

IMMERSIVE SIMULATION LAB: TRANSITION TO FAMILY- BASED CARE IN INDIA



**27 FEBRUARY 2020
DECCAN GYMKHANA, PUNE**

REPORT

Every child should be able to live in a family, either with their parents or in an attachment-based, family styled environment while experiencing a sense of belonging

UNITED NATIONS CONVENTION ON THE RIGHTS OF THE CHILD



On Thursday 27 February 2020, a unique event took place in Pune: an immersive simulation lab that allowed child protection allies in Maharashtra a hands-on look at transitioning from a system relying on child care institutions (CCIs; orphanages) to a system based on a range of family-based care (FBC) and family strengthening services. This was the first pilot of this conference model in South Asia and our survey results show it to have been a huge success!

Snehalaya's credibility allowed them to approach the Maharashtra Commission for Protection of Child Rights (MSCPCR) and secure Chair, Pravin Ghuge's support. Another important party in this venture was Children's Emergency Relief International (CERI)'s Global Director of Advocacy, Ian Forber-Pratt, who is one of the people involved in drafting the guidelines for FBC at the national and state level. Mr Forber-Pratt has been providing Snehalaya with guidance on the move towards family-based care over the preceding 18 months.

The conference format was secured by a globally-offered model by CAFO, in partnership with Hope and Homes for Children and the Faith to Action.

The model, created by CAFO, Hope and Homes for Children and Faith to Action Initiative is available to the public. We express our sincere thanks to these organizations for offering this format to the field.

The conference attendees included government representatives involved in child protection, including members of the District Child Protection team, Child Welfare Committee team and Government Sponsorship and Foster Care Approval Committee. There were also representatives from UNICEF, SOS Children's Villages, Miracle Foundation, CSA, Prerana and Swanath Foundation. A wonderful mix of government and NGO people exchanging ideas and experiences.



Before we share the results of the conference, some context:

Since the 2015 Juvenile Justice Act (JJA) came out, the determination and enthusiasm of the Indian government to move from CCIs to FBC have been increasing. However, wanting something done and getting it done, are two separate matters. In fact, many people in the room for this training held the opinion that a CCI is the safest place for a child. This conference offered each person insight into the complexity of a child protection system shifting to a new way of caring for children. The world over, we have learned that attempting to make a transition from institutional to FBC, without the knowledge and skills to do so properly and responsibly, leads to very serious problems.

OUR NOTE TO YOU

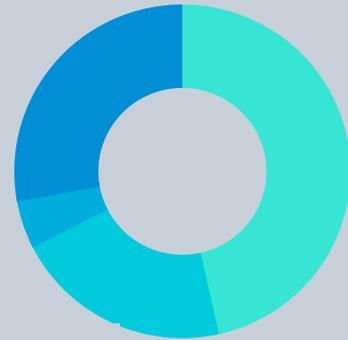
Thank you to everyone who attended the first simulation lab to be held in India, as we hosted our event on how FBC can be effectively implemented in Maharashtra and India. We are extremely grateful to our carefully selected delegates for committing their time, energy and brilliant ideas to help us all navigate the case study to the end of the day. You all helped bring further clarity on the direction we should be heading and the roles we all have to play in the success of family-based solutions for children living in care. As a result, we have a report outlining some key processes in an emerging field that can immediately put to use in your organisations.

Snehalaya has dedicated almost two years to developing a strategy to create a replicable model for implementing FBC at district level and felt this was the right time to share our journey so far with like-minded people and organisations. We were curious to see how others were interpreting the national and state guidelines and to create the links that will enable us to work together to implement them.

We feel honoured to have been supported by MSCPCR, CERI and Family-Based Solutions both in delivering this event and in their belief in our ability to deliver solutions in the best interests of children. Thanks also to our event sponsors Sakal Social Foundation.

Implementing any new system takes a huge commitment and a lot of resources. Collaboration between NGOs, governments, families, donors, communities and other stakeholders will be key to the success of FBC in India.

The following graphics will weave throughout this report to show pre and post survey results, delegates' perceptions and demographic data.



30%

of delegates completed our pre- and post- lab surveys, their responses are recorded throughout this report

Feedback from the day is shared via quotes from:

WORKSHOP
PARTICIPANTS



SNEHALAYA STATS

For the the lab, we used a case study of a fictional CCI. In this report we share 'real' information Snehalaya has collected as part of a strategic review & stock & flow analysis.



Ukraine has one of the largest orphanage systems in Europe, with more than 100,000 children living in 663 institutions. In 2007, Hope and Homes for Children began a pilot closure of an orphanage demonstrating how, through the development of quality family support services and family based alternative care, institutions are unnecessary.

"Removal of a child from a family should be a temporary measure and reviewed regularly, but it is not the case in our country. A child who falls into the clutches of institutions is tossed as a ball from one institution to another. Nothing is done to get a child back home, to make sure there is a home for a child. Investing in the family and the development of children should be top priorities of the national policy and political agenda."

Hope and Homes for Children (2019). *Dismantling Ukraine's Orphanage-Based Care System: A Challenging National Reform.* <<https://www.hopeandhomes.org/blog-article/dismantling-ukraines-orphanage-based-care-system-a-challenging-national-reform/>> (last accessed (09/03/2020)).

READ

Opening Doors for Europe's Children Campaign (2020). *Lessons Learned and Recommendations to Strengthen Families and End Institutionalisation for Children in Europe.* Eurochild, Hope and Homes for Children, SOS Children's Villages International, IFCO.

