LIFE CHANCES OF CHILDREN AND YOUNG PEOPLE IN INSTITUTIONAL CARE IN SRI LANKA

(A critical review of policy and governance with reference to case studies)

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ABSTRACT
One in every two hundred children undergo alternative care in a children’s home in Sri Lanka, denied of basic human rights by being deprived of parental care and by being labelled orphaned, abandoned or destitute. These figures are problematic in a multi-religious and diversely cultured state where moral rhetoric abounds, but concerns need to be translated into practice. The need for institutional children’s care must be investigated, as does the ability of these organizations to provide a quality upbringing and life preparation for children. In this paper I address these contemporary issues through a critical review of the policy environment and the governance practices of these institutions with reference to specific case studies.

My field study was carried out across all nine provinces in Sri Lanka, involving policy makers and service providers of institutionalized children. All nine commissioners of the provincial departments of probation and child care services were interviewed to collect information on policy implications and their role in the policy making process. All 298 probation officers, 287 child rights promotion officers, and matrons and wardens of all 416 children’s homes were included in a questionnaire census approach. Of these, approximately half responded. Thirty managers from different children’s homes were interviewed to ascertain information with regards to their service provision.

My critical systemic approach in the field has identified many issues of policy implication and service provision across institutions charged with care of children and young people. This paper presents the initial findings regarding the quality of life and the enhancement of life chances of children in alternative care in Sri Lanka. Further, it will also give direction to policy makers and service providers on the provision of high quality child support. This takes into account their natural birth environments, their institutionalization period and subsequent reintegration. These guidelines can maximize the potential of these institutionalized children and is well suited to this year’s conference theme, “Curating the conditions for a thrivable planet” as the well-being of children and the planet are inextricably linked. A critical approach to maximizing the potential of institutionalized children will, in turn, enable them to positively contribute to the emerging “global eco-civilization”.

Keywords: Life chances, institutional care, policy environments, governance practices, quality of life
INTRODUCTION
No nation on earth can claim that they have no children deprived of parental care. No research is needed to justify this statement, and no one would challenge it. It is widely accepted that, irrespective of their nationality, gender or age, children have not only been deprived of parental care, but have also denied their basic human rights due to contemporary challenges such as climate change, civil wars and terrorism, as well as social, cultural, economic and political issues. The facts are stark: Between 500 million and 1.5 billion children suffer violence each year (Pinheiro 2006); 215 million children are involved in harmful work (ILO 2010); and globally it is estimated that there are approximately eight million children in institutional care (Pinheiro 2006) (Keshavarzian 2013, p. 3). For a variety of reasons, children have been denied their rights, deprived of their natural birth environments and sent to alternative institutional.

In Sri Lanka, many children are receiving institutional care for social, cultural and economic reasons, as well as on-going issues such as the aftermath of the civil war and 2004 Tsunami. Thus, the institutional care system is established as a reliable form of alternative care in the recent culture of Sri Lanka. “Institutional care is at present the most common – or, rather, the almost sole – solution for children deprived of parental care in Sri Lanka” (Roccella 2007, p. 10). Reports of the abuse of children at children’s homes are not uncommon in the mass media (Tambiah 2012). Cases of mistreatment and malnourishment, emotional and physical abuse, sexual assaults, misuse of finances and illegal adoption are widespread. Even the results of the survey carried out by government officials revealed the fact that there is a huge inconsistency in the standards of the facilities available at children’s homes, and that the whole system needs to be reviewed (Daily Mirror 2012). Thus, there is an urgent need to take immediate action to analyse and review the existing policies, and to initiate a set of guidelines for the good governance of institutions caring for children and young people. This study represents an early foundation of a better policy system for good governance of children’s homes. Ultimately this should result in maximisation of the children’s quality of life and the likelihood of their successful reintegration into broader society.

