curie IF project, I investigated the extent to which “gender”, as category of analysis, can be a useful tool in explaining the nature and the impact of humanitarian aid of Western organizations towards children in Europe, between 1980 and 2007, using as case study the relation France (initiator)-Romania (beneficiary).

In order to verify my hypothesis, I rely on Michel Foucault’s genealogical approach to history. Namely, I show that humanitarianism is a historical construction and that it has, and always will, be subject to change.<sup>6</sup> This implies that there is room for resistance to humanitarianism in its current form. Foucault’s notion of genealogy instructs us to look for this change in historical points of intersection that give rise to new historical trajectories. I believe that the fall of the communist regimes in Central and Eastern Europe enabled us to see the contingent and constructed nature of humanitarianism. Furthermore, I adopt a postcolonial theory, which has a critical approach to Western values and epistemology and examines the long-standing effects of colonization. While there no longer exist an overt process of holding land and directly ruling populations, there still remain “elements of political, economic and cultural control”.<sup>7</sup> This on-going form of latter-day colonialism is referred to as neocolonialism. One practice that extended from the colonial to the neocolonial is the duty to care. In the colonial period, this is the belief that the colonizing power has an obligation to ‘civilize’ and ‘improve’ the colonized. In the postcolonial period, these become neocolonial practices under one or the other banners of development, democratizing, or rescuing (from war or disaster).<sup>8</sup> Postcolonial theory holds that part of the success of colonialism and neocolonialism is the insidious nature of its practices and discourse

over a broad sweep of time such that it has now become common sense and therefore largely indistinguishable from the non-colonial.<sup>9</sup>

In 1970 the Romanian communist government reorganized the entire child care system. The novelty was a rigorous medical examination of all children entering the state care system and subsequent segregation of children according to their intellectual capacities. When the communist regime fell in December 1989, 125,000 children were included in the care system.<sup>10</sup> During the first post-communist decade, the Romanian authorities failed to address the problem and kept in place both the legislation and the communist practices that sentenced all abandoned, disabled children to lives in institutional settings. Only after 1997 did Romania take important steps to reorganize the childcare system, prioritizing foster care over residential care.<sup>11</sup> The government, with the support of several NGOs, closed down many of the old, larger orphanages. The network of foster families proved to be a success, absorbing the majority of healthy institutionalized orphans. There was also progress with respect to the institutions hosting disabled children, which were gradually transformed into smaller, better-equipped facilities. Additionally, a national network of social workers was set up in order to prevent the risk of abandonment. This last measure proved to be less successful. A lack of progressive approaches to the welfare system and a long, painful transition to a market economy undermined efforts to reduce rates of abandonment.<sup>12</sup> The only alternative to long-time institutionalization remained adoption, both national and international. Between the 1970s and the 1980s, the number of national adoptions remained constant, but relatively insignificant, and they were not a solution to rampant child abandonment.<sup>13</sup> Inter-country, or international/transnational adoption proved to be a better solution. After the Second World War, Romania agreed, for humanitarian reasons, to care for children coming from war zones. Decree 137/1956 reinforced the idea that Romania could receive children as well as send them abroad in special circumstances and only with the direct consent of Romania state's leader. After 1965 communist Romania used this provision in order to send thousands of children abroad for international adoption. The phenomenon exploded after the fall of the communist regime. The number of abandoned children that left Romania between 1990 and 2004 temporarily alleviated pressure on the childcare system. Ultimately, scandals surrounding the existence of an allegedly black market for adopted Romanian children as well as EU pressure forced Romania to issue a moratorium, in 2001, on international adoption. The procedure was finally outlawed in 2005.<sup>14</sup>



To analyze the nature of the humanitarian commitment towards Romania, this paper is structured in two parts. The first one discusses why and how the Romanian case, as beneficiary of the humanitarian aid, was constructed, the stakeholders involved in the humanitarian aid for children (local and European institutions, humanitarian organizations, formal and informal support networks, the different categories of children that benefited from it) and the targeted problems (prevention of violence and protection, targeting and distribution of relief, health and reproductive rights, nutrition and household food security, income generation and skill training, information and advocacy, HIV/AIDS). Finally, I shall discuss how the humanitarians understood to work (or not) with the Romanian partners and what was the response of the Romanian government. I shall use as case study the first and only official scientific tool meant to solve the trust issues of all the parties involved in the humanitarian aid to Romania after the fall of the communist regime (*Study on the difficulties of the Alliance between Romanians and Westerners*).

The paper draws on previous research,<sup>15</sup> as well as new documentation, in order to examine the humanitarian aid for children in Romania. Most of the documentation came from private archives of the four most important transnational NGOs that had missions in Romania: Médecins Sans Frontières (Doctors Without Borders), Médecins du monde (Doctors of the World), Handicap International and Care International-SERA. Retrieving information from these sources proved to be a test. First, in all four cases access is granted on formal request. Second, every organization had its own vision regarding the importance of collecting and preserving the follow up of its projects. Therefore, I had the methodological challenges of navigating across very well-preserved archives, but also recovering documents stored on 30-year-old floppy disks. I also conducted a campaign to record oral history, interviewing former humanitarian personnel working in childcare institutions, former Romanian personnel working for the transnational NGOs and beneficiaries. Many humanitarians published their *memoirs*. In this study, I use several similar publications which added a new methodological endeavor, namely the risk, of being ‘captive’ to our sources. In the history of humanitarianism, this perspective may produce a false sense of the importance and extent of humanitarian aid. NGOs and governments have always justified donations and investments by describing aid as transformational. To address this risk, this paper also uses extensively Romanian sources (archives, press).