<https://t.co/SBFwfbQkIU>

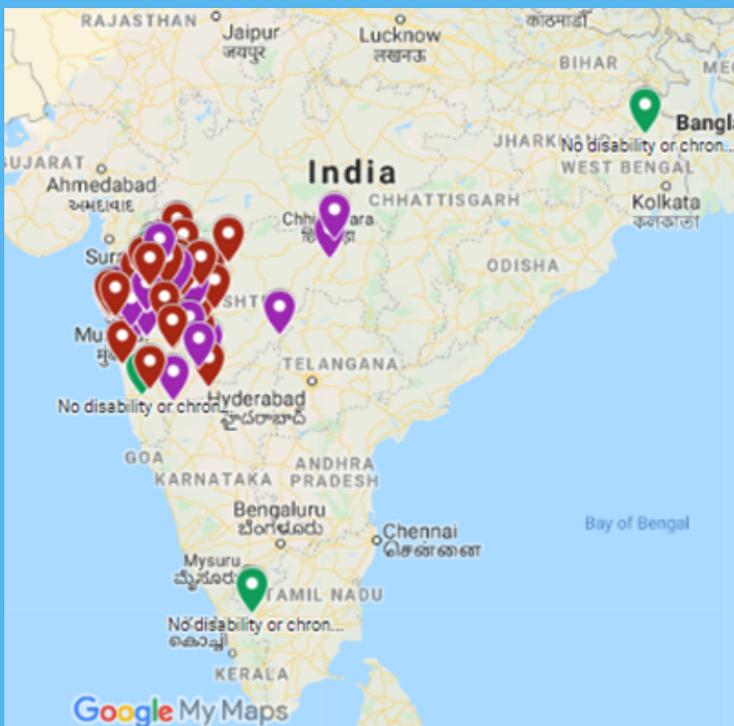
The problems associated with the transition to FBC can cause serious harm to the children involved, and in turn can lead to a loss of faith in the possibility to make it and family strengthening work. Being aware of these significant risks and challenges, Snehalaya felt that it is necessary to look into the issue deeply, to help India avoid the mistakes that have been made in other countries. Raising awareness, providing training and continuing to learn from experts are at the core of the work of Snehalaya's FBC Team. The conference in Pune was a part of this.

Snehalaya has the on-the-ground experience as it has supported 200,000 beneficiaries over the past 30 years, through 22 rehabilitation, health and education and awareness-raising projects. Its flagship rehabilitation centre shelters over 200 children, 70 women and 30 girls and 30 boys over 18.



SNEHALAYA STATS

- 📍 **HIV+**
- 📍 **Non-HIV+**
- 📍 **Other**



Snehalaya Tip

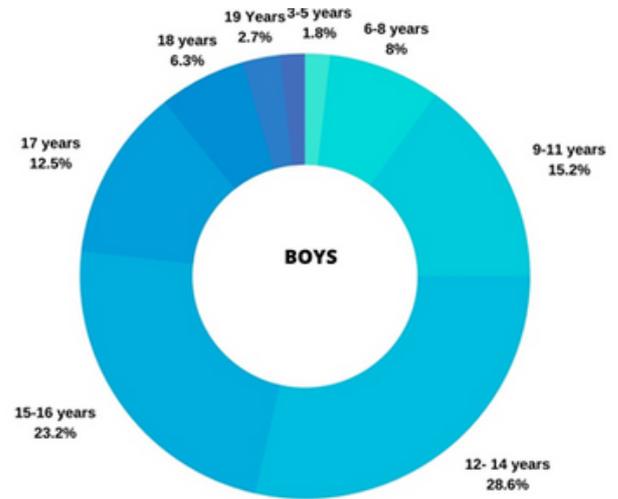
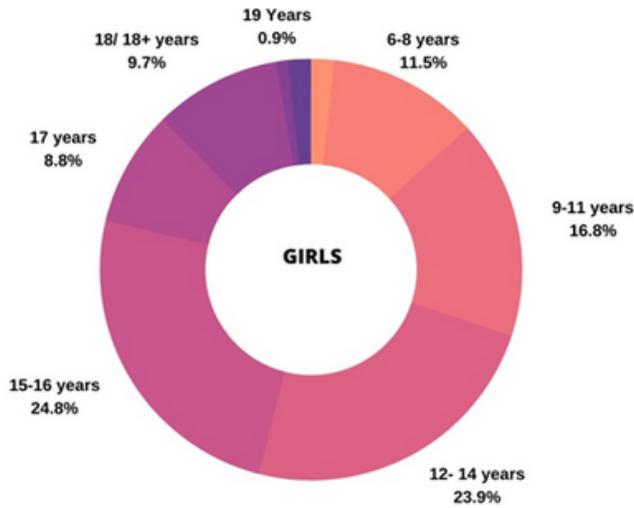
Use geo-mapping to quickly see where your beneficiaries come from.

