Child Care Institutions as Quality Family, Surrogate (alternative) Care Services in Sri Lanka

Varthagowry Vasudevan

Abstract

Institutional care for children can be regarded as a form of alternative care that is provided in an organised manner, while keeping in mind the best interests and protection of the child. It is therefore imperative that this alternative care should respond to the physical, psychological, emotional, social, moral, ethical and spiritual needs of children in an age appropriate manner. Furthermore, these institutions should be managed and supervised by trained and motivated staff. But institutionalisation by its very nature leads to a more professional relationship between adults and the children rather than one that occurs in the more natural setting of parental care or a family. Given this, what emerges as most important is the quality of the care component. Quality care in such circumstances is defined as a form of developmentally appropriate care given by adult caregivers to children. This study aims to ascertain how best the children in such institutions can receive quality care, in accordance with their rights and needs and based on their age and particular vulnerabilities. Furthermore, it aims to highlight the gaps in the current system and makes suggestions moving forward. This study is mainly based on reflective accounts and information gathered of in-service training programmes conducted for welfare officers, field visits and supervision of probation officers, child protection officers and other child welfare officers operating in the Northern Province of Sri Lanka. In addition, case studies of children as well as key informant interviews and reflections of the diploma programme on child protection were used. The results of this study indicated that institutional childcare is highly contextual to the cultural background of the area studied. They also demonstrated clearly the necessity to provide regular and improved professional support to enhance the quality of care through specified monitoring, regular supervision, and improved quality of training for caregivers.

Keywords: alternative care services, quality care, child care institutions

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1. Introduction

Institutionalisation tends to have general connotations that are largely negative compared to institutional living, not comparing at all favourably with living in a family and community.
Institutional care is also very often stigmatised. This is because of its development from the poor Law Workhouse of the nineteenth century (Encyclopaedia of Social Work, 2000:296). Institutionalised care for the children is often charged with creating an institutional personality syndrome among the children. However, residential care can be diverse. It could have aims that are based on different needy groups. These include children, old people, differently abled and others. Tolfree (1995) defined institutional care for children as “a group living arrangement in which care is provided by remunerated adults who would not be regarded as traditional carers within the wider society.” This definition implies that it is a professional relationship between the adults and the children is very different to the one that is parental. The organized and deliberate structure for the living arrangements of children is also criticised (Dunn A., Jareg E., Webb D.A. cited by Nirekha. D.S and Asitha G.P. 2011). Goffman (1961) explored the process of institutionalisation as experienced by inmates; he focused on the total institution, which has regular routines and a structure. He argued that the removal of normal patterns of activities and identities provided a cultural and social context within which individuals became depersonalised. He developed the concept of institutionalisation as a model of the total institution with four key features:

- All aspects of life occur in the same place, controlled by one authority.
- Each aspect of daily activity is carried out either others who are all treated the same.
- All aspects are rigidly programmed.
- The separation of staff and inmates is often maintained.

The concept of institutionalisation still remains with shifts and changes of various service deliveries and the provision of a homely environment for children. What is lacking, is the
homely and emotional bonds of love and affection as occurring in families. It is a result of more formal and distant relationships between adult carers and children.

Institutional support for the children is mostly a Western concept. Although institutional care for the children has been prevalent in Sri Lanka as an alternative care, it is still a relatively recent concept, beginning in the colonial period. Institutional care involves the integration of accommodation and personal care. It appears to be mostly a mechanical living arrangement, which creates a weakening of social relationships. However, certain rapid social changes have created stress and problems in traditional family structures and relationships, which have made the position of children, especially among girls, of concern in terms of their safety in existing family environment situations in which their protection is at jeopardy.

The majority of institutionalized children stay in voluntary homes as an alternative care option in Sri Lanka. These children homes are monitored by the department of probation and child care services. These voluntary homes cannot provide for ad hoc admission to children, but have to follow government-approved procedures to accommodate children. This paper focuses only on the children who are being cared by voluntary homes.