## **The framework of intervention**

### ***Romanian Revolution***

In December 1989, Romania experienced what is called the 'Romanian Revolution', a violent outbreak against the communist regime that killed over 1,000 people and seriously injured another 3,000. For ten days, 16-25 December, first the military, then unidentified shooters, targeted the civil population in the cities all over the country but especially in Timisoara and Bucharest, the capital. All the foreign journalists, already present in Bucharest, broadcasted live the violent events, insisting on what appeared to be a civil war and on the important number of casualties. It is in this context that the French Government decides very quickly, on 22<sup>nd</sup> of December, to send humanitarian medical help for the Romanian population. Médecins du Monde (MdM) and Médecins sans Frontières jumped to the occasion. The French official, chief of this mission in Romania, was the French minister for Humanitarian Aid, Bernard Kouchner. The charismatic humanitarian co-founded Médecins sans Frontières (Doctors Without Borders) in 1971, organization he left in 1979, only to establish Médecins du Monde (Doctors of the World), a year later, in 1980.<sup>16</sup>

Horrifying images of dying children seized mass media attention all over the world. 'Ceaușescu's children' or 'Ceaușescu's orphans' triggered massive humanitarian aid to Romania.<sup>17</sup> At that time, nobody differentiated between the children living in ordinary orphanages and those confined in neuropsychiatric hospitals. The media coverage stated that all 120,000 abandoned Romanian children, undesired products of the communist pronatalist policy, were placed in orphanages and were fighting for their lives. The European Commission, NGOs, several European states, such as France, Germany and Switzerland, and ordinary individuals came to Romania to help abandoned children by working in different childcare institutions or seeking to adopt orphans in order to save their lives. About 1,200 international NGOs were active in Romania in 1990. Without any real coordination from the new Romanian authorities, although such an organization officially existed,<sup>18</sup> many of the Western humanitarians were traveling through literally dark country roads looking for hidden orphanages.

***The actions***

Even the French NGOs that benefitted from a national coordination unit had problems identifying and covering the needs of Romanian children placed in state institutions. National and institutional rivalries between humanitarians also undermined the fieldwork. Very quickly, the international anticommunist discourse blaming Ceaușescu for the tragedy of the Romanian children evolved into a severe criticism towards the entire Romanian society. The first obstacle was the decision of the Romanian government to distribute humanitarian aid not to the children, as the donors intended, but to the Army and, eventually, to sell it to the general population. Such a measure undoubtedly answered public demand. Anonymous, ordinary Romanians wrote to the press and public television to ask for a fair distribution of aid: “those handicapped children are going to die anyway, they are unsalvageable, they are garbage, but our children that starve at home are the future of the country”.<sup>19</sup> The NGOs’ decision to control distribution themselves only reinforced the general perception of the Other, clearly identified as the category of unrecoverable children. One Médecins Sans Frontières (MSF) report mentioned:

When we speak with the [Romanian] staff, we understand that most see the children of the *leagăn*<sup>20</sup> as being different; they cannot see any resemblance with their own. Sometimes I even have the impression that they are no longer “identified” as children, and this observation scares me.<sup>21</sup>

In a second step, the Romanian government reduced by half the budget for childcare institutions and chose to maintain the communist law (3/1970) that widely promoted residential institutions, the opposite of what the international community expected from Romania. During the first post-communist decade, periodical medical examinations and the classification of children as healthy or unrecoverable, with subsequent institutionalization in specialized establishments, continued undisturbed.

The important transnational NGOs divided the Romanian territory between different national branches, while smaller NGOs used Romanian contacts or just randomly picked up its beneficiaries. Subsequently, the repartition of international intervention was uneven among the different regions. Moreover, each organization privileged a certain type of institution. MSF, for example, took over all of the institutions for children in Constanta county, with the exception of the one hosting unrecoverable

children. On the other hand, EquiLibre concentrated its activities on the establishments for unrecoverable children. In some cases, the institutions located closer to Bucharest or to the Western border had the aid of three or even more NGOs at once, not with the best results, as different activity reports showed:

The Cernavoda *leagăn* received a lot of media coverage and attracted NGOs from all over the world. I don't know how many came with more or less realistic projects. I know the situation of some orphanages where two or even three NGOs fight for the right to work. The Romanian staff no longer knows who to believe, who to refer to and, of course, it is the children who pay the consequences. These "wars" between NGOs revolt me. They are sterile and ridiculous fights. Yet, we are part of the battle.<sup>22</sup>

The same situations had been reported for other institutions, such as the *leagăn* of Vânjuleț for unrecoverable children or the orphanage in Vaslui.

Another characteristic of the humanitarian missions in Romania (but not only) was the unilateral, Western decision, on the nature of aid. The convoys and the humanitarian teams arrived in Romania in total ignorance of the Romanians' real needs. Soon, the humanitarians wrote to their headquarters, describing the awkwardness and the absurdity of the situation:

The help, which often arrives without warning, from several countries, does not always correspond to the needs of the orphanage. Because of that, we find ourselves in front of a huge pile of clothes in a storage room that has become too small.<sup>23</sup>

Once the humanitarians learned the Romanian reality, they started to acknowledge the false premises that triggered the humanitarian crisis, namely the tragedy of the abandoned Romanian children, as only consequence of the pronatalist communist policies. Both humanitarians and the post-communist authorities believed that renouncing the abortion ban would solve the problem of social orphans. Despite the drop in the birth rate by 38 percent, the number of abandoned children did not decrease at the same rate. In 1996, UNICEF determined that at least 120,000 children were still in the residential system, equally divided between standard orphanages and special schools or homes for deficient children, the same homes that caught the attention of international

mass media and triggered humanitarian intervention in January 1990. Therefore, the humanitarian mission, once again took a new turn, towards development projects:

Sometimes I wonder what our generous contributions will cost the Romanians. We didn't get it in the first place. Maybe we needed to address the problem of child abandonment by working with families at risk. Development projects certainly have their limits and pitfalls, but can we really escape them? Usually, the North and the South never meet because they do not live in the same reality, because they are different in the very essence of their existence. But Romania is a European country and this is troubling for us. It is an integral part of the northern world and we do not usually equate it with developing countries. So, since the data we had has changed: what place should we take?<sup>24</sup>

Overall, though, the humanitarian missions managed to identify and provide emergency help the most vulnerable categories of institutionalized children: Roma, disabled and those with AIDS. The civil war in former Yugoslavia, alongside the general discontentment towards Romania's unwillingness to reform its residential care system, led to a decline in humanitarian efforts toward the institutionalized children. Important stakeholders, such as MSF, ended their missions in Romania; some (Handicap International) drastically reduced their budgets, while others (Doctors of the World, SERA) transferred their projects to Romanian partners/branches.

