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Institutionalised Children
Explorations and Beyond



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Aims and Scope

Institutionalised Children Explorations and Beyond is an international, multi-disciplinary, peer-reviewed academic journal on Family Strengthening and Alternative Care for out-of-home-care (OHC) children and young persons, focused on the South Asia region. The journal documents original research papers, good models of care practices, comprehensive desk review papers, editorial and foreword, expert opinions, interviews, and book and movie reviews. Along with addressing issues that can influence policy reforms, decision-making and improve practices and standards of care, the content of the journal aspires to strengthen research, knowledge and practices currently prevalent in the region.

In essence, *Institutionalised Children Explorations and Beyond* sees itself as a forum for studies, discussions, debates and research on issues that would lead to better practices of care, improve mental health, and encourage the integration of OHC children and young persons, including the differently-abled, into the mainstream and thus to their inclusion in civil society. The journal will be of interest to board members, managers, caregivers, psychologists, counsellors, psychiatrists, volunteers, and social workers, in governmental and NGO organisations, as also to policy-makers, and university faculty who are interested in the care and study of children in institutions, as well as in other alternative forms of care. Students in social work, psychology, law and other related disciplines across the South Asian countries, as well as other mental health professionals interested in these studies, will find the journal useful. The scope includes encouraging studies on these issues by universities and hospitals, together with clinics, young professionals and those in the field of caregiving, especially in the non-governmental not-for-profit-sector. The belief is that such education, and sharing of knowledge and experiences would lead to more dynamic prevention as well as rehabilitation models.

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Editorial

Institutionalised Children Explorations
and Beyond

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As I sit down to write the editorial for the March 2022 issue, I begin with a word of caution and optimism. In the ninth year of our publication, we have covered many issues that impact the lives of those who are orphaned or separated and are otherwise in need of care and protection. We have actively sought research articles, and both regional and international perspectives on several areas of concern, emphasising new and innovative ideas. Our singular purpose has always been to strengthen South Asian regional collaboration and provide a platform for people and organisations to present their work. From addressing global health issues (Coronavirus Disease 2019—COVID-19) that impact care delivery as well as the mental health of Care Leavers for orphaned individuals, our academic and intellectual reach continues to stretch beyond our conventional borders. With that approach in mind, in this issue, we challenged ourselves to delve into the lives of those children and youth who suffer from disabilities and had been in the alternative care system. While motivated by our sincere efforts to broaden the literary landscape of this journal, we were also struck by the lack of research and/or interest in this topic. The reader will note that there are only a few articles on this subject, reflecting the relative lack of attention to this group of individuals, whether they live at home or in alternative care settings. So, while in this issue it remains a special focus, we hope to return to this topic in future. Perhaps the realisation that there is such a dearth of articles and interest will spur action and societal discourse leading to creative thinking and exploration in the process.

In keeping with our wish to challenge ourselves and broaden our discussions, we introduce a new section in this issue, titled *In Focus*. This section will now be a regular feature of the journal, providing a platform not only for new and innovative ideas for care and management of orphaned and separated individuals but also for those issues that are of growing concern in the regions, including issues related to children in conflict with law. We hope that this segment will blossom to areas beyond those that we customarily address and thereby provide aspiring thinkers, researchers, academics and practitioners to participate actively in this endeavour.

The journal begins with a foreword in which I highlight the limitations that impede the delivery of proper care and services to the disabled. The United Nations (UN) mandate, which specified care guidelines central to the care of children, was implemented in 2006. Unlike the UN Convention of Rights for Children's Act, 1989, which appeared several decades earlier, countries that ratify this mandate receive a road map that provides thoughtful structure- and research-backed

strategies to bring about the much-needed change in the care of such individuals. However, compelling societal attitudes and cultural beliefs, often based on religious dogmas, colour the delivery of services and a humane care towards individuals who fall on a continuum of disabilities. From the provision of services, to limited resources and knowledge to lack of proper implementation of policies, all compound the ongoing care of the disabled individual for the ones who fall out of the family net and enter the alternative care space. We hope to shed further light on these issues with some focus on the specific trends and programmes that have been implemented with successful results.