Create your own geomap through your Google account. Login to: <https://www.google.com/mymaps> where you can upload spreadsheet data & customise your maps

Geomapping



SNEHALAYA STATS



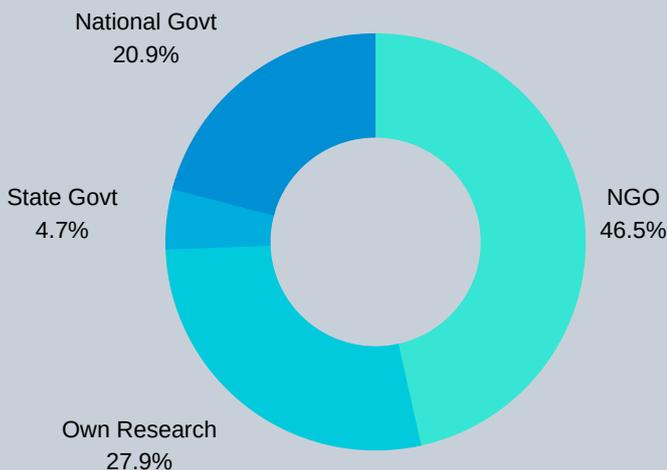
Snehalaya's flagship project provides care to 250 children of sex workers, minors rescued from sexual abuse and children orphaned by and/or living with HIV. Unfortunately, many of our children arrive in poor health due to poor nutrition and lack of understanding of how to administer ART effectively. It offers shelter, education and vocational training as well as an on-site school and HIV hospital with free and closely monitored ART.

The children live active and healthy lives, attending school and taking part in extra-curricular sports, cultural and recreational activities. They are able to access counselling and play their part in a democratic child parliament that allows them to raise any issues and play an active role in managing their home environment.

Once they reach age 18 and are considered adults, Snehalaya aims to place beneficiaries in college, back with their relatives or in suitable employment with accommodation provided, however for many this is not an option.

Two aftercare shelters provide for over 18s who have secured employment in local industries, places in local colleges or are undertaking vocational training. Live-in staff provide support and pastoral support as the youngsters learn how to become independent adults.

So far I have received most of my information about FBC from:



36%

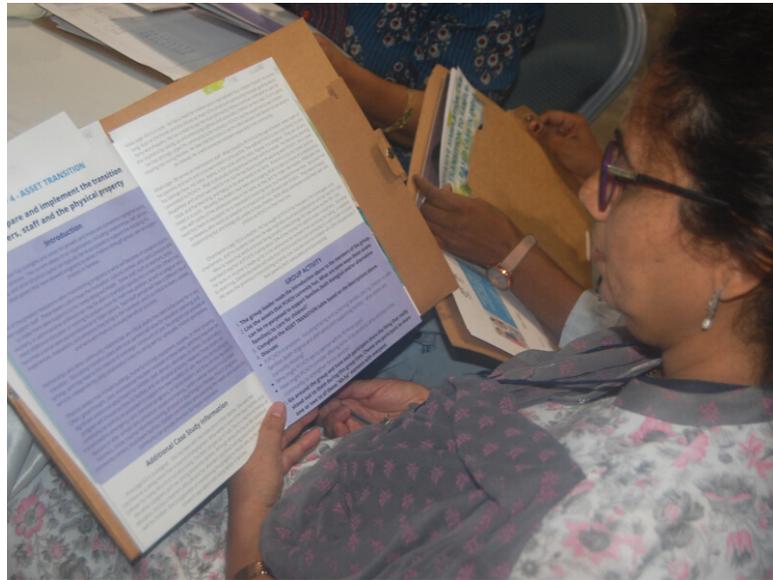
who thought FBC was impossible at the start of the day changed their mindset to view it as do-able by the end of the simulation lab

Thank you for your wonderful initiative

FOUNDER, VANITASHRAY

The table activity is completely new and a nice format

WORKSHOP PARTICIPANT



So that's the context. Here's what happened:

After an introduction to FBC, and an overview of the work that Snehalaya has been doing in this field, participants worked together to create family-strengthening support solutions through an activity-based program. This is where the 'immersion' started.

A fictional CCI, with 74 children in a semi-urban area that wished to expand their services to include FBC, came alive for participants through a case study. Specifics were outlined such as staff profiles, child profiles, funding sources and the history of the organisation (read more on page 7). Five tables were set up, with an expert facilitator at each one, with the topics of Engaging with Stakeholders, Case Management, Families, Asset Transition and Measurement of Results. Participants were divided into groups and spent 30 minutes at each table filling out a worksheet and discussing (and sometimes arguing) about how the case study CCI would transition to FBC.

There were spirited discussions at all tables with all groups, and many innovative approaches and solutions were discovered in the course of these. Many of the participants made a point of praising the model of the day, which allowed for meaningful participation and exchange of ideas and experiences.





The methodology of the workshop was very brilliant

WORKSHOP PARTICIPANT

The next stage of the day involved presenting the conclusions that were reached by the five work groups at each of the five tables and consolidating this crowd-sourced knowledge into five clear and concise overviews. These overviews showed that there is a really wide a range of options when it comes to every step of the process. The conclusions presented indicated a clear awareness of some of the risks or pitfalls that could end up harming the children. There was a clear consensus that moving towards FBC is the way forward, and an eagerness to find out how to overcome seemingly insurmountable obstacles and how make sure the best interest of the children is kept in focus. Participants highlighted the difficulty and necessity of determining the best interest of a child in every case. They were challenged as they realised that the current child protection system is not set up in regard to a nimble and responsive look at each child's family situation.

The worksheets filled out at each coaching table are presented in the following pages, and while they offer a starting point for a road map to what can be done, they are certainly not exhaustive.



THE CASE STUDY: Precious Children of Hope Children's Home

The workshop pivoted on a single fictional case study as the basis for every activity of the workshop

Precious Children of Hope Children's Home (PCHCH) has been serving in India for 26 years, since a couple began caring for children whose parents had died during a natural disaster. It eventually became known as the place to bring children without parental care. This evolved into a home, and eventually a nonprofit organization registered as a trust. The majority of PCHCH's funding comes from abroad but due to FCRA issues it is struggling. About 25% of their annual budget comes from three major donors.