### ***The people***

A distinction must be made between the different types of Western humanitarian personnel (informally called expats): full time, permanent employees of the NGO's, short time working contracts for 3 up to 12 month called volunteers (*volontaires*) and unpaid volunteers with shorter missions, 1-6 months (*bénévoles*). The time frame of my research coincides with process of "professionalization" of the humanitarian field, this meaning a significant raise of permanent positions. For example, in 1995, MSF had 147 permanent positions (100 at the headquarters) and 352 non-permanent positions for the field operations (80 were short time contracts and the others were volunteers). The ratio between the permanent employees and the volunteers (paid or not) remained 1 to 10. As for the MDM, they had

at the time 258 employees, equally divided between the headquarters and the regional branches and field missions. As a general picture of the staff used by the French humanitarian organizations in 1997, for the field missions, the statistics show 308 permanent positions for expats, 2,677 volunteers with short time working contracts and 33,067 local staff, without clear distinction between paid employees and volunteers. Because of the jobs in the humanitarian field are temporary ones, the total number of expats sent in missions is higher than the number of existing positions. For example, MdM send for its field missions 400-500 persons each year, covering 140 available positions.<sup>25</sup>

A second important characteristic of the humanitarian field is the volatility of its staff. Except for the few permanent positions, all the volunteers (paid or not) involved in field missions had rather short, specific assignments, sometimes even for a couple of days. Far from the romantic image of fearless adventurers that travel the world looking for new challenges, the expats were in many cases well trained professionals: doctors, nurses, educators, psychiatrists, psychologists, engineers, and technical personnel. Catherine Derouette, who came to Romania with MSF remembers:

At that time, I was looking to change my job. A friend told me about this educational mission in Romania: quite an exceptional program for this NGO specializing in medical emergencies. The particularity of the mission required Médecins sans Frontières to recruit specialists in the fields of education, psychology, physical rehabilitation in order to help institutionalized children. So I applied for a mental health educator job.<sup>26</sup>

Odile Godin, an experienced educator, also joined EquiLibre team as a special educator specialized in ergotherapy and art therapy. She spent 12 months working with children deemed as unrecoverable, at Vânjuleț home for unrecoverable children.<sup>27</sup>

Sometimes, the harsh reality of the field mission made the volunteers quit their assignment earlier, or it was the decision of the headquarters to call them back due to a physical and/or a mental breakdown. It was particularly the case of Romania, where, after working with ill, handicapped, dying children, many expats (over 60% according to estimations) developed serious mental illnesses, determining the NGOs to design a psychological support program for all those working in field missions.<sup>28</sup>

The nature of the humanitarian activity *per se* implies numerous constraints: long working hours, frequent travelling, long separations from family, difficult living conditions. The important number of people coming and leaving a field mission makes it very difficult to retrace the numerical evolution of the personnel.

Although the presence of a hierarchy is not very visible, with a friendly work environment and the informal tone they use to address each other, it still exists. For all transnational NGOs, we can identify two different hierarchies. The first one is what I call the “headquarters” hierarchy, with a president, a board of directors, directors for each national branch, responsible for every field mission. The second one is the hierarchy established inside the field mission. In this case the power relations are more intricate, as the contribution of every team member to the success of the mission is more important than formal hierarchy. After 1990, when the domain started to get professionalized, the NGO’s policy was to hire paid, fulltime personnel for at least three field positions: the chief of mission, the administrator and the logistician. They were trusted with most of the decision making, including who, where and when gets help, periodically reports, official communication/negotiation with the local authorities. Although very important for the success of every humanitarian mission, short time volunteers inevitably came last in the chain of decision making.

Another element that should be taken into consideration while analyzing the personnel within a transnational humanitarian NGO in general, and more precisely in a field mission is the nature of the actions carried out: emergency type responses, post-conflict reconstruction and/or development. In the Romanian case, for the first two weeks the humanitarian mission was a response to what was thought to be a military conflict. The MSF and MdM teams sent to Bucharest were composed mostly by physicians with experience in field medicine/military medicine. In only two weeks, the Romanian mission, became an intervention for emergency aid towards the institutionalized children: HIV epidemics, improving the living conditions in the childcare facilities, training the Romanian staff. Later, the initial teams left Romania and new personnel was sent to cover the needs of the mission. The physicians have been replaced with educators and rehabilitation therapists, a highly feminized field, although a substantial number of men started to work in the sector.

If the medical NGOs hired well trained personnel, other NGOs had different approaches and privileged unexperienced, young people or university students looking for a first job experience. Others, like EquiLibre,

also deployed young delinquents included in rehabilitation programs. With no real supervision, many returned to the old habits. Most of them had poor education, no professional skills or experience.<sup>29</sup> Nevertheless, as French expats, they were the ones to evaluate and to lead the local personnel, to the great discontentment of Romanians.

### ***On the field interaction***

On the field, the interaction between humanitarians and the Romanian general population seemed more like a battlefield. Young medical professionals or educators had been displaced in remote rural institutions, facing the same harsh living conditions as the Romanian personnel; and the children in care:

The manager of the *leagăn* showed us around. We went into the kitchen where a strange broth is poured into huge pots, then into the storage room where humanitarian donations were piled up. We will find out later that all clothes are distributed in small quantities, leaving most children in rags. "We must prevent the shortage", will tell us the staff.<sup>30</sup>

In all the cases I studied, the humanitarian staff tried to reform the institutions and the working methods of the Romanian personnel in total disregard of the local know-how:

We quickly realize that it will be difficult to change habits, preconceived ideas, difficult to work with these women who have not finished treating their own wounds. The Romanian people are traumatized by all these years of communist dictatorship. Their cultural references had to be changed. They are a broken, lost, disoriented people.<sup>31</sup>

Other testimonies openly spoke about the urgency of changing the old habits of the Romanian personnel:

What strategy could touch the hearts of these women? Because it is indeed a question of carrying out a "heart transplant", of reinventing humanity. The whole team of *Médecins sans Frontières*" tries to find ways to humanize the life of the *Leagan*, to break unacceptable habits. Yet we know deep within ourselves that what we seek to understand lies beyond these walls,



in the heart of a country massacred with the ax of a dictatorship. We can't find anything to motivate the staff.<sup>32</sup>

The reports sent to the headquarters clearly expressed their frustration while working alongside unskilled, heartless, almost not human characters that actively opposed the 'Western methods':

When I get to the *leagan* that day, I look at her bed, it will be empty now, empty for all eternity. The most terrible shock is not the death of Bogdan, but the reaction of the staff or rather its lack of reaction ... Since my arrival in Romania, I have been trying to understand these women. I know that they have suffered, that they have shielded their hearts in order to survive better, to better accept the unacceptable, they have put a cross on their sensitivity so as not to lose reason. But on this day of mourning, I blame them for their coldness, I blame them for their lack of rebellion and their indifference. I blame them for leaving Bogdan to die. For his death is above all the death of love[...]. I would like to understand the process that began among these women to have come to terms with it, to have succeeded in denying it. Can we go beyond the limits of humanity and remain Human? I believe in any case, that blindness of the heart causes ordinary people to become executioners without realizing it.<sup>33</sup>

On the other hand, the Romanian professionals, many of them anticommunists, Francophiles, maybe even trained abroad, felt betrayed when the Westerners they expected and respected so much publicly called them 'baby killers'. During my interviews, the Romanian personnel refused to explicitly talk about their feelings while working with the humanitarians. I explain the reluctance by the fact that many continued and are still working for/with humanitarian NGOs. On the other hand, the expats understood the feelings of the Romanian personnel: "The 'masters' find themselves relegated to a corner of the room. I feel that they are humiliated, as we express their incompetence into their faces. They throw gloomy glances at us in which envy, disgust, sadness, and disdain are mixed." In her book, Odile Godin, described the humiliation experienced by Romanians and wrote "That evening, the French had shown distressing stupidity, dressed like roosters, young people, some in rehabilitation programs, others unemployed, who had come without any experience, even without culture. They said, with test sheets in hand, to be there to evaluate and to train Romanian teachers. During that evening when you received French and foreign humanitarians, without great

culture, without jobs, self-proclaimed 'leaders' by the power of money offered by the European Community...while you Romanians quoted V. Hugo and Aragon, they afflicted you with their tests and evaluations and prepared to offer you 'the best training'."

As for the general population I will only mention one expression that is still used today "*a fi îmbrăcat ca de la ajutoare*", which literally translates as "to wear clothes donated by the humanitarian aid" and its meaning is to be dressed very poorly/with oversized, dirty clothes.

The difficult relation with the Romanian personnel, but also the official authorities and the general population was considered the main cause for the general blockage of humanitarian projects. The field reports often mentioned the problem:

We decide to show authority, but we know the pointlessness of this action. This spectacle knocks us out because it sends us back to our helplessness. We see the hidden side of our failure because nothing fundamentally changes. All progress is only at the surface. I am tired, we will not be able to transform anything, we are so far from the hopes we had in the beginning of our mission."<sup>34</sup>

The same feelings of helplessness had been expressed by the MSF final report:

In the light of our experience in Romania, it is a bit of an observation of helplessness that we want to raise, a wake-up call that we want to sound. Indeed, we have the impression that humanitarian organizations have seen a relatively small impact on the evolution of the situation of orphanages.<sup>35</sup>

### **"Study on the difficulties of the Alliance between Romanians and Westerners"**

So, very quickly the humanitarians felt the need for a better relationship with the beneficiaries. In agreement with the French MSF and Mdm, the Belgian MSF, the British FARA and the Danish Red Barnet NGOs, and based on their respective experiences, the Handicap International teams wished to have analysis tools allowing them to better understand the complexity of the individual and collective ways of functioning of their

interlocutors. The preliminary talks stressed two main ideas. On one hand, the expatriate humanitarian personnel, while subjected to the violence of the Romanian institutional functioning, opposed another violence by sometimes trampling the modes of organization of the Romanians, which were also practical solutions for the everyday survival during communism. This type of confrontation most often generated two types of defensive reactions, in the psychological sense: either an increasingly manic activism, or a depressive withdrawal. Both constituted pitfalls that prevented the development of authentic proposals for collaboration and alliance, considering the realities and mentalities of each other. On the other hand, the Romanians did not perceive the humanitarian aid as neutral. Already looking to restore a sense of dignity, Romanians have been extremely sensitive on the nature of the aid, but also on the distribution methods.

Therefore, Handicap International proposed to the European Community to financially support a research under the title *Study on the difficulties of the Alliance between Romanians and Westerners* with the aim of helping to reorient the future actions of Western stakeholders in Romania.

From the very beginning, the initiators wanted a psychological approach that excluded any specific recommendations. The main objective was to provide each reader with elements of understanding those situations likely to influence their behavior or their decision-making towards Romanians. In agreement with the European Commission, the project was entrusted to a Canadian psychoanalyst, Lisette Tardy, with research experience in intercultural phenomena. Initially, the work plan had five phases: The collection of general information on Romania (history, culture, religion) and on NGOs (general philosophy of intervention, mode of operation, evolution of action in Romania); interviews in Romania with expatriate volunteers who had been in the country for at least six months, working at different levels of responsibility and in representative institutions; interviews with Romanians, interlocutors of NGOs at different levels: staff working in childcare institutions; management, officials; transcription of interviews, formatting, writing and publication of the study report in French; broad dissemination to all stakeholders involved in Europe, with actions taken in cooperation with Romania (NGOs, universities, research institutes, organizations specialized in child aid, political figures).

The study was carried out within the framework of NGOs working mainly in childcare institutions. The study included British, Belgian,

French and Danish volunteers, this choice making it possible to broaden the debate and increase the questioning of the East-West relationship. Interviews were carried out with Western volunteers that worked in Romania for at least six months and Romanians working at different levels of responsibility in representative institutions. To these interviews, the lead researcher added meetings with Romanian personalities but also common people that were willing to participate in the study.