For our interview section, we asked Merry Barua, the Founder Director of Action for Autism, India, to share her thoughts and observations on this topic. Dr Gurmeet Kalra posed several well-thought-out questions to Ms Barua, capturing her work, her dedication and her commitment to this field. Ms Barua's personal life (she has a son who is autistic) has motivated her to advance the understanding of autism in the region and to promote the establishment of inclusive learning facilities wherever possible. Ms Barua's work is commendable in the understanding of autism, a disability that has spiked considerably in the past several decades, challenging parents, teachers, mental health workers and other caretakers. Inspired and informed by a deep sense of commitment, the interview is informative, compelling and revelatory.

Noteworthy in our selection of research articles, is a contribution by Dr Shamim Ferdous and her colleague Mohammad Deloar Hossain, on understanding the vulnerability of children with disabilities living in alternative care. In this paper, Dr Ferdous, the Executive Director of Bangladesh Protibondhi Foundation, and Mr Hossain, a child protection expert, explore the negative attitudes, the lack of adequate policies and legislation that they feel discriminate against this marginalised and excluded group in society. These barriers interfere in accessing proper healthcare, education and, sometimes, even survival. These authors provide extensive documentation of the policies and legislation that could improve the plight of the disabled in Bangladesh. This paper is rich in its description of several programmes that have been implemented by Social Services Departments to ensure that these children receive shelter and care and arrange for rehabilitation whenever needed. This paper is a must read for any researcher/clinician who wishes to work with this population. It is rich in detail and description and provides a trajectory of hope for the SAARC region with both practical applications and strategies that one can learn from and incorporate in their work.

A paper on inclusive teacher practices by Anjali Forber-Pratt further broadens the discussion on this topic. In her paper, Ms. Pratt examines the institutional and policy contexts within which teachers' aim is to promote inclusive education in India. By researching the inclusion of girls with disabilities in Kolkata, Ms Pratt identified the best practices, dilemmas and challenges that teachers and staff face in their efforts. The author's findings support the strength of familial bonding that occurs when a proper and humane mechanism for feedback and support exists within the system. Using a teacher-centred voice to promote growth, it supports resiliency in their teaching efforts as well as in their conceptualisation of inclusion and disability.

Dr Josephine Anthony's paper on children with disabilities provides a conceptual framework for an 'individual-inclusive ecosystem model of rehabilitation' for children who suffer from a disability in India. This multi-pronged intervention approach is inclusive, focusing on the needs and challenges of children with disabilities living in childcare institutions. The inclusiveness of intervention draws from the experience of child-centred work in government-run childcare homes. It involves working with the individual, involving peer groups, childcare institutions as well as the judicial system. By analysing the problems of these children, it provides a theoretical background of the individual–environment interactive model, which is in line with that formulated and mandated by the UN Convention of Disabilities Act.

The two remaining papers in the research section of this issue address vulnerabilities in children who often belong to under-represented groups and have rarely been mentioned in our coverage. In her paper on child Buddhist monks, Dr Deborah Parks leads us into a conversation about the rights and vulnerabilities of children who are entrusted and placed in monasteries to live as child monks. While they are typically not seen as being in alternative care, there are many parallels and overlaps with children in orphanages and care homes. The author covers risks that the children face (e.g., sexual abuse), which are not recognised or protected under the UN guidelines for the Alternative Care of Children. She promotes the understanding of their concerns and encourages to think of under-represented populations that go unrecognised and who are marginalised in society.

Finally, Dr Anna Schmid captures the essence of working with individuals in alternative care settings. According to her, our work and engagements would deepen,

if we were more fully aware not just of problems to be solved and challenges to be addressed, but of all the knowledge, opinions, ideas, experiences, dreams, skills, creativity, hopes, dreams, energy, solidarity, critical thought and so on that every person in the child and youth home brings with them. (p. 1)

Dr Schmid's optimism and dedication to her projects are clearly evident in this enriching and energising paper that encourages all of us to engage in cooperative endeavours with peers, staff and others so that one's dreams and innate potential can be realised.