PCHCH sits on the edge of a semi-urban town (pop. 108,000). HIV/AIDS has hit this community hard, with a 22% infection rate, leaving many children without living parents. Most community members are not educated beyond 8th Std. PCHCH currently has 74 children in their care, aged between two and 19, most of whom were born locally. Some were placed in their care by the CWC and others were voluntarily placed by family or caregivers.

The majority of children are healthy, although five are HIV+ and some have special mobility and learning needs. They are loved, well-cared for, safe, well-fed and have plenty of opportunities for learning and play. Nonetheless, when asked, the children say they long for a family to call their own. Once they reach adulthood and leave PCHCH, many of them struggle to transition successfully into community life, and often return to PCHCH seeking help.

Approximately one-third of the children have a surviving parent and around 80% have relatives living nearby and most children stay with parents or relatives for holidays and school breaks. Reasons for placement include:

- lack of funds for education
- nutrition
- medical care
- lack of childcare in single-parent families
- poor health of parents
- placement by the government due to abuse or neglect

The home has a small school, main building, two girls and two boys homes, guest accommodation and a large garden. It has a workforce of 18 skilled and committed local staff with a couple who serve as Co-Directors and sometimes interns from abroad.

Local staff members have varying motivations and attachments to the current model of care. Several of the staff members were once children in the home. For some, including two women who have worked with PCHCH for more than 20 years, the center is their family and they have anxiety about change.

There are four other CCI in the district – three NGO & one government-run

80% of children have living family

60% of the children want to be reunited with their family



Access the sim lab case study workbook & associated documents at:
www.snehalaya.org/FBC-Sim-Lab.

WORK GROUP REPORT:

Engagement

Based on the PCHCH case study found on page 7 of this report



THE TASK:

Draft a plan to raise awareness and engagement of key stakeholders for the case study CCI

STAKEHOLDER	POTENTIAL CONCERNS & BARRIERS	KEY QUESTIONS	APPEAL OF TRANSITION	ELEVATOR PITCH
CHILDREN & FAMILIES	<p>Protection/safety of child</p> <p>Acceptance by and of family</p> <p>Habits, routine</p> <p>Hesitation, Apprehension, Stress</p> <p>Isolation from siblings</p> <p>Individual attention</p> <p>Biological family's health</p> <p>Connections with CCI</p> <p>Previous experiences</p>	<p>Advantages of FBC</p> <p>Timeline/preparation</p> <p>Am I not doing well here?</p> <p>Why FBC?</p> <p>Why me, not my friend?</p> <p>Health concerns</p> <p>Fear of acceptance</p> <p>Dilemma between CCI/home</p> <p>Not wanting to live with a strange family</p>	<p>Sense of belonging</p> <p>Love</p> <p>Care</p> <p>Individual attention</p> <p>Affection from family</p> <p>Emotional support</p> <p>Practical exposure</p> <p>Platform creating</p>	<p>Communication, counselling & consent</p> <p>Importance of FBC</p> <p>Sharing success stories</p> <p>Ensuring support</p> <p>Touch points with peers, visits to other children living in families</p> <p>Keeping in touch with CCI</p> <p>Gate keeping</p> <p>Healthier option</p>
STAFF	<p>Loss of livelihood</p> <p>Loss of skills</p>	<p>Safety of children</p> <p>Are we not capable enough?</p> <p>Emotional detachment</p> <p>Training</p> <p>Change of skills</p> <p>Attitude</p>	<p>Best interests of the child</p> <p>Expanding the scope</p> <p>Change of role</p> <p>Responsibility to implement change, including mindset change</p> <p>Will become more skilful in monitoring & follow up</p> <p>Dedication to children</p>	<p>Good alternative job opportunities</p> <p>Counselling</p> <p>Training</p> <p>Staff capacity building (attitude, knowledge & skills)</p> <p>Engage staff in supervision</p> <p>Income generating ideas</p> <p>Restrict the number of cases</p>
DONORS	<p>What will happen to our investment?</p> <p>Monitoring</p> <p>Priorities</p> <p>Faith in CCI</p>	<p>Security of the child</p> <p>Concern about capacity</p> <p>All the stabilities</p> <p>Are there equipped staff at govt level?</p> <p>Data management</p> <p>Misuse of funds</p>	<p>Best interests of the child</p> <p>Happy and loved child placed in family</p> <p>Investment towards improved life for child</p> <p>Outcome of transition</p>	<p>Success stories</p> <p>Rehabilitation & Placements</p> <p>Research</p> <p>Funds will be used – where?</p> <p>Monitoring & support system</p> <p>Planning</p> <p>CCI can still play intermediary</p> <p>Sustainable assets utilising the donations</p> <p>Expenses of transition phase</p>
GOVERNMENT	<p>Govt regulations</p> <p>Lack of clear guidelines from government</p> <p>Lengthy process</p> <p>Monitoring</p> <p>Effective implementation of schemes</p> <p>Funding - Different budget allocation for non-institutionalised, funds irregularity</p> <p>Risk</p> <p>Security</p> <p>Staff concerns</p> <p>Training - Qualified staff</p>	<p>Security of the child</p> <p>Capacity</p> <p>All the stabilities</p> <p>Are there equipped staff at govt level?</p> <p>Data management not available</p> <p>Misuse of funds</p>	<p>Infrastructure</p> <p>FBC is asset to nation</p> <p>Burden will be reduced</p> <p>Corruption involved in CCI set up</p>	<p>Specific monitoring & evaluation systems - can be done in collaboration</p> <p>Accountability</p> <p>Interactions with like-minded people, connect & collaborate with:</p> <ul style="list-style-type: none"> WCD & other departments which run schemes for family strengthening, eg family welfare department & to gatekeep Other NGOs working on FBC Academia & training institutes <p>Uniform awareness raising for all departments – key speakers, seminars, workshops, success stories, testimonies of children, social media, data</p>
BOARD MEMBERS	<p>Resistance</p> <p>Controlled environment is easier to monitor</p>	<p>Why?</p> <p>Benefits?</p>	<p>Failure can be converted to learning experience</p> <p>Children's mental health</p> <p>Donations increased</p>	<p>Board can be told about other allied projects</p> <p>Re-investment of resources</p> <p>Board can become foster parents & act as ambassadors</p>
COMMUNITY	<p>Cultural differences</p> <p>Stigmas associated with children's backgrounds</p> <p>Religion</p> <p>Migrant population</p>	<p>Identification of family</p> <p>Risk</p>	<p>Involve the community with CCI children</p>	<p>Awareness raising with all stakeholders</p> <p>Reach out to families</p>