### ***Contents***

The first version of the document was published in January 1993. It included an Introduction written by the French academic Francis Maqueda in which he described all the difficulties of establishing a human alliance in a context of aid. He highlighted the strong ideas of the study and presented them as the basis of the dialogue which must be established so that all parties can discover each other and erase the prejudices constructed by years of non-communication.

Using concepts specific to psychoanalysis and several works regarding the effects of totalitarian regimes, the study analyzed the behaviors of the Romanians. The research hypothesis was that these actions had been induced by the dictatorial regime. It presents the fall of the regime in December 1989 as a major rupture obliging, of course, Romania to rebuild as society, but also the Romanians to rebuild themselves individually and psychologically.

A first conclusion of the study was that Westerners neglected the dialogue with beneficiaries and did not try to identify what were the real needs and expectations from the humanitarian aid.

According to Tardy,

the Westerners' lack of knowledge of Romania, both in preparation and in the initial relationship with Romanians, created a wound in the relationship. Getting to know the Romanians would have been the first and foremost part of a duty of respect towards them; taking the time to listen to them was to recognize them in the first place, to recognize their existence and to respond to their need for self-esteem.<sup>36</sup>

The feeling of urgency reduced the possibility of properly preparing the Romanian mission in terms of questioning the real needs, knowing the beneficiaries and appealing to their expertise and knowledge. Such a

situation was identified by the study as a trap for any emergency mission. In such circumstances, the humanitarians tend to take over the responsibility of both the decision making and the implementation process. Therefore, the humanitarian aid sometimes turned out to be cumbersome, if not hurtful, both in terms of people and objects.<sup>37</sup> Based on the testimonies she collected from ordinary people during her voyages in Romania, Tardy also mentioned the humiliation felt by the beneficiaries when the highly praised help was in fact a pile of dirty clothes, expired medicines, etc.

According to the survey, Romanians manifested an ambivalent attitude about the presence of humanitarians. The interviews showed that having humanitarian missions on the territory was considered necessary, useful, an expression of the country's openness towards the Western values. At the same time, it represented a hurtful experience that constantly reminded Romanians about the lost time, the lack of courage in opposing the totalitarian regime. Tardy's interesting finding was that common Romanians blamed themselves for not having known about the crimes committed in the institutions for unrecoverable children and the political prisons.<sup>38</sup>

In the attempt to reassess the past, some tried to forget it at all costs, others said that it was important not to forget the communist recent past. Despite of all bitterness and humiliation, Romanians sometimes experienced, as beneficiaries of the humanitarian aid, that the presence of Westerners, as a third party during the post-socialist transition, had a reassuring effect in the Romanian society. For many Romanians, including the authorities and the decision-making management, the Western humanitarians were the guarantee that Romania will quickly recover from the traumatic past.

Nevertheless, the only intentional wrongdoing found in the case of Western NGOs, was their absolute quest for efficiency, a position that pushed them to become complicit with the Romanian desperate situation by taking over responsibilities and initiatives.

The study highlighted the therapeutic function of aid to restore the Romanian's pride: "The mere presence of foreigners, listening to the outside world, should allow Romanians regain the self-esteem, a nation too long deprived of landmarks and contacts with the free world".<sup>39</sup> The study also mentioned the importance of building a working environment and defining each party's role, but also the role of Westerners as mediators between the population and the authorities. The study concluded on the fact that neither Romanians nor Westerners had foreseen the individual

and institutional psychological impact of freedom and of the foreign presence. The European Community, that paid for the study, was not at all satisfied with the results and asked for a panel of 15 Romanian academics to revise the text before publication. In June 1993, Handicap International organized a round table, putting together all the parties involved: authors of the study, representatives of the European Community, NGOs and the 15 Romanian academics.

### ***Romanian feedback***

During the event, the representatives of the European Community expressed great disappointment regarding the study. According to them, the work did not consider the bigger socio-economic context; the fact the NGOs (all 1,200 of them in 1993) acted only on the international mass media pressure, without asking what the Romanians really needed and, therefore, the humanitarian effort concentrated only on some institutions and not on the entire state care system. More than that, most of the expats deployed in Romania were professionals in the medical field and had no training or previous expertise in taking over responsibilities concerning the social care. The last important point addressed by the EEC representatives concerned the previous Romanian experiences as donor / beneficiary of aid and cooperation in general, and that Romania had been mostly a donor for the last 50 years, therefore, the know-all attitude showed by the humanitarians caused a great distress for the Romanian population.

The Romanian academics mostly insisted on the idea of "alliance" and what that means to them: namely to have the possibility to regain the confidence, the dignity. For the Romanians, an alliance meant the need for help coming from both partners, partners that respect and know each other, and because of that, maybe cooperation and co-participation would better describe the work of humanitarians in Romania. According to the speakers, an alliance could emerge when the beneficiaries of the humanitarian aid become partners in original solutions. Establishing a relationship of trust and mutual respect would allow the common projects to emerge from the real needs, as identified following a dialogue with the potential beneficiaries. However, listening raises the problem of understanding. This comes from both the quality of empathy, the recognition of the 'Other' and his know-how. Briefly, to be able to put yourself in someone else's position.

The NGO's representatives stood behind the findings of the study, insisting that Romanians suffered from a double culpability, hiding, or not knowing the atrocities committed by the communist regime in the childcare institutions of Romania and the general suspicion towards foreigners, also a consequence of the communist regime. According to them, this double guilt triggered a low self-esteem. Therefore, Romanians could not refuse/react to the humanitarian aid even if they did not agree to it. On the other hand, they acknowledged that the know-all attitude of the Westerners ignored the pride of the Romanians who saw their know-how and abilities completely ignored.

At the end of the meeting, the Romanian participants agreed to make comments on the initial version of the document, but it was up to the author to include it in the final version. As for a future use of the study, the Romanian delegation agreed that such an analysis would not really help the Romanian partners, therefore a Romanian translation would not be very useful. On the contrary, the representatives of the NGOs appreciated that the material would be of great help for the teams of foreign volunteers coming to Romania.