An analysis of the existing policies and guidelines for institutional care derived from varying sources are the key to the creation of better policies and guidelines. There are enthusiastic policy makers and devoted service providers who have already contributed to the good governance of children’s homes. Scrutiny of the experiences and ideologies of these professionals helps identify the good practices in the field. This study involves a critical review of policy and governance with reference to case studies via a qualitative and quantitative approach carried out among policy makers and service providers of children’s homes. Furthermore, prevailing ‘good practice’ will be evaluated in terms of social theories and existing policies and guidelines.

BACKGROUND
“UNICEFF has long been aware of the challenges facing voluntary care homes throughout Sri Lanka. These homes house almost 20,000 children, a huge population who have little contact with their parents, and as such rely on the smooth and humane
functioning of systemic care for their daily needs” (Roccella 2007, p. 6). 80% of the 488 voluntary residential homes that provide care to children in Sri Lanka do not have legal custodians appointed to children while they are deprived of parental care. The lack of legal protection affects more than 15,000 children (Roccella 2007, p. 9).

These figures do not justify the moral ethics of this multi religious and diversely cultured state where close to 70% of the population are Buddhists, 15% are Hindus and 15% of the others are Islam, Catholics and Christians. The Buddhist doctrine says “Putta wastu manussanam”, which identifies that “Children are the greatest treasure of mankind”. In Hinduism, “Children are humanity’s greatest asset”. There are many references about children in the Holy Quran and Holy Bible. These religious and ethical underpinnings made it possible for Sri Lanka’s ratification of the UN convention for the Rights of Children in 1991, which highlights that the child, for the full and harmonious development of his or her personality, should grow up in a family environment, and in an atmosphere of happiness, love and understanding. Why then, does Sri Lanka need institutional care for children? Do these institutions satisfy the requirements of children’s rights and the quality of life needs of these children? Do they enable the re-integration process of institutionalized children and support to develop their future life chances? Has the Sri Lankan government structured its social and legal structure to address the issues pertaining to institutionalized children? In this section, I wish to answer these contemporary questions by making a critical review of policy environment and the governance practices of these institutions with reference to specific case studies and available literature.

Why does Sri Lanka need institutional care for children?

Natural disasters, civil war and poverty have made institutional (rather than parental) care an inevitable measure to protect children’s well-being and safe guard their rights.

“The Tsunami that struck Sri Lanka and other parts of South East Asia in December 2004 resulted in a significant loss of life. In Sri Lanka, an estimated 5,500 children lost one or both parents to the tsunami and countless others were considerably affected in other ways, including through loss of housing, geographical displacement, disruption to education, contraction of tsunami related illnesses, and the like” (IDLO 2007, preface). “The tsunami caused great pain, trauma, uncertainty, and upheaval. The parents of many children were injured, traumatized, or lost their jobs. The siblings, relatives and friends of many children perished or went missing. Children’s homes and schools were damaged or destroyed. Many children were required to spend long periods in temporary shelter away from familiar comforting surroundings” (IDLO 2007, foreword).

The Northern Province and some parts of the Eastern Province were heavily affected by the war between the government forces and a group of Tamils for nearly thirty years. One of the depressing outcomes has been the immense number of children who have been denied parental care and support and who have ended up as innocent victims in children’s homes.

A variety of causes, such as poverty and the necessity for mothers to work abroad (Thambiah 2012) as well as family breakdown, offending and abuse (Save the Children
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2005) have been associated with the high reliance on the provision of alternative (institutional) care for children.

**Do these children’s homes satisfy the requirements of children’s rights and support the quality of life required by children in institutional care?**

In Sri Lanka, there are more than 19,000 children living in over 400 children’s homes separated from their families (Roccella 2007, p. 9). The war ended in May 2009 and there is now a critical need to look into the policies and governance of institutions concerned with children in alternative care. Naguleswary Ramachandran, a child and women’s rights activist in the Northern Province, said they were alarmed by reports that child abuse was on the rise in orphanages and children’s homes in the North (Thambiah 2012). Save the Children (2005) states that children’s voices confirm the findings of international research which shows that, for many children, placement in institutional care has a serious negative impact on development, well-being and basic rights.