Making its debut in this journal, the *In Focus* section is pleased to present a paper by Abdullah Khoso from Pakistan. His paper on addressing the recidivism rates among juveniles is a qualitative case study. Interviewing three children between the ages of 15 and 18 years, Mr Abdullah discovered that while partial legal and institutional provisions and arrangements existed to address this recidivism, they were not always implemented. Thus, for example, while detention existed, they did not always have the proper rehabilitation programmes in the community. Instead, the centres that were available actually led to an increase in crimes. The author advocates for policies that provide for diverse programmes, sensitisation and training of police and judicial officials and the community members. In other words, trauma-informed care and programmes are far more beneficial in rehabilitation efforts.

Authored by Ms Audria Choudhury, our good model provides an overview and usage of a tool, named Home Thrive Scale, to be used in COVID-19 situations in India. This tool aims to serve both prevent family breakdowns and reintegrate children from institutions back into families (or other family-based or alternative care options), thereby identifying and addressing safety concerns for families, assess and facilitate reintegration options for children if they are in a childcare institution and measure a family's overall progress over time.

The transition from residential care to family-based care can be difficult, challenging and confusing for many people. In the international perspective piece, Nicole Wilke and her colleagues examine the financial impact of this transitional process. The focus is on the financial impact (as costs initially increase before they begin to stabilise and decrease) to the impact on donors who need support and realignment of their engagement practices. The paper is compelling, in that it encourages a more systemic approach that keeps all stakeholders in mind as shifts in care are implemented.

An opinion piece by Manoj Suryawasnsi states that the discrimination against the children and youth with disability stems from a lack of understanding of the needs of a person with a disability. It beautifully captures two case studies from India and Nepal that speak about the struggle and good examples of a setback to comeback.

The book review by Radhika Mullick Alkazi examines the memoir of Lemn Sissay. The life of this young Ethiopian boy who goes from foster care to an institution in Britain raises many questions of geographical dislocation and its consequences. While providing hope for a life that will be transformed, it, nevertheless, through the words of this young writer, introduces us to the painful journey that a child encounters when they enter a world that is markedly different from their own. From issues of discrimination, recognition of feeling different and vulnerabilities, the author struggles and grows. Eventually, he finds a way to cope through writing poetry.

Lakshmi Madhavan, our movie reviewer, has an unusual but thought-provoking choice for a movie. In the *Color of Paradise*, written and directed by Majid Mjidi, an Iranian director, the painful inner world of a child who, while not orphaned, still feels like an orphan in one's own family, is explored. The protagonist is an 8-year-old blind boy who experiences his father's lack of concern and care. His fears lead him to find joy and connections in nature. Gradually, the director takes us into the child's internal world, shaped by complex childhood experiences. These shape his life, but we also learn how young Mohammad copes and deals with life's tragedies, one of them being a father who shows little or no concern for his young son. Other familial bonds enter the young child's life to provide hope and comfort. Prominent among these is a paternal grandmother whose unquestioning love for her young grandson alleviates the child's grief, plants a seed of hope and perhaps, in the end, unearths the child's innate strength to survive and grow. It beautifully portrays the young protagonist, whose creative ability transforms his life in the end.

Foreword

Institutionalised Children Explorations
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The Forgotten: A Tale of Despair and Disparity

My first introduction to a child with disabilities came when as a young girl of ten, I was introduced to the ‘older’ brother of a school friend. Her brother, a 15-year-old teenager, lay strapped, in a supine position in a ‘pram’, a benign smile on his face, as he flapped his crooked arms and appeared to grin and acknowledge his introduction to me. I learned later that he had been born with a physical and mental disability and that he would live the rest of his life in this manner. Unable to walk, talk or feed himself, he was helpless and completely dependent on the care provided by his parents and other family members. This exposure undoubtedly had a profound impact on me, as my involvement with children who were disabled and in need of care and attention, continued to find a presence in my professional life and practice.