The last conclusion of the meeting was that a true project of alliance is built on mutual trust and the possibility to decide on the acceptance or refusal of a common project.

### ***The outcomes of the project***

The European officials stated that the study is in fact useless, and they refused to be involved in the distribution of the published version. Handicap International, as initiator of the project, in a very ambiguous formulation, stated that working with the EEC, in a very rigid framework, did not allow them to reach all the announced objectives and that the study was their last hope to better prepare their staff for the missions in Romania. The final English version did not include the comments made by the Romanian panel. These comments were to be included only in the Romanian version of the document, but I could not find any sources that can confirm the publication of such a document.

As the subsequent events showed, a true, wide reaching dialogue between humanitarians and beneficiaries was never established in post socialist Romania. I shall mention only the scandal surrounding the withdrawal of the MSF mission from Romania, just a year after the

publication of the study dedicated to the possible alliance between humanitarians and beneficiaries.

## Conclusions

The political and economic turmoil produced by the fall of the communist regime, corroborated with the discovery of crimes committed in the last 50 years, determined Romanians to endorse, without a thorough analysis, all the solutions the Westerners brought after 1989. The humanitarians, as the study clearly shows, did not have the time, nor the expertise, to properly prepare the Romanian mission and to assess the national and societal specificities. The urgency and development programs had been perceived as top down, artificial policies. In this paper I argue that the reluctance and lack of action the Romanian authorities showed towards the transformation of the childcare system can be explained by two factors. Firstly, the Romanian experts had not been consulted on the general project concerning the deinstitutionalization of Romanian children. As I already showed in my previous research,<sup>40</sup> rather than being a consequence of the pronatalist policy, the placement of certain categories of children into public care was the expression of the state's biopower. Communist authorities actively encouraged (and even forced) those deemed socio-economically unfit to renounce their children: teenage or single mothers, incarcerated parents, victims of alcoholism, and those already subjected to social marginalization (e.g. Roma communities, unemployed, disabled). The communist state aimed to prevent the reproduction of practices that threatened the well-being of the socialist body, not the biological reproduction of the concerned groups. Many Romanian experts, as Mariela Neagu shows in her excellent research,<sup>41</sup> continued to genuinely believe that institutionalization was the best solution for taking care of social orphans. Indeed, the majority of institutionalized children lived in relatively well-equipped institutions, received adequate food, instruction, and medical care. Humanitarians presented the situation of Romanian children in a distorted way, to justify the urgency of their intervention. Therefore, Romanian authorities had no reason to abandon the existing organization of the childcare system.

Secondly, during the first decade of the humanitarian mission towards children in Romania, the humanitarians failed to establish a dialogue with the beneficiaries at all levels of authority. At a governmental level, the



chiefs of missions, with the support of diplomats, enforced their decisions on the members of the Romanian government, especially the minister of health, formally in charge with coordinating the humanitarian actions in the Romanian territory. In theory, the minister was the only person that had the prerogative to allow the access of humanitarians in the childcare institutions and to verify that the humanitarian aid reaches the beneficiaries, and no harm is inflicted on children. Following a pyramid decision-making model, at local level, the prerogatives of control were exercised by the county responsible for health issues and the direction of each institution. In practice, the Romanian central and local administration never denied the requests of Western humanitarians. As the *Study on the difficulties of the Alliance between Romanians and Westerners* had shown, the attitude of Romanians was not necessarily an expression of rejection towards Western values or indifference towards social orphans. As Andaluna Borcila pointed out, the violent events during the Romanian revolution and the high mediatization of the institutions for unrecoverable children reestablished the distinction between “Them” (the Romanians) and “We” (the Westerners), recalling the segregations of the Cold War.<sup>42</sup> In France, the narrative used during the 1980s, praising the Franco-Romanian friendship, was replaced by a discourse insisting on the ‘misery of a country destroyed by communism. Called to take decisions, the Romanian authorities were also under the scrutiny and constant mediatic attacks from the Westerners. The critics and the demands made in all urgency did not consider the bigger socio-economic context (namely the deep economic crisis) and ignored the local know-how, even though most of the expats deployed in Romania were professionals of the medical field and had no training or previous expertise in working, and even less, organizing, a social care system. I argue that the climate created by humanitarians around the problem of institutionalized children determined the Romanian authorities, but also most Romanian specialists, to simply hand over the reform of the childcare system. From the point of view of the Romanian state, the reform was not a priority. As for the specialists, once their expertise was no longer recognized in the post-socialist context, any involvement became obsolete.

## NOTES

- <sup>1</sup> Michael, Barnett, "Human Rights, Humanitarianism, and the Practices of Humanity", in *International Theory*, no. 3, 2018, pp. 314–49.
- <sup>2</sup> There is a significant corpus of works on the history of the Red Cross movement, dealing with both the global movement and the particularities of national branches, especially during the Cold War: D. P. Forsythe, *The Humanitarians: The International Committee of the Red Cross*, Cambridge University Press, Cambridge, 2005. More recent organizations decided to open their archives for the researchers and even to create their own research center, such as MSF-CRASH. A. Vallaeys, *Médecins sans frontières: La biographie*, Fayard, 2004; J.-H. Bradol, C. Vidal, (eds.), *Medical Innovation in Humanitarian Situations. The work of Médecins Sans Frontières*, MSF, 2011, *Global history of Modern Humanitarian Action 2011-2015*, initiative of the Humanitarian Policy Group and United Nations Intellectual History Project (UNIHP) 1999-2010, ran by United Nations.
- <sup>3</sup> D., Laqua (ed), *Internationalism Reconfigured. Transnational Ideas and Movements between the World Wars*, London, I. BI Tauris, 2011; J. Droux, "L'internationalisation de la protection de l'enfance : acteurs, concurrences et projets transnationaux (1900-1925)", in *Critique internationale*, 2011/3, n°52, pp.17-33, M. Barnett, *Empire of Humanity. A History of Humanitarianism*, Cornell University Press, 2011; C. Kantner, *War and intervention in the transnational public sphere: problem-solving and European identity-formation*, Routledge, 2016.
- <sup>4</sup> *Eastern Journal of European Studies*, vol. 5, issue 2, "Europe in Transnational movement": Y. Denéchère, "Eastern Europe - A new field of humanitarian history", B. Scutaru, "Local practices of humanitarian aid: Pharmaciens sans frontières Anjou in Romania during the 1990s".
- <sup>5</sup> Yves, Denéchère, and Beatrice, Scutaru, "International adoption of Romanian Children and Romania's admission to the European Union (1990-2007)", *Eastern Journal of European Studies*, Vol. 1, No. 1, 2010, p.135-151.
- <sup>6</sup> Foucault Michel, *Histoire de la folie à l'âge classique*, Gallimard, Paris, 1972; Gutting Gary, *Michel Foucault's archaeology of scientific reason*, Cambridge University Press, Cambridge, 1989, p. 79.
- <sup>7</sup> Cheryl, McEwan, *Postcolonialism, Decoloniality and Development*, Second edition, Routledge, New York, London, 2019, p. 29; S, Bobby Banerjee, and A. Prasad, "Introduction" to the special issue on "Critical reflections on management and organizations: a postcolonial perspective", in *Critical perspectives on international business*, Vol. 4 No. 2/3, 2008, p. 91.
- <sup>8</sup> Cheryl, McEwan, *op.cit.*, p. 29.
- <sup>9</sup> *Ibidem*.
- <sup>10</sup> Luciana Jinga, Florin Soare, *Politica demografică a regimului Ceaușescu - Instituții și practici*. Vol. II. Polirom, Iași, 2011, p. 210.