ENGAGEMENT - CONCERNS

It is highly recommended that you spend time preparing a communications strategy on what, how and when to communicate to each stakeholder.

Everyone was concerned about the risks of placing children in families, and their safety and security

Placement will only be when in the best interests of the individual child and when safe to do so

Collaboration with NGOs working in space will help. Staff can be trained for mindset change, do more skillful monitoring and follow up

Gate-keeping needs to be done in collaboration with government departments, therefore we need strong guidelines

Preparing communities & society: managing stigmas when reintegrating children to ensure their acceptance

Awareness raising programs in collaboration with government, NGOs and community groups will help break down stigmas and prepare communities

DONOR MESSAGES

With the right strategy, convincing donors of the benefits of FBC should be relatively easy. Below are some suggestions on how to retain your donors with positive messaging.

Family sponsorship program

- Evidence shows children do better being in families
- Reach out to new donors with new donation options to support children to return to their families
- Change current donors thinking - if a donor is willing to sponsor a child in CCI, then there shouldn't be any reason why they would not sponsor the child living in a better environment
- Donors already have established relationships with individual children and will be happy to continue to support them back in their family.
- Donors of social causes are aware of social changes so will continue to donate.

Mind-set change

- Explain that CCIs are already at the risk of closure
- These new projects will become role models to help change the mind-set of other CCIs
- Donors can play an important role in advocacy
- Changes made at policy level will help with CSR funding
- Individual donors are already supporting families
- Promote by sharing how many children want to be connected with community and family



Children going into families will be an asset for the whole country

WORKSHOP PARTICIPANT

43%

increase in belief that donor funding can be redirected

WORK GROUP REPORT: Case Management

Based on the PCHCH case study found on page 7 of this report



THE TASK:

Outline next steps for implementing child-centered case management to support the best care setting for a child

CHILD NAME (FICTIONAL)	PLACEMENT TO BE EXPLORED	PREPARATION PRIOR TO PLACEMENT		POST-PLACEMENT SUPPORT
		CHILD	FAMILY	
<p>John (4) is a quiet boy. He was placed at PCHCH at the age of three when his mother was hospitalized, soon after she died of AIDS. His father's location is unknown and he doesn't have any other known relatives.</p>	<p>Foster care Adoption Process Adult declaration Medical check up</p>	<p>Healthcare education Family – counselling ok for 4 year old boy? Teaching life skills and independence</p>	<p>Acceptance of parents Counselling Managing expectations Telling them difficulties Skilled social workers</p>	<p>Support - family support through adoption agency Emotional requirements of child Acceptance of child Follow up visits</p>
<p>Archana (3) is attached to her older sister, Anjali. Her mother and heavy drinking and violent father separated soon after her younger sister Anu, was born. Left with no accommodation or access to childcare, she brought all three children to PCHCH and said she would return when her situation improved. She visited twice in the first three months, once under the influence of alcohol, after which, her visits stopped. Her current whereabouts is unknown.</p>	<p>Adoption Search for family Counselling Temporary foster care</p>	<p>Child is too young for counselling Child psychologist Give information through pictures</p>	<p>Prepare parents' home History of child Special needs</p>	<p>Monitoring Counselling Adjustment of family & child Rights of family as foster carers Trauma prevention</p>
<p>Pankaj (7) and brother Arjun (5) were brought to the institution when their father left their mother. She now lives with her mother an older sister in a small village just outside the city where they survive through subsistence farming, unemployment allowances, and seasonal work. They visit occasionally and he frequently asks about them.</p>	<p>Family strengthening • Sponsorship • Self-sustenance • Employment • Empowerment • Parents physical & mental health Short-term foster care Kinship care Group foster care Small CCI</p>	<p>Make sure children attend the same school even if they go into foster care Database of families Sustainability of economic condition Child behaviour & emotional balance Family's attention to child care & development Loss of peer group Recruitment</p>	<p>Preparing family Sharing child's habits, interests, favourite things Parents will fail without adequate preparation Biological family needs counselling for release to foster care</p>	
<p>Usma (17) was left by her mother when she was 6 as she could not afford to give her a future. Her family live in the district and she has spent summer school holidays with them, but since starting secondary school she has chosen to remain in the CCI to study.</p>	<p>Family strengthening Need more details of family</p>			<p>CCI's expanding to family strengthening support services CWC's trained and equipped to manage</p>

Child participation in decision-making

Child should not make the final decision, but should be involved

GATEKEEPING

Necessity principle

Is it possible to help the child without separation from the family?