2. Contextual background

In Sri Lanka, the number of residential care has been increasing mainly due to disasters and internal displacements. These have created the need for more institutional care as an alternative living arrangement, often for considerable periods of time, although it is a western model of care.

In 2009, 14,842 children were institutionalised 2,234 of them were institutionalised in state-run residential institutions and 12,608 were admitted to certified voluntary children’s homes. Currently there are more than 21,100 children in 488 voluntary residential care institutions in Sri
Lanka managed by well wishers, religious leaders and community groups (Nirekha. D., Sand Asitha G.P., 2011). Through the introduction of quality care measures and the improved monitoring of child care institutions, the statistical report of the department of probation and child care services states that 15,874 children have been institutionalised in 368 children’s homes in 2010. The Table below gives the number of homes and children in institutionalized care.

**Table 2.1: Number of homes and number of children under institutionalized care**

<table>
<thead>
<tr>
<th>Type of Institution / Home</th>
<th># of homes</th>
<th># of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Remand Homes</td>
<td>7</td>
<td>1156</td>
</tr>
<tr>
<td>Certified Schools</td>
<td>5</td>
<td>263</td>
</tr>
<tr>
<td>Receiving Homes</td>
<td>8</td>
<td>434</td>
</tr>
<tr>
<td>Detention Homes</td>
<td>1</td>
<td>84</td>
</tr>
<tr>
<td>Approved School</td>
<td>1</td>
<td>10</td>
</tr>
<tr>
<td>National Training and Counseling Centre</td>
<td>2</td>
<td>112</td>
</tr>
<tr>
<td><strong>Sub Total</strong></td>
<td><strong>24</strong></td>
<td><strong>2059</strong></td>
</tr>
<tr>
<td>Voluntary Children Homes</td>
<td>341</td>
<td>13214</td>
</tr>
<tr>
<td>Voluntary Remand Homes</td>
<td>3</td>
<td>601</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>368</strong></td>
<td><strong>15874</strong></td>
</tr>
</tbody>
</table>

*Source: Statistical Report 2010, Department of Probation and Child Care Services*

Between all the provinces and districts in Sri Lanka, the Northern and Eastern Provinces, the numbers of institutions have increased by several folds during the past decade. There appears to be a significant interest to establish voluntary children’s homes by various faith-based organisations, nongovernmental organisations and individuals. A survey of children in
institutions in the North-East of Sri Lanka showed that 40% of them had been placed in institutions due to poverty (De Silva and Punchihewa, 2011). The major reasons cited for institutionalization included poverty and difficulties of access to education in rural areas, although education is free for all in Sri Lanka. Evidence obtained from a “Save the Children” project confirmed this finding. Many families said that they were compelled to institutionalize their children due to their inability to provide the required food, healthcare and education. Another major factor that appears to have attracted many of those who placed children in the said institutions was the provision of free educational facilities Uniforms, shoes, exercise books, other material and extra tuition.

In Northern Province, specially in the aftermath of 3 decade of internal conflicts, the emergency situation also created the seeking of greater institutional care for children, particularly those who had lost both parents or those having a single parent, and those who found it difficult to raise their children due to lack of housing. Service providers using referral procedures assess these safety concerns of children. Institutionalization is regulated by the law, and requires a court order to accommodate children in an institution. The admission of children for a voluntary home is the responsibility of the department of probation and placement committees in Sri Lanka.

<table>
<thead>
<tr>
<th>Province</th>
<th>Number of Registered voluntary children’s homes</th>
<th>Number of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Province</td>
<td>Homes</td>
<td>Children</td>
</tr>
<tr>
<td>----------------------</td>
<td>-------</td>
<td>----------</td>
</tr>
<tr>
<td>Western</td>
<td>94</td>
<td>3797</td>
</tr>
<tr>
<td>Southern</td>
<td>29</td>
<td>962</td>
</tr>
<tr>
<td>Central</td>
<td>23</td>
<td>947</td>
</tr>
<tr>
<td>North Western</td>
<td>34</td>
<td>1025</td>
</tr>
<tr>
<td>Sabaragamuwa</td>
<td>15</td>
<td>540</td>
</tr>
<tr>
<td>Uva</td>
<td>11</td>
<td>564</td>
</tr>
<tr>
<td>North Central</td>
<td>11</td>
<td>429</td>
</tr>
<tr>
<td>Northern</td>
<td>48</td>
<td>2481</td>
</tr>
<tr>
<td>Eastern</td>
<td>76</td>
<td>2469</td>
</tr>
<tr>
<td>Total</td>
<td>341</td>
<td>13,214</td>
</tr>
</tbody>
</table>