- <sup>11</sup> Luciana Jinga, "The never forgotten Romanian children: Biopolitics, Humanitarian Aid and International Adoption", in *Child Migration and Biopolitics. Old and New Experiences in Europe*, Beatrice Scutaru, Simone Paoli (eds.), Routledge, 2020, p. 126.
- <sup>12</sup> Meghan, Sullivan Collins, "Orphaned by History: A Child Welfare Crisis in Romania", in *World Affairs*, Vol. 176, No. 6, 2014, pp: 78–9.
- <sup>13</sup> Oana Mihăilă, *Adopția. Drept român și comparat*. Universul Juridic, București, 2010, p. 23.
- <sup>14</sup> Luciana Jinga, "The never forgotten Romanian children..", p. 126.
- <sup>15</sup> Marie Curie IF project (748770 — GenHumChild — H2020-MSCA-IF-2016/H2020-MSCA-IF-2016, <https://cordis.europa.eu/project/id/748770/reporting>
- <sup>16</sup> Bernard Kouchner and Adam Michnik, *Mémoires croisées*, Allary, Paris, 2014.
- <sup>17</sup> Beatrice Scutaru, "Images d'enfants roumains et médias occidentaux. La construction d'une cause (1989-1990)", in *Relations internationales* vol. 161, no. 1, 2015, pp: 100–4.
- <sup>18</sup> Hotărârea nr. 4 din 8 ianuarie 1992 privind regimul unor bunuri provenite din ajutoare și donații cu caracter umanitar, Publicat în MONITORUL OFICIAL nr. 13 din 5 februarie 1992 [The decision of the Romanian gouvernement no. 4 from 8 January 1992 regarding the regime of goods provided by donations and humanitarian aid], available online at <https://legislatie.just.ro/Public/DetaliiDocument/2095> (10.07.2021).
- <sup>19</sup> Archive Doctors Without Borders, Mission: *Romania*, Box: Roumanie 95-Doc-Rapports généraux, Rapport final d'activités, avril 1995, file "Article presse1995", file *Rapport de fin de mission en Roumanie*.
- <sup>20</sup> Orphanage for children aged 0-3 years old.
- <sup>21</sup> "Lorsque nous parlons avec le personnel, nous comprenons que la plupart considère les enfants du leagan comme des enfants différents; qu'il ne peut pas comparer avec les siens. Quelquefois même, j'ai l'impression qu'ils ne sont plus «pensés» comme des enfants, et cette constatation me fait peur." (French in original), Archive Doctors Without Borders, Mission: *Romania*, Box: Roumanie 1990, file "Rapports de missions", document *Rapport de mission en Roumanie-Jean Marc C.*
- <sup>22</sup> "Le leagan de Cernavoda a été très médiatisé et attire des ONG des quatre coins du monde. Je ne sais pas combien sont venues avec des projets plus au moins réalistes. Je connais la situation de certains orphelinats où deux voire trois ONG se disputent le droit de travailler. Le personnel ne sait plus qui croire, à qui se référer et, bien sûr, ce sont les enfants qui en payent les conséquences. Ces « guerres » entre les ONG me révoltent. Ce sont des combats stériles et ridicules. Pourtant, nous prenons part à la bataille." (French in original), Archive Doctors Without Borders, Mission : *Romania*, Box: Roumanie 1990, file "Rapports de missions", document *Rapport de mission en Roumanie-Therese URRUM*.