Several decades later, the birth of the journal, ‘Institutionalised Children Explorations and Beyond’, provided me with an opportunity to learn and work with children who had been orphaned or separated from their parents. Their overall care, mandated and guided by the UN Convention of Child Rights, (1987), has been amply documented but the particular nuances of their care, from mental health to the well-being of their caregivers to the long-term functioning of the Care Leavers were unexplored and unchallenged. The journal provided me with an opportunity to explore these burning questions at length and thus began a journey that has been central to my academic and clinical world for more than a decade.

The UN has provided us with a compass to understand disabilities (World Health Organization, 2001). The International Classification of Functioning, Disability and Health (ICF) defines disability as an umbrella term for impairments, activity limitations and participation restrictions. Over a billion people of the world’s population are recognised as having some form of disability. In India, according to the 2011 Census, about 2.2% of the population have some form of disability. The prevalence is higher in rural areas as compared to urban areas with a higher percentage amongst males than among females. Disabilities range from seeing, hearing, speech movement and mental retardation and mental illness and multiple disabilities (World Bank, 2009).

These numbers will undoubtedly continue to grow as tragedies of one nature or the other continue to plague human existence. Not surprisingly, many children needing care come from areas, where poverty and social stigmas against such

individuals place their life in jeopardy. Frequently abandoned, these children find themselves at the mercy of institutional settings, where the nature of care and implementation of certain standards of care are often compromised as together attitudes, beliefs and the sheer exhausting nature of the work, render many a caretaker unable to carry out their duties in a humane and moral manner. Burnout levels are high and it is not uncommon to hear about the abuse, physical, sexual and emotional of these children who often lie huddled, like sardines, cramped in small spaces, waiting for care to be delivered. Shunned by many, their plight has been one of despair and disparity through most of their life. Current trends in the region are towards de-institutionalisation programs which promote foster care and adoption.

While the physical and mental health needs of those who are disabled are the same as everyone else it is recognised that they tend to generally have poorer health, lower education levels, fewer economic opportunities and higher rates of poverty than people with disability. Disability today is recognised as a human rights issue. In 2006, the United Nations Standard Rules of the Equalisation of Opportunities of Persons with Disabilities culminated in the adoption of the United Nations Convention on the Rights of Persons with Disabilities (CRPD). This World Report on disability served to facilitate the implementation of these basic rights beginning with the human rights approach to disability (World Health Organization & World Bank, 2012). The International Classification Functioning, Disability and Health (ICF) explores the barriers that disabled individuals face in society. Integral to this exploration has been the identification of the role of social and physical barriers in disability resulting in a shift from a medical to a social model of care and understanding. This bio-psycho-social model represents a compromise between the medical and social models. This introduced the idea that the environment, attitudes, perceptions and acceptance of these individuals would have to be examined, explored, challenged and reformulated. Through policy and implementation of guidelines, the reshaping of care of the disabled would be eventualised and realised in the world at large.

In the SAARC region, this model of care has been central to the care of orphaned children and those in need of care and protection. Through legislation and policy mandates to informing delivery of care, to recognising the mental health needs (resulting from overwhelming trauma) as well as ensuring the participation of the child in academic settings and other activities, this model has been the guiding platform for many institutions of care and practice. However, with disabled children, significant disparities in caretaking appear. From societal perceptions and prejudices towards the disabled (often fueled by religious and cultural beliefs and attitudes) to the significant physical/emotional needs of a disabled child, the care and management of these children and adolescents indicate neglect, apathy, disparities and despair.

In an effort to understand the complex needs of this group of individuals, the ICF has provided specific guidelines to measure critical aspects of disability. The ICF has adopted a neutral language and does not distinguish between the type and cause of disability—for instance, between ‘physical’ and ‘mental’ health. Furthermore, they identify specific *environmental, developmental and preventive factors* that can alleviate and perhaps ameliorate suffering in this group.

With respect to environmental factors, the ICF identifies three interconnected areas that have an impact on a disability. These appear in the following forms:

1. Impairments that are problems in body function or alterations in body structure—for example, paralysis or blindness
2. Activity limitations are difficulties in executing activities—for example, walking or eating
3. Participation restrictions are problems with involvement in any area of life—for example, facing discrimination in employment or transportation.