Conditions within institutions are routinely found to be less than adequate. Out of Sight, Out of Mind (2007), a report on Voluntary Residential Institutions for children in Sri Lanka, in its findings illustrates that 3 out of 10 homes do not have enough beds, cupboards and running water. 2 out of 5 homes do not have a proper library. More than 2,000 children in homes do not attend school regularly and more than 9,000 children are not regularly visited by a doctor. Evidence of this sort highlights the fact that the rights of many children in institutional care are not properly addressed as mentioned in the Guidelines for the Alternative care of Children (hereafter ‘Guidelines’) which was adopted with the intention of enhancing the implementation of the United Nations Child Rights Convention (hereafter ‘UNCRC’). Furthermore, it clarifies that the standard of care for children in these institutions does not satisfy the ‘General Standards for Promoting the Quality of Services in Voluntary Children’s Homes’ (hereafter ‘General Standards’) recommended by the Department of Probation and Child Care Services (hereafter ‘DPCCS’) in Sri Lanka (Roccella 2007, pp. 57-64).

**Do these children’s homes enable the reintegration process of institutionalized children?**

“Around 40 per cent of children had been in institutional care for longer periods than the three year limit of the DPCCS policy” (Save the Children 2005, p. vii). This summary statement derived from the executive summary of the report, ‘Home Truths: Children’s Rights in Institutional Care in Sri Lanka’, indicates that the reintegration process of institutionalized children is ineffective and advocacy is needed for the implementation of a successful procedure. Furthermore, Roccella (2007, p. 9) identifies that 3 out of 10 children’s homes do not keep personal files on the children and this problem has affected more than 4,000 children. The reintegration process of children in institutional care is based on the information available in their personal files. If the personal files are non-existent or not available, it adversely affects the reintegration process of the institutionalized children.
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In 30% of homes, placement committees meet either irregularly or not at all (Roccella 2007, p. 9). ‘Placement committee meeting’ is the structured mechanism towards successful re-unification and social inclusion of children in institutional care. ‘Placement’ means to review the position of children in the home from time to time and to plan activities oriented toward their future well-being (Roccella 2007, p. 63). The placement committee consists of representatives from natural parents or guardians of children, policy makers and service providers. Guidelines adopted by UN state that “Removal of a child from the care of the family should be seen as a measure of last resort and should, whenever possible, be temporary and for the shortest possible duration. Removal decisions should be regularly reviewed and the child’s return to parental care, once the original causes of removal have been resolved or have disappeared…” (UN 2010, p. 4).

In the Sri Lankan context, DPCCS is supposed to call for placement meetings at least twice a year for regular reviews of reintegration efforts (Roccella 2007, p. 63). But, if placement meetings are irregular or not held at all, the reintegration process becomes unstructured and ineffective. Paragraph 49 of Guidelines for the Alternative Care of Children states “In order to prepare and support the child and the family for his/her possible return to the family, his/her situation should be assessed by a duly designated individual or team with access to multidisciplinary advice, in consultation with the different actors involved (the child, the family, the alternative caregiver), so as to decide whether the reintegration of the child in the family is possible and in the best interests of the child, which steps this would involve and under whose supervision” (UN 2010, p. 10). These examples prove that the two principles expressed in paragraph 14 and 49 in the Guidelines are not functioning properly in the Sri Lankan context. It is a clear indication of the malfunctioning nature of the children’s home with respect to the re-unification and social inclusion of children in residential care.

Do these children’s homes provide institutionalized children opportunities to develop their future life chances through education?

Life chances are positively correlated with quality of life. For better life chances of children in institutional care, their quality of life has to be improved. To achieve a better quality of life, quality of care for the children has to be standard. Save the Children (2005, p. x) states that “the quality of care in many establishments, particularly those run by the state was poor. There was inadequate food, poor sanitation; limited health care, poor sleeping arrangements and the emotional needs of children were severely neglected. There were no standards for state institutions.” This is a very important problem identified by the study, and Save the Children (2005, p. x) in its recommendations suggests that “Standards covering the environment and quality of life of children should be developed and a comprehensive system of registration and monitoring implemented.” As indicated in findings of ‘Out of Sight, Out of Mind: Report on Voluntary Residential Institutions’ (Roccella 2007, p. 9), if more than 2,000 children do not attend school regularly, it is a sad indicator for their future life chances.
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Has the Sri Lankan government structured its social and legal structure to address the issues pertaining to institutionalized children?