Suitability principle

Is the care appropriate to and in the best interest of the individual child?

Most of the concepts about FBC were clarified

CWC MEMBER

CASE MANAGEMENT

Each child is different with different needs and none of this should happen quickly, it is logical to move slowly

- Every child needs a different option, it is important to have a menu of these options and essential to start with family strengthening first
- Develop a robust process with relevant checks & balances
- Identify kids you will have success with
- Engage with the children's families - case managers should spend around 20% of their time working with families, starting with those who are easiest to locate
- Build own skill and capacity
- Provide staff training
- Develop strong case management to gather whole information on child, including history of child from CCI/biological family
- Share relevant case history available with parents / extended family
- Provide parent training
- Provide post-placement support
- Mapping of resources – link with other CCIs, NGOs, & government departments to support children placed in families

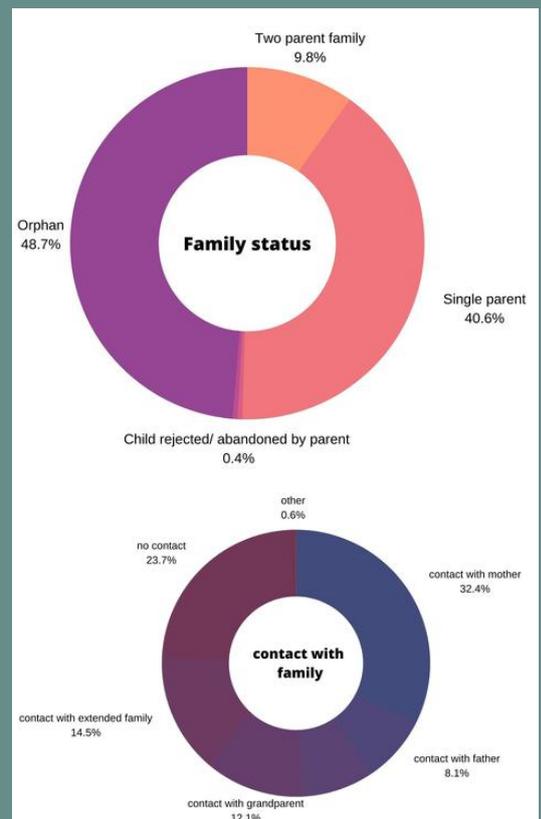


Q: Q: How does a CCI stop taking in children to allow for transition to FBC when CWC continue to order placements up to their licenced capacity?

A: Use the CWC to help increase gate-keeping to reduce numbers of children and help the government to provide and place more children in FBC alternatives



SNEHALAYA STATS



CCIs completing the ICP will help reintegration & family strengthening

CHAIR, DWCD

WORK GROUP REPORT:

Families

Based on the PCHCH case study found on page 7 of this report



THE TASK:

Decide how PCHCH can prepare & strengthen families to care well for children

It was agreed that the full portfolio of FBC solutions were applicable to the case study CCI. These are, in order of preference:

**Family preservation /
gate-keeping / sponsorship**

Adoption

Foster care

Group foster care

CCI

Aftercare

FAMILY PRESERVATION & STRENGTHENING

Where a child has living family, and it is safe to do so, this is the preferred option to allow for reunification

- Sponsorship options will empower families, saving more children coming into the system
- Develop a plan for CCI that includes gate-keeping
- Can't do it alone, requires participation, collaboration & networking between CCIs, government & NGOs.
- It may be the responsibility of the government, but CCIs can act as a bridge for families seeking help from the CWC & help develop family-strengthening programs
- Develop resource directory for required family support services
- Approaching case management in a new way - supported by experienced social workers
- Transitioning of CCI assets

Barriers

- Poverty, disease, mental health
- Is family economically sustainable?
- Child behaviour, emotional balance
- Working parents - ensure child isn't neglected

ADOPTION

If children are legally free they can be connected to adoption agencies

Q: With only 1% of children living in CCIs, how do we reach the remaining 30 million children in need of care and protection if CCIs are reduced?

A: Through community-based strengthening, outreach to more children in need, including those who would never enter a CCI, will increase

Skill development programs are essential alongside sponsorship to help women to stand on their own feet

CHAIR, DWCD





FOSTER CARE

Preparation for placement for child, families & foster parents includes:

- Information on rights of family, including foster carers
- Strong case management
- Capacity building
- Providing full history of child with information from CCI & biological family
- Parent training
- Pre- & post-placement counselling
- Post-placement monitoring & support
- For younger children, provide information through sharing pictures of prospective foster parents to ensure they remain involved in the decision-making process.
- Keep some connections intact, eg child attending same school, which will help them adjust to their new environment

Barriers

- Poverty
- Stigma eg disability, HIV
- Physical & mental health of children
- No database of available families - how to find them?
- CWC needs help to find families, they are ready to give orders but don't have supporting systems to find them yet

GROUP FOSTER HOMES

These can provide a family-like environment for up to eight children living with 'parents'

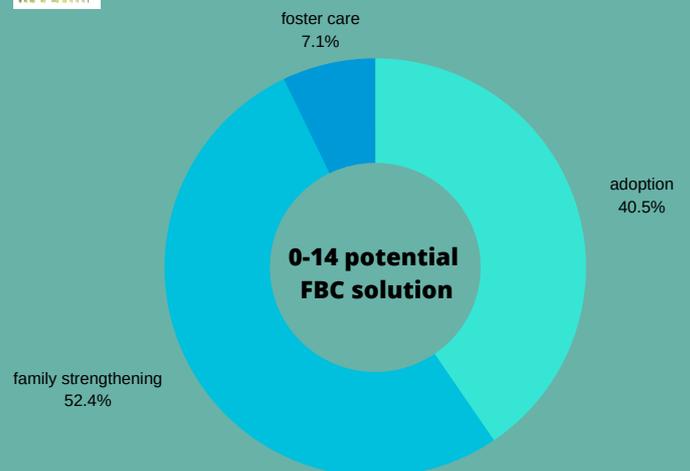
aftercare

FBC can include support with an individual care plan, for young people leaving care, up until the age of 21

Q: How long is organisation involved in reunification process, who makes them accountable and who are government accountable to?