The ICF recognises that environmental factors can act as facilitators or barriers to functioning, for example, products and technology, the natural and built environment, support and relationships attitudes, services systems and policies. The ICF also recognises personal factors such as motivation and self-esteem along with societal attitudes and beliefs that can impact the treatment and functioning of the disabled. However, it does not provide specific guidelines as to how one can work with such contextualised situations.

The ICF also recognises developmental trends in disabilities along with the significant discrimination that these individuals face in society. From negative attitudes to negative treatment, the plight of the disabled often swings between despair and disparity. Such attitudes and treatment have adverse effects on children and adults with disabilities who then respond with poor motivation and self-esteem and reduced participation in life. The experience of disability varies considerably between individuals and societies and generalisations for care and management can be misleading and limiting. In elucidating further on preventive strategies, the ICF recognises three major areas of intervention. According to them, a public health approach should include:

1. Primary prevention: Actions to avoid or remove the cause of a health problem in an individual or a population before it arises. It includes health promotion and specific protection (e.g., HIV education).
2. Secondary prevention: Actions to detect a health problem at an early stage in an individual or a population, facilitating cure, or reducing or preventing spread, or reducing or preventing its long-term effects (e.g., supporting women with intellectual disability to access breast cancer screening).
3. Tertiary prevention: Actions to reduce the impact of an already established disease by restoring function and reducing disease-related complications (e.g., rehabilitation for children with Musculoskeletal impairment).

The CRPD continues to have a growing impact on the level and kind of care that disabled children and adolescents receive worldwide. States ratifying the CRPD have a range of general obligations. Among other things, they undertake to:

1. Adopt legislation and other appropriate administrative measures where needed;
2. Modify or repeal laws, customs, or practices that discriminate directly or indirectly;
3. Include disability in all relevant policies and programmes;

4. Refrain from any act or practice inconsistent with the CRPD;
5. Take all appropriate measures to eliminate discrimination against persons with disabilities by any person.

It is widely recognised that disabled individuals in the community face many social problems and improving the quality of life of people with various types of disabilities is a difficult and challenging task. When examining the needs of disabled children who require care in an institutional setting as well as understanding their specific needs when they transition out of care, when possible, many community-based factors would need to be addressed. Many disabled individuals have little or no access to services and experience significant lack of opportunities in health services, schools, vocational education programs, and jobs. Community-based Rehabilitation (CBR) programmes in the region work to reverse negative attitudes in rural areas as well as urban settings. By providing greater visibility and encouraging people participation, several programs have made significant contributions to reducing the disparities in care in this population. For example, in Chamarajanagar, Karnataka, a local non-governmental organisation (NGO) assisted people with disabilities and their families to construct accessible toilets. Since the 1970s community-based rehabilitation has been an important strategy to respond to the needs of people with disabilities, particularly in developing countries (Kumar et al., 2012). The CBR programmes continue to evolve, shifting from a single-sector approach to a strategy for rehabilitation, reducing disparities in opportunities, working towards reducing poverty and advancing social inclusion of people with disabilities.

In conclusion, it is important to acknowledge the widespread social segregation of the disabled in the SAARC region. Often seen as liabilities, they are shunned and neglected. Cultural attitudes and beliefs, often fueled by religious beliefs, hamper the humane care of these individuals. To improve the quality of their life, significant research is required in the areas of socio-economic and cultural context (to alter attitudes and beliefs), early childhood education methodologies, development of user-friendly aids and appliances, and all other matters that can have an impact on their quality of life and our obligation to respond to it in a responsible and timely manner.