Sri Lanka has established a Ministry for Child Development and Women’s Affairs. Under the Ministry there is a National Child Protection Authority (NCPA), a Children’s Secretariat and a Department of Probation and Child Care Services (DPCCS). The NCPA introduced a free telephone dial service – 1929, to ensure the minimization of child abuse and exploitation.

Sri Lanka ratified the UN Convention for the Rights of Children in 1991. The foundations of international child protection laws are derived from the UNCRC. The UNCRC states that children are born with fundamental freedom and the inherent rights of all human beings, and those children should be provided with special care and protection (IDLO 2007, p. 2). Therefore, Sri Lanka has recognized the necessity to protect and promote the interests and wellbeing of children. Further legislative acts, including the ‘Children and Young Persons Ordinance’, ‘Adoption Ordinance’, the ‘Young Persons and Children’s Act’, the ‘Domestic Violence Act’ and the ‘National Child Protection Act’ are enforced to safeguard the rights of children. Importantly, the ratification of UNCRC denotes that the Sri Lankan Government has introduced and implemented laws and systems in response to child abuse and child exploitation, to protect the rights of Sri Lankan children.

Despite governmental action, news of children around Sri Lanka who have been denied their human rights and deprived of parental care is not uncommon in the mass media (Tambiah 2012). The number of juvenile delinquents, drug addicts and child prostitutes found among orphaned, abandoned and destitute children is actually increasing (The PEACE Campaign 2006, p. 210). Shukri (The PEACE Campaign 2006, p. 218) notes that the family which is the basic unit of society is being threatened by the increasing sense of individualism and as a result, the social structure itself is collapsing due to the ever-rising domination of the anti-social elements. “Trafficking, cruelty to powerless human and other animals is prevalent in a globalized economy from which the powerful profit” (McIntyre 2011, p. 3). This study further claims that “All human beings are animals. Power and market position has lead to the commodification of the powerless; animals and the environment on which we depend. Powerless human beings are likened to animals, because when they are regarded as ‘beasts of burden’ that can be commodified and exploited”. Abortions, infanticide, illegal adoptions, the commercial sexual exploitation and trafficking of children for the pornography trade have become major threats to society (The PEACE Campaign 2006, p. 218).

The policy and governance frameworks of institutions for alternative care are encompassed by the ratification of the UNCRC and implementation of General Standards imposed by DPCCS, establishment of ministerial and departmental structures and service provision of local and international NGOs. However, various studies have identified that the anticipated results on life chances of children and young people in institutional care are not at all satisfactory. Save the Children (2005, p. 5) signifies that “A major flaw in the system is the lack of coordination between different agencies. There are many different actors in the process from the point of identifying a child or family in need of
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support and protection. These include the DPCCS, the Department of Labour, the police, the NCPA, and Child Rights Promotion Officers. However, no single agency takes overall responsibility for the child’s welfare through the entire process and there is no proper coordination between these agencies.” Whilst acknowledging the above argument I have a different perspective as a service provider to a voluntary children’s home in Sri Lanka. My proposal is to develop the coordination between two major bodies. They are policy makers and the service providers. These two groups have direct affiliation to the children’s homes. An in-depth study via participatory action research was carried out to identify the viewpoints of these two bodies of workers. It is anticipated that evaluation of their service experiences will have much higher potential for emerging practical policy outcomes for the good governance practices of institutions.

This paper provides an overview of my participatory action research which was conducted among the four research participant groups that represent agencies of policy makers and service providers (see methodology).