SNEHALAYA STATS



36%

increase in belief that that family strengthening is necessary & possible

WORK GROUP REPORT: Asset Transition

Based on the PCHCH case study found on page 7 of this report



THE TASK:

To prepare & implement the transition of caregivers, staff & the physical property

STAFF MEMBER OR ASSET	STRENGTHS & SKILLS	POSSIBLE ROLE(S) IN NEW MODEL	NECESSARY PREPARATION
BUILDINGS		<p>Can continue as Small CCI Aftercare 18+ Short-term & emergency care / temporary / open shelter Small group homes FBC awareness raising center Hostel Rental accommodation with profits for community funding Educational campus School with dorms for school staff Training center with dormitory accommodation Day care / Indoor activities for children / Youth club Resource center Library Community hall Vocational training center Yoga center</p>	<p>Getting laws changed re function of buildings Breaking down the walls around the compound Preparing the board & gaining their permission Additional construction / Modification / Decoration Gather information from community needs assessment / opinions gathered to create services needed</p>
STAFF – AFTAB (MAINTENANCE)	<p>Leadership Loyal Hard working Wife is a teacher Strong</p>	<p>Vocational training Sports teacher Adoptive parent Group foster care parent Training of foster carers Mentorship of teenagers Develop day care center Child care training Case studies Canteen</p>	<p>Training for mentorship of teenage boys Reducing the amount of physical work Other relevant training</p>
STAFF – DHARMENDRA (TEACHER)	<p>Teaching counselling</p>	<p>Case work</p>	<p>Training</p>
STAFF – HANIF (COOK)		<p>Canteen Cook for community kitchen Nutrition training</p>	<p>Canteen Cook for community kitchen Nutrition training</p>
STAFF – ANITA (CAREGIVER)	<p>Leadership ability Good learner Committed Supported Experience Education level Age Strict May be hard to change</p>	<p>Leadership role Group foster home carer Training of foster carers Mentor for caregivers Counsellor/social worker Preparation for transition Board member Acceptance - age Day care and childcare training</p>	<p>Capacity building training Skill development Preparation of children from start of process</p>
STAFF - CAREGIVERS	<p>Early development education for vulnerable children</p>	<p>Follow services of placed children Day care Training on child care Mentorship of teenagers</p>	<p>Skills training</p>



Buildings & people in current CCIs are an asset which should be evaluated & maximised in the transition to FBC

64%

increase in belief that assets can be repurposed

I now understand how we can repurpose buildings, utilise other qualities and use staff's other skillsets

MILIND KULKARNI,
SNEHALAYA

As a care leaver I am very happy to see plans for this transformation & would like to see more care leavers participation in the process.

CARE LEAVER

HUMAN RESOURCES

Staff working in CCIs have vital experience and knowledge of the children and organisations they work with. Therefore it is essential to consider how they can be retrained and redeployed to support FBC.

In addition to eight total caregivers, who live in the local village with their families, and the two directors, PCHCH has a cook, one maintenance staff, three teachers, two teaching assistants, two social workers and a nurse. Teams discussed the below case study staff coming up with different options related to their unique skills and experience in and outside of work.

Anita (62) is a caregiver and has been with the home since it first started and sees her role as a calling more than a source of employment. Anita works in a boys' homes and is a mentor to many of the other caregivers and has strong leadership abilities. Although Anita only has an 8th standard education, she has attended many trainings on how to care for children. She is supportive of transitioning the program to family care.

Hanif (45) is a cook who works long days and also serves as imam of his small slum community mosque. He has strongly urged his community to be involved in PCHCH, but he would like to see children moving into loving families.

Aftab (28) works on maintenance. He has lived in PCHCH since 11, when his parents, aunt and uncle were killed in a house fire. He and his sisters, Seema, the home's nurse, and Kaynat, a caregiver, are very committed to PCHCH. Aftab is physically strong and good with his hands. He has some learning disabilities and is quiet, loyal, and hardworking. He and his wife, Alveera, a teacher in a local school, have a happy relationship but are biologically unable to have children.

Originally a business professional, **Dharmendra** (35) has taught 7th-12th standard at PCHCH for five years. He is energetic and charismatic, and his students love him. He also works with PCHCH and the local community kids as cricket coach. He sees the promise in transitioning to family care, but also worries children will suffer educationally if their parents don't adequately prioritize learning.