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Brief Communications

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- There is a firm commitment by the European Union and its member states to the deinstitutionalization of children in alternative care and support for their transition to care that is family- and community-based. Children growing up in alternative care have very often experienced significant trauma before being placed in care. Residential care, in particular, is known to expose them to additional risks if it is not equipped to provide them with the individualized care they need for their healthy development and social inclusion. Children need stable and safe relationships with caring adults to thrive, and such relationships are far more likely to be created in a family environment. (*Policy brief on findings and recommendations from the Datacare Project*. https://eurochild.org/uploads/2021/12/Children-in-alternative-care_Comparable-statistics-to-monitor-progress-on-DI-across-the-EU.pdf)
- The greater burden faced by children living with disabilities during pandemic means that additional efforts will be required to ensure their needs are being met when transitioning to the different pandemic phases. Programmatic actions will need to address these specific challenges during the pandemic and post-pandemic period along differentiated, inclusive policy responses. (*Children with disabilities and COVID- 19*). <https://data.unicef.org/topic/child-disability/covid-19/>)
- The number of dangerously malnourished children visiting Save the Children’s mobile health clinics in Afghanistan has more than doubled since August 2021. Up to one million children could be so severely malnourished that they could be at risk of dying unless they get the treatment they need. ‘Families tell us they have done everything they can—often going without meals themselves so their children can eat. Or, worse, having to give up their children because they can’t afford to feed them. It’s every parent’s worst nightmare.’ said Athena Rayburn, Director of Advocacy and Campaigns at Save the Children. (*Afghanistan: Number of malnourished children at Save the Children clinics doubled since August*. <https://www.savethechildren.net/news/afghanistan-number-malnourished-children-save-children-clinics-doubled-august>)
- As India is witnessing a sharp spike in COVID-19 cases, the vaccination for children, specifically of age 15–18 years, has started from 3 January 2022. Fortunately, this year, underprivileged orphan kids, due to COVID-19 or otherwise, will not face any issues with vaccine distribution as the government has already started taking steps to vaccinate them. ‘The

CWC has a list of children who have lost their parents due to pandemic or otherwise. We have also told the district magistrate to provide special or separate arrangements for their vaccination. There are many cases, where we know their local guardians, the list has already been forwarded to the district magistrate and the whole vaccination process has started taking place,' a CWC member in East district of Delhi, under the condition of anonymity, told *The Sunday Guardian*. (*Govt steps up vaccination of orphaned children*. <https://www.sundayguardianlive.com/news/govt-steps-vaccination-orphaned-children>)

- The National Commission for Protection of Child Rights (NCPCR) gave the information to Supreme Court about the number of children orphaned due to the COVID-19. The number of orphaned children has been 1,47,492 since 1 April 2020. These children have lost their mother or father or both parents due to the pandemic and other reasons. 'If we talk about children's living areas, 1,529 kids live in children's homes and 19 in open shelter homes. 188 live in orphanages, 66 in special adoption agencies, 39 in hostels and two in observation homes', reported *Economic Times*. (*Over 1.47 lakh children orphaned since COVID-19 outbreak In April 2020: NCPCR Report*. <https://thelogicalindian.com/trending/children-orphaned-since-covid-19-april-2020-ncPCR-report-33371?infiniteScroll=1>)
- The aim of the Guidance on Communication Strategies to promote family care for children with disabilities is to build the capacity and confidence of family strengthening and care reform practitioners to use communication strategies and messaging in raising awareness on the importance of family for all children and the use of residential care only as a last resort. This document reinforces the importance of putting family care for children with disabilities at the top of any care reform agenda. (*Toolkit for disability inclusion in care reform communication strategies to promote family care for children with disabilities*. https://bettercarenetwork.org/sites/default/files/2021-12/Disability%20Toolkit%20Communication%20Strategies_Final.pdf)
- BICON 2021 was an opportunity for government and intergovernmental representatives, civil society organisations, practitioners, academics and most importantly care experienced young people to come together and discuss the most pressing issues regarding children's care in Asia. With a focus on implementation, practitioners shared examples of innovation, highlighted promising practices, and showcased local solutions to challenges faced by countries across Asia. The reports of this event can be accessed at <https://iacn.in/images/resources/be090721950866791cb5277b77ceb7f2.pdf>

Upcoming Events

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90th Session of the Committee on the Rights of the Child

Website: http://tbinternet.ohchr.org/_layouts/TreatyBodyExternal/SessionsList.aspx?Treaty=CRC

Organizer: United Nations Human Rights Office of the High Commissioner

Date of Event: 9 May–27 May 2022

Location: Geneva, Switzerland (Palais Wilson, Ground Floor Conference Room)

Nine countries will present state reports for consideration. The Committee on the Rights of the Child (CRC) oversees the implementation of the Convention on the Rights of the Child ('the Convention'), and its Optional Protocols on the involvement of children in armed conflict and on the sale of children, child prostitution, and child pornography, through its consideration of State reports and inquiry requests, and its preparation of general comments, substantive statements, and general discussion days.