STATEMENT OF THE PROBLEM AND AREA OF CONCERN

The 2010 statistics released by the DPCCS show that there are 13,214 children in institutionalized care in 341 registered voluntary children’s homes in Sri Lanka (DPCCS 2010, p. 22). Of this total population, there are 2481 children in 48 children’s homes in the Northern Province and 2469 children in 76 orphanages in the Eastern Province. Together, these two provinces (of a total of nine) are responsible for 38% of the total number of the children in alternative care. This makes these two provinces worthy of special attention.

If the governance of these children’s homes is not carried out properly, with extreme care and attention, the lives and the future of these innocent victims may turn from bad to worse. Therefore, the policies enforced on these institutions have to be reviewed and revised regularly to update and upgrade their relevancy with contemporary issues, technology and various other socio / economic factors.

The following three fields are major areas of concern with regard to policy and governance of children’s homes.

• Existing policy guidelines intended for the good governance of children’s homes in Sri Lanka.
• Existing criteria for the grading and standardization of children’s homes.
• Existing re-unification process and social inclusion procedure.

For a better consideration of the above areas of concern, an understanding of the structure and function of children’s homes is important.

There are two types of children’s home in Sri Lanka.

• State funded children’s homes.
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• Non-Government Organization funded voluntary children’s homes (VCHs).

Of the 368 children’s homes in Sri Lanka, 341 (92%) children’s homes are VCHs (DPCCS 2010, pp. 1). This majority demonstrates the importance of VCHs in this theatre. For this reason, this study is based on VCHs run by NGOs. Although the services are provided by the NGOs, implementing policies for the good governance of VCHs is handled by the policy makers of both national and provincial DPCCSs.

The responsibility of the NGO is to govern the orphanage in accordance with the policies set by the DPCCS. The DPCCS has the discretion to close any VCH if not run in accordance with the policies imposed. However, DPCCS is fully aware that financial capacities vary between NGOs and that has led to the existence of many orphanages lacking even the basic amenities and a small number of homes with an extraordinary infrastructure and a far higher standard of amenities.

If the government has the responsibility to treat every child alike, how is it possible for children be treated in so many different ways by different institutions? Can the government really ignore this situation? Will policy officers make much difference through the implementation of regular visits; offering a little financial support or by holding workshops for the staff on policy implementations, when all the other factors relevant to standard of care remain the same? Lack of staff and security, lack of attention to education, health and nutrition, and maltreatments and malfunctioning not only deny children of their rights but also deprive them of their self-esteem and self-actualization needs.

The NGOs argue that the policy makers have no understanding of the practical issues that NGOs are confronted with when implementing the relevant policies. Furthermore, the government expects too much from its meagre financial backing and local inflation and global recession interrupts and reduces the financial strength of voluntary funding. Government, too, has sensed this situation and has to think seriously before deciding to close down any children’s home. If these VCHs are closed down, the government will have to accept the responsibility of care for the children and move them to state run children’s homes or to another VCH. However, State is not in a position to enforce its strict rules because, some of the State governed homes are of even poorer quality (Save the Children 2005, p. viii).

A child is sent to a Children’s home with the expectation of recovering his/her denied child rights and undertaking the process of reunification with his/her natural birth environment as soon as possible. Otherwise, the intention is successful social inclusion when they attain maturity and leave children’s home.

There is no doubt that as stated in the Guidelines, ‘The family being the fundamental group of society and the natural environment for the growth, well-being and protection of children, efforts should primarily be directed to enabling the child to remain in or return to the care of his/her parents, or when appropriate, other close family members. The state should ensure that families have access to forms of support in the caregiving role’ (UN 2010, p. 2). ‘General standards’ in its clause 6.1, directs to ‘Entrust every child back to
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his/her parents or guardians if they can be found and where special difficulties are not encountered’ (Roccella 2007, p. 63). Therefore, when a child is institutionalized, the process of a reintegration care plan should also be initiated simultaneously. However, 40 per cent of children are in care for longer periods than the three year limit of the DPCCS policy (Save the Children 2005, p. vii). This report also states that in 2002, almost 11,500 officially registered children were growing up in both State and private institutions. This is almost a 50% increase between 2002 and 2010 (DPCCS 2010, p. 1).