WORK GROUP REPORT: Measurement

Based on the PCHCH case study found on page 7 of this report



THE TASK:

Create an indicator table for the project, to be used for ensuring quality & sustainability

CHILD	WHAT DOES SUCCESS LOOK LIKE?	WHAT INDICATORS CAN WE USE TO MEASURE SUCCESS?	HOW & WHEN WILL DATA BE COLLECTED
ARCHANA	<ul style="list-style-type: none"> Reunited with family or alternative care Connected with family, including siblings, in a safe way Physical & psychological development Improved health Happiness Connections Understanding Living in family Energetic Friendship relationships Education Socially adapted Inheritance (security) 	<ul style="list-style-type: none"> Best interests Number of family known Number of family visits Time spent with siblings, activities, perception of each other Physical examination Measure Milestones as per her disability & determination 	<ul style="list-style-type: none"> Eligibility criteria Emotional satisfaction
USMA	<ul style="list-style-type: none"> Becomes a social worker Connection with family Attention in career Friendship relationships Other social relationships Health measures Psych-social measures Development measures 	<ul style="list-style-type: none"> Qualification Number of family visits, how is visit, communications, frequency of behaviour issues Study patterns, results, communication with teachers Number of friends, what sharing Number of relationships, types of conversations Check ups, treatments Evaluation 	<ul style="list-style-type: none"> Ask her Talking with family Baseline investigation
PANKAJ & ARJUN	<ul style="list-style-type: none"> Happiness Participation in football Enjoyment Family connections Education Health – physical & mental Family stability Friendship relationships Sibling relationships 	<ul style="list-style-type: none"> Number of times football played Number of family visits, how is visit, communications, frequency of behaviour issues Behaviour observations Child is connected with family Hours per day of study 	<ul style="list-style-type: none"> Outreach worker
JOHN	<ul style="list-style-type: none"> Happy Accepted by all family members Education Mental & physical health Friendship relationships Other social relationships Behaviour Self-worth, confidence from others / himself Social skills 	<ul style="list-style-type: none"> Mood monitoring Number of family known Number of family visits Reaction to family visits Behaviour or mood affectation 	



MEASUREMENTS



Happiness

Health



Education

Family relationships



At the end of the day, participants were asked to share their 'aha' moments. A UNICEF representative mentioned that he thought it was an eye-opener to talk about transitioning childcare institutions into family-based care services, rather than talking about shutting down institutions. And a researcher was struck by the realisation that while in India there is a resistance against foster care as a foreign import product, actually, it is the child care institutions that are the foreign import, while foster care closely resembles the widely used kinship care.

After the creation of the overviews, Mr Forber-Pratt encouraged everyone to think very concretely about the actions that are needed, step-by-step, once a CCI has made the decision to move towards family reintegration, family sponsorship or foster care. As he pointed out, this is where most conferences end, but here, tackling the difficulties was at the centre of the event.

After lunch there was a 35-minute break-out session where Mr Forber-Pratt talked with the Ahmednagar district level officials, the Snehalaya leadership and a UNICEF child protection consultant. The meeting's purpose was to brainstorm what non-institutional alternative care (NIAC) options were possible (with particular focus on the district, but with discussion about the entire state) and where there might be opportunities. All continuum of care options were discussed and the conclusion was clearly that group foster care and reintegration of children from CCIs into families might be the best. Caution was voiced strongly about the need to move slowly, carefully and in pilot form. Also, the group highlighted that the "easiest" or most likely to success cases must be taken up first.

The UNICEF representative mentioned that the state is working hard to revise the guidelines for foster care, family sponsorship and aftercare. This will take time, and in the meantime district level officials are discouraged from moving forward on foster care, until there is more clarity on the subject. However, they are still legally able to do some work on this. So the consensus was that it would be good to develop small, manageable pilot programmes, so that when the guidelines appear, there are models available that can be scaled up.

BREAKOUT SESSIONS

While the break-out session was taking place, in the main room Joyce Connolly, CEO of Snehalaya UK, gave information about the work done by Snehalaya on family-based care, and Florence Koenderink, consultant and founder of Family-Based Solutions gave a detailed overview of what is involved in the stage of transition towards family-based care between starting to do individual assessments and actually placing the child in a family. Ms Koenderink then did a Q&A with the attendees, and at the end also the returning participants of the break-out session.



The transition of CCIs to FBC helps promote the NGO sector. There are some great ideas coming from the workshop which will strengthen family services access

VIKAS SAWANT, UNICEF

The interactive nature of the simulation lab meant that participants were left with many more questions as they walked out of the room. Snehalaya will be dedicated to offering continuing training like this to the community and thoroughly documenting the results. As India moves towards FBC, demonstration events like this are pivotal to engage the on-the-ground change-makers.

However, this event, in and of itself is certainly not enough. We encourage the government and civil society to join hands to do the following eight activities in concert together.

- **PLANNING**
- **AWARENESS RAISING**
- **LEGISLATION CHANGE**
- **DESIGNING FINANCIAL FRAMEWORK**
- **SERVICE STANDARDISATION & QUALITY CONTROL**
- **DIRECT PRACTICE EXAMPLES**
- **CAPACITY BUILDING**
- **MONITORING & EVALUATION**

As India 'reforms' the child protection systems it will face massive challenges in coordination or services and positive outcomes for children. We believe that the Government and NGOs must join hands to anticipate these challenges and build an action plan. We have a strong belief that the positive energy from this immersive lab will continue to radiate throughout the country.

An estimated 8 million children currently live in institutions and so-called orphanages around the world. Of that number, about 80% of children have at least one living parent and many more have other living relatives.



We need to connect resources & create a network where we all can participate & contribute. It should include resources from the following:

- **Government**
- **Social welfare groups**
- **NGOs**
- **Networks contributing to families individually**

I am very impressed with the workshop format & that you gave real action steps towards the transition to FBC without demonising CCIs

WORKSHOP PARTICIPANT

Do you want to repeat this lab in your district or state? If so, please let us know.

Keep in touch

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work at www.snehalaya.org

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