- 23 "L'aide, qui arrive souvent sans prévenir fr plusieurs pays, ne correspond pas toujours aux besoins de l'orphelinat. C'est ainsi que nous nous retrouvons devant un tas de vêtements trop grands dans une sale de stockage devenue trop petite", Archive Doctors Without Borders, Mission : *Romania*, Box : Roumanie 1990, file "Rapports de missions", document *Rapport de formation- H. Granguillot*.
- 24 "Quelquefois je me demande ce que couterons aux roumains nos généreuses interventions. Nous n'avons rien compris. Peut-être fallait-il commencer à réduire l'abandon en travaillant auprès des familles à risque. Les projets de développement ont certes leurs limites et leurs pièges, mais pouvons-nous vraiment y échapper ? Le monde du Nord et celui du Sud ne se rencontrent peut-être jamais parce qu'ils ne vivent pas de la même réalité, parce qu'ils sont différents dans l'essence mêle de leur existence. Mais ce qui est troublant, dans le contexte de la Roumanie, vient peut-être du fait que c'est un pays européen. Il fait partie intégrante du monde du Nord et nous ne l'assimilons pas aux pays en voie de développement. Alors, puisque les données que nous connaissons sont changées : quelle place devons-nous prendre?", Catherine Derouette, *Au nom des enfants oubliés de Roumanie*, Foreword by Xavier Emmanuelli, Harmattan, Paris, 2001.
- 25 Phillippe Ryfman, *La question humanitaire : histoire, problématiques, acteurs et enjeux de l'aide humanitaire internationale*, éditions Ellipses, Paris, 1999, pp. 130-193.
- 26 "A cette époque, je cherchais à changer de travail. Une amie m'avait parlé de cette mission éducative en Roumanie: programme assez exceptionnel pour cette ONG spécialisée dans l'urgence médicale. La particularité de l'intervention demandait à «Médecins sans Frontières» de recruter des spécialistes dans les domaines de l'éducation, de la psychologie, de la rééducation motrice pour venir en aide à une catégorie d'enfants différents. Il s'agissait donc pour moi d'un travail d'éducatrice en santé mentale" (French in original), Catherine Derouette, *op.cit*.
- 27 Personal Interview with Odile Godin, 14.04.2019
- 28 Personal Interview with C.V. Lyon, 07.02.2018.
- 29 Michel, Deprost, *EquiLibre: Une faillite humanitaire*, Editons Golias, Villeurbanne, 2003, pp. 68-69.
- 30 "La responsable de *leagan* nous fait visiter les lieux. Nous passons dans les cuisines où ,mijote un étrange bouillon dans d'immenses marmites, puis dans la salle de stockage où s'entassent les dons humanitaires. Nous découvrons plus tard que tous les vêtements sont distribués au compte-gouttes, laissant la majorité des enfants en loque. «Il faut prévenir le manque» nous dira le personnel." (French in original), Archive Doctors Without Borders, Mission: *Romania*, Bo : Roumanie 1990, file "Rapports de missions", document *Rapport de fin de mission-Philippe P.*

- 31 "Nous prenons rapidement conscience qu'il sera difficile de changer les habitudes, les idées préconçues, difficile de travailler avec ces femmes qui n'ont pas fini de soigner leurs propres blessures. Le peuple roumain est traumatisé par toutes ces années de dictature communiste. Leurs références culturelles ont dû être modifiées. C'est un peuple brisé, perdu, désorienté." (French in original), Archive Doctors Without Borders, Mission: Romania, Box: Roumanie 1990, file "Rapports de missions", document *Rapport de la formation des infirmières*.
- 32 "Quelle stratégie pourrait bien toucher le cœur de ces femmes? Car il s'agit bien là de réaliser une «greffe de cœur», de réinventer l'humanité. Toute l'équipe de «Médecins sans Frontières» tente de trouver des chemins pour humaniser la vie du leagan, pour casser des habitudes inacceptables. Nous savons pourtant au fond de nous-même que ce que nous cherchons à comprendre se trouve au-delà de ces murs, au cœur d'un pays massacré à la hache d'une dictature. Nous ne trouvons rien pour motiver le personnel." (French in original), Archive Doctors Without Borders, Mission: Romania, Box: Roumanie 1990, file "Rapports de missions", document *Rapport de formation*- H. Granguillot.
- 33 "Lorsque j'arrive au leagan ce jour-là, je regarde son lit, il sera vide désormais, vide pour l'éternité. Le plus terrible choc n'est pas la morte de Bogdan, mais la réaction du personnel ou plutôt son absence de réaction...Depuis mon arrivé en Roumanie, je cherche à comprendre ces femmes. Je sais qu'elles ont souffert, qu'elles ont blindé leur cœur pour mieux survivre, pour mieux accepter l'inacceptable, elles ont mis une croix sur leur sensibilité pour ne pas perdre la raison. Mais en ce jour de deuil, je leur en veux pour leur froideur, je leur en veux de leur absence de révolte et de leur indifférence. Je leur en veux d'avoir laissé mourir Bogdan. Car sa mort est avant tout la mort de l'amour [...] Je voudrais comprendre le processus qui s'est enclenché chez ces femmes pour s'en être accommodées, pour avoir réussi à la nier. Peut-on dépasser les limites de l'humanité et rester *Homme*? Je crois en tout cas, que la cécité du cœur entraîne des gens ordinaires à devenir des bourreaux sans s'en rendre compte." Catherine Derouette, *op.cit.*
- 34 "Nous décidons de faire preuve d'autorité et de confisquer les bâtons, mais nous savons l'inutilité de cette action. Ce spectacle nous assomme parce qu'il nous renvoie à notre impuissance. Nous voyons la face cachée de notre échec, car rien ne change en profondeur. Tout progrès n'est que surface. Je suis fatiguée, nous ne pourrions rien transformer, nous sommes si loin des espérances de notre début de mission." (French in original), *Ibidem*.
- 35 "A la lumière de notre expérience en Roumanie, c'est un peu un constat d'impuissance que nous voulons dresser, une sonnette d'alarme que nous voulons tirer. Nous avons en effet l'impression que les organisations humanitaires ont vu un impact relativement restreint sur l'évolution de la situation des orphelinats." (French in original), Archive Doctors Without

- Borders, Mission: *Romania*, Box: Roumanie 95-Doc-Rapports généraux, Rapport final d'activités, avril 1995, file "Article presse1995", file *Rapport de fin de mission en Roumanie*.
- <sup>36</sup> Handicap International Archives (HIA), "Report on the project "Study on the difficulties of the Alliance between Romanians and Westerners", p. 5.
- <sup>37</sup> "They come with this attitude, like we don't know anything, like we had lived in a black void" (French in original), *ibidem*, p. 6.
- <sup>38</sup> *Ibidem*, p.7.
- <sup>39</sup> *Ibidem*, p. 10-11.
- <sup>40</sup> Luciana Jinga, "The never forgotten Romanian children...,"
- <sup>41</sup> Mariela Neagu, *Voices from the Silent Cradles. Life Histories of Romania's Looked-After Children*, Policy Press, 2021.
- <sup>42</sup> Andaluna, Borcila, *American Representations of Post-Communism: Television, Travel Sites and PostCold War Narratives*, New York, Routledge, 2014, 80-89.

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