Source: Statistical Report 2010, Department of Probation and Child Care Services

The Table 2.2 shows that the number of Voluntary Children’s homes and number of children in the nine provinces of Sri Lanka in 2010. It is noted that western province, northern and eastern are having more children homes than the other provinces. Northern Province has 55 voluntary children’s homes and 2603 children in 2013(Department of Probation and Child care service, Northern Province, 2013) especially aftermath of local conflicts.

3. Family and Alternative Care

Working more closely with families is a professional practice. However, in the northern provincial context, in the aftermath of the conflict, services were extended during the emergency situations beyond that of professionally assessed service delivery system. Thus the department of probation and child care services has taken measures to enhance quality care for children. They have identified children who are in need of institutional care and those who could be taken care
of at home without being institutionalized. Still, due to certain reasons, a small number of families remain who are unable to uphold a family system and values, and who therefore use institutionalized services for their children. Childcare institutions are observed as alternative care service providers, extending their services on a charity basis rather than adopting a more professional approach towards children. Institutions hardly make efforts to help families to enhance their capacity to take up their own parental responsibilities and care for their children, which is an essential part of child development. For children to become competent adults, they need to learn family life skills within their own family and community environment.

Childcare has by tradition, the concern and responsibility of the family. In fact, children are considered to be the centre of a family system. But in the present scenario, there is a divergence, and new factors have emerged which have weakened the traditional family system. These could be the result of disasters such as the Tsunami and the prolonged conflict.

4. Methodology

The main objective of this study was to ascertain how children in voluntary homes could receive quality care, in accordance with their rights, based on their age, and on particular vulnerabilities. It further aimed to highlight the gaps in the current system and point towards a way forward. This study is based on reflective accounts and information gathered during in-service training conducted for welfare officers, field visits, and supervision of probation officers, child protection officers, and other child welfare officers functioning in the Northern Province of Sri Lanka. The study also used three case studies of children, meeting with parents, key informant interviews with administrators, and reflections of trainees in a diploma program on child protection conducted in the Northern Province of Sri Lanka.
The case study method was mainly used to examine quality of care as an alternative to family system. Three children were identified from three different children homes and interviewed by one of the authors of the paper. The collected data was written and analysed using thematic order. Major findings of the study are summarized below:

5. Findings

5.1 Socio Economic Status

The general profile of children indicated that they were from families in rural areas where infrastructure facilities are not adequate to provide quality care for their children and particularly, gain access to education. The majority of institutionalized children and their families were economically challenged, and had imbalanced family systems with various social issues such as poverty, weak implementation of parental responsibilities, family separation, loss of both or one parent due to the conflict, migrant mothers, lack of housing facilities, and infrastructure facilities in their own communities.

5.2 Reasons for Institutionalized Care

Some of the root causes identified for the increasing institutionalised care in Northern Province were as follows:

- **The need to educate children** which was considered as a prime responsibility of family in the modern competitive world of today, as a preparation of the children’s future careers and gainful occupations.
- Children’s homes have taken up the role of being school hostels due to lack of school hostel facilities during and in the aftermath of the conflict which lasted for over three decades.

- **The high cost of living and problems of housing** in displaced areas, which contributed to separating children from parents. The root cause of this issue was the displacement of families for the past period of 30 years due to war and natural disaster such as the tsunami.

- The increased use of **technological developments** has caused tremendous changes in life styles and values in the aftermath of the conflict in Northern Province. Children appear to be unable kept alone even in rural areas due to the increasing numbers of instances of **child abuse**, inappropriate use of mobile telephones, the Internet and excessive leisure time activities.