Child in the City Cascais Seminar: How to Make Children's Rights Mainstream in Local Policy Planning?

Website: <https://www.childinthecity.org/2021-cascais/>

Organizer: The Child in the City Foundation

Date of Event: 19 May–20 May 2022

Location: Cascais, Portugal

Field experts will share their experiences on different aspects of highlighting children's rights: what challenges and problems they face, how to engage young people in the process, and how to keep focusing on child-friendly policy in times of corona. During two days of intensive sessions, talks and interactive workshops participants will be given an opportunity to learn and to share both theoretical reflections on children's rights and practical implementation of the UN Convention of the Rights of the Child in specific policy contexts.

8th Conference of the International Society for Child Indicators: Children's Rights and Opportunities in an Unequal World

Website: <https://isci2022.org>

Organizer: International Society for Child Indicators

Date of Event: 25 May–27 May 2022

Location: Gramado / RS - Brazil

ISCI conferences have been held every two years for the past 14 years. These conferences aim to gather researchers, practitioners, policymakers and child advocates from across the world to share and discuss the latest child indicator's research and implications for policy and interventions.

ISPCAN 2022 International Congress: Estonia

Website: <https://www.ispcan.org/ispcan-event/ispcan-2021-congress-europe-bid-now/?v=402f03a963ba>

Organizer: International Society for the Prevention of Child Abuse & Neglect (ISPCAN)

Date of Event: 13 June–16 June 2022

Location: Estonia

The four-day congress 'Child Protection for the Most Vulnerable Children and Families' will focus on mental health and disorders, prisoners, aspects of sexual and other abuse, domestic violence, Child Protection for Children of Incarcerated (and Addicted) Parents, cross-border cooperation and the implementation of digital services in the field.

International Conference on Family Law and Children's Rights

Website: <https://waset.org/family-law-and-childrens-rights-conference-in-june-2022-in-london>

Organizer: The International Research Conference

Date of Event: 27 June–28 June 2022

Location: Virtual

International Conference on Family Law and Children's Rights aims to bring together leading academic scientists, researchers and research scholars to exchange and share their experiences and research results on all aspects of Family Law and Children's Rights. It also provides a premier interdisciplinary platform for researchers, practitioners and educators to present and discuss the most recent innovations, trends and concerns as well as practical challenges encountered and solutions adopted in the fields of Family Law and Children's Rights.

CALL FOR PAPERS

INSTITUTIONALISED CHILDREN EXPLORATION AND BEYOND (ICB)

ICB is an international, multi-disciplinary, peer-reviewed academic journal on Alternative Care for out-of-home-care (OHC) children and youth, focused on the South Asia region. Along with addressing issues that can influence policy reforms, decision-making and improve practices and standards of care, ***ICB, in proud partnership with SAGE Publications***, aspires to strengthen research, knowledge and counselling practices currently prevalent in the region. ICB serves as a forum for studies, discussions, debates and research on issues that would lead to better practices of care, improve mental health, and encourage the integration of OHC children and young persons, including the differently-abled, into the mainstream and thus to their inclusion in civil society. Published electronically and in print version, twice a year (March and September), every issue of ICB presents original research papers, good models of care practices, comprehensive desk review papers, editorial and foreword, expert opinions, important reprints, interviews, and book and movie reviews.

We are **presently receiving manuscripts for our September 2022 and March 2023** issues, which aim to include research contributions along the following sub-themes, among other relevant subjects within Alternative Care in South Asia.

The September 2022 issue is focused on the issue of Leaving Care and Care Leavers and has the following thematic areas to cover:

- Transition from childcare to aftercare: Defining successful transition
- Good practices that empower Care Leavers
- Policy and legal framework on Care Leaving
- The impact of COVID-19 on Care Leavers and the way forward
- Participatory Care Leavers research