- **The migration of the mothers** who leave children behind in search of jobs abroad (mainly the mid-east). This exacerbates the problem of facilities for care, and the need for better protection by fathers and grandparents.

- The general opinion among under privileged communities is to depend on using state or voluntary welfare services rather improving and expanding the traditional family systems of extended family support.

- Institutional care is regarded as a means to prevent **early marriages** among girls.

Though institutional care is not very much suitable for our culture and background, today there are increasing numbers of children who require such care, even on a short term to rebuild lives in
the aftermath of the conflict particularly in the Northern Province. The majority of these children’s homes are urban and town based.

The requirement for institutional care for children are due to those who do not have a home and primary care givers, who have abandoned them, are economically challenged. The lack of family care or caring parents is a problem. The family as a social institution has been idealized, but in reality, many children have experienced serious difficulties and problems in their own family environment. The major reasons are lack of safety, discipline and educational opportunities. The children homes offer several educational and extracurricular opportunities. In such circumstances, child care homes appear for families to be a better choice for children to grow up in.

The majority of the children live in rural villages of Sri Lanka. Although village life has many hardships, and usually has extended family systems, there is an erosion of protection for children, and a weakening of educational opportunities in their own community. This mainly stems from internal displacements, resettlement, and lack of school facilities. For instance, children homes are situated in towns. There are 48 such registered Children’s homes in the Northern Province. According to the Department of Probation and Child Care (2010), in the Northern Province, 2481 children have been provided with residential care. Government, non-governmental organizations and private organizations provide welfare services to children responding to developmental needs. It is argued that the effect of the institutionalization of children is felt more related to care and protection.

From the angle of services for children, with regard to institutions, it provides a certain level of care which is regarded as being better than that possible in a family in these areas. This is particularly so for food, health-care, educational facilities, discipline and entertainment. These
factors appear to be considered more important as compared with emotional attachments of parental love and affection. There is a perception that children are placed in homes for educational purposes. They do so up to their advanced level examination. One physically challenged girl expressed that “I have all facilities here” as they were provided with appropriate individual and healthcare facility along with well-arranged transport facility for her to attend school and tuition classes. The particular voluntary home has only 19 girls and all of them were very satisfied with the facilities in the institution. She also shared that everyone was “friendly” to her and helped her to cope with her disability. She did not feel a separation from her family according to the probation officer and other inmates. This particular children home had a well managed administration, including a well managed component for children’s participation in deciding their desires for food preferences, entertainment and a small allowance to purchase fancy items for their personal use.

Children have also been view as social capital in thought; therefore educating children has become commercialized. As a result, their childhood and right to a family environment is often ignored. On the other hand, children are also feeling that they have to study for a successful future, and that they are powerless, unable to separate being with their parents from the means to attain educational goals. One single mother expressed during the parents meeting held by one of the institutions, ‘I have to educate my children for a future job for them, and I do not want them like me to become a daily labourer.’ Another uncle who is guardian of a child who lost both parents, emphasized that, “I have to educate her to stand on her own in her life. Although other’s in the community may perceive this negatively even if I look after her [as my own] as well as my sister’s daughter, it is better for her to stay at the children’s home where facilities specially educational and extracurricular activities are available in abundance and
free of charge." This statement provides some evidence that informal foster care is being criticised and viewed as negative, and that there are rapid changes occurring in the family system. There is a lack of awareness of the fit person order. Informal foster care is perceived as quality care within a family environment. One single parent expressed with tears that his daughter was safe here, and having three meals a day and that if she was with him, she would not have a safe environment as he is staying in a temporary tent and had inadequate food to give her. Another belief among parents of children on institutions was that these were safe places for girls to grow, and that, it prevented them from early marriages. Once children are institutionalized parental responsibility is transferred to children homes and parents felt relieved of taking up the challenge to look after their children. However they hardly provide any money while their children are in the institutions. A few parents out of fifty raised their hands as having the habit of saving for their children, especially as an after care plan. The post care plan should be the responsibility of children and their parents or guardian.

5.3 Quality Care in Institutions

Quality care is a social construction within a society. Institutions should endeavor to promote child development and socialize them to become responsible citizens in a society. Quality care is seen as contextual and viewed within cultural factors. Age-related needs of children are essential for caring and stable development. That raises the need for individual care plan, which is a vital need for institutionalized children to measure themselves and for fulfilling developmental needs. The study revealed that parents and children are pleased with the existing institutional living arrangements. However, it is seen when mothers visit to see their children, the children express their desire to go back with them, and live with their mothers.
One of the girls quoted that “I don’t like the warden. She used to scold us often and call us orphans and donkeys. She always wants us to do what she tells us otherwise she beats us up. She has a child who is also living with her in the home, and she takes good care of her child only. She always uses offensive language with us and this is why I don’t like her. When she scolds me I used to sit alone or go and talk to my other friends. I used to think and cry, and wonder why, god has given us so much sadness. This may be the fate of orphans like me.”

Some of the studies examined reflected that these institutional wardens are not trained to properly care for children. There are homes that employ unmarried/ widow and senior interns as wardens who lack proper training. One of the managers of the institution reported that their institution had no trained staff, and that they had hired these persons to look after the children. The wardens need to undergo training in taking care of the children in such manner that the children are not denied of care and affection.

Institutionalization mainly aims to provide a temporary/ alternative care for children who need care and protection but it is seen that long-term care is the outcome, once they institutionalized. The children stay till the age of 18 and sometime more than 18. They may even receive employment in the same home.

The study found that there is a lack of preparation for parents and guardian to provide for their children with an after care plan, while the children are still in the homes. Parent and guardian meetings reflect that only very few parents save for their children during the institutionalization of their children. The dependency attitude reflected during the discussion with parents. These findings on the whole have highlighted a number of issues that need to be
researched further in depth, before using the relevant data in the formulation of welfare policies pertinent to child care services.

5.4 Highlighted Issues

The issues identified were

1) Inadequate infrastructure facilities and services for vulnerable and poor rural families
2) Lack of parental responsibility
3) Safety issues, especially for girls
4) Problems of unemployment
5) Poverty
6) Process of institutionalization and stigmatizing of child development
7) Appointment of inadequately trained and supervised care givers, and lack of staff who are “child friendly”
8) Failure to develop better age appropriate care plan and child friendly measures
9) Lack of an after care plan with the collaboration of parents/ guardian
10) Lack of empowerment of parents and guardians take up their child care responsibility

Conclusion

Conclusively, the administration of child care institutions and their influences on children differs on the basis of the number of children in such institutions, available funds, perception and behavior of the management, the quality and extent of supervision, training of staff and monitoring measures. In the analysis it was observed that certain common patterns regarding institutionalization emerged on the basis of routine activities and the availability of free
educational facilities. Children appeared to have collaborated willingly with their parents to join the institutions, in the pervade notion, that this was the only way to pursue their education. But as a result, they become passive recipients of institutionalized care services.

The study recommends the development of strategies and programs to resolve identified issues, with appropriate multi-disciplinary interventions, to attain the aim of a more holistic approach to child development. It also highlights the need to appoint and train case managers who can identify creative skills and abilities of children who can fulfill their potential to become productive citizens. It is important and interesting to point out that among the findings, the most striking outcomes that pervades all issues is, the impact of the process of institutionalization, and the growth of an artificial style of living arrangements for children in institutions, away from their family and familiar surroundings. It is important to widen access to education in rural areas, and improve the accessibility to schools in such areas.

It is imperative to develop alternative strategies to solve identified issues covering wider samples, and search for a more multi-disciplinary child friendly practices, based on evidence from social work interventions and research, which will enhance the collective social responsibility of families and communities. This must include social protection systems for deprived families and communities with community based support mechanisms that will enable and empower children to remain in families and grow and develop to their full potential. This should include protection measures for children, particularly girls within such families.
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