AN OVERVIEW OF RESEARCH QUESTIONS

This research focuses on questions ranging from pre-institutionalization to re-integration of children who are deprived of parental care or who are at risk. The research questions of my study are as follows;

• How can we prevent children being institutionalized and sustain their lives in their natural birth environments?
• How can we safeguard the human rights of children in institutional care?
• How can we improve quality of life and enhance life chances of children in institutional care?
• How can we re-unify and socialize children in institutional care?
• How can we advocate for the well-being of the re-unified and socialized children from institutional care?

When addressing the above research questions, secondary data is also very valuable to this research because of the wide scope of the project.

Few attempts have been made by the government of Sri Lanka to access and evaluate the existing environment of quality standards and service provisions of institutions intended for out of home care services for children deprived of parental care. However, the following two reports can be highlighted as successful attempts. These two reports contribute valuable secondary data in both the qualitative and quantitative aspects of quality of life of children in institutional care in Sri Lanka.


In this study, the research team has involved children in care, not only as respondents, but as a research advisory group that supported the entire research process. Children have given input at every stage. This attempt clearly adds depth and meaning to research as these children is the central subject of inquiry.

Information about staff in this report has come from both children and staff themselves. The report notes that the views of staff and those of children were completely different from one another. This may undermine the credibility of the recommendations of the report. However, the quantitative approach and its findings have, in some manner, justified the outcomes of this report as valued recommendations. The additional secretary
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to the Ministry of Women’s Empowerment and Social Welfare has stated in his note that “We are in agreement with the recommendations of the Save the Children in Sri Lanka publication Home Truths: Children Rights in Institutional Care in Sri Lanka” (Save the Children 2005, p. vi). He has also welcomed the document as providing a number of initiatives for improvement with regards to institutional care of children in Sri Lanka.

The findings within the VCH sector revealed by Save the Children (2005, pp. ix-x) strongly support its use as a valued research tool when evaluating and analysing my research findings. This report is a vital document as it has overseen the UNCRC and has articulated considerable number of its articles that reflect the principle of the child’s best interest. Therefore, it contributes to the primary aim of producing a set of guidelines for policy and governance of institutions responsible for protecting children’s rights and ensuring the life chances of children and young people in institutional care in Sri Lanka.


This report comprises a quantitative approach that complements other qualitative reports. ‘Out of sight, out of mind’ is the first complete baseline study of children caught in the web of institutionalization. The survey focuses on identification of all the voluntary homes operating in Sri Lanka, and on the verification of how they ensure minimum quality standards, as defined by probation and child care services. The then-secretary to the Ministry of Child Development and Women’s Empowerment has identified this report as a useful document (Roccella 2007, p. 5) as it denotes;

• Definition and implementation of activities in the sector of probation and child care services – in particular those defined within the National Plan of Action for Children in Sri Lanka.

• Background analysis for the definition of new policies focused on improving the life conditions of children separated from their families, temporary or permanently.

The representative of UNICEF Sri Lanka emphasizes that with this study; they were able to sort fact from fiction, establish specifics from generalizations and form a picture from grim expressions. He further notes that the two major reasons for the majority of children being in residential care are ‘poverty and education’ (Roccella 2007, p. 6). Guidelines paragraph 15 states that “Financial and material poverty, or conditions directly and uniquely imputable to such poverty, should never be the only justification for the removal of a child from parental care, for receiving a child into alternative care, or for preventing his/her reintegration, but should be seen as a signal for the need to provide appropriate support to the family” (UN 2010, p. 4). Therefore, the claim that ‘two major reasons which account for the majority of children being sought for residential care are ‘poverty and education’, cannot be justified as the sole reason for institutionalization of children.

The outcomes of ‘Out of Sight, Out of Mind’ (2007) have been influenced by UNICEF’s role to advocate for alternative remedies for children;

• whose homes don’t or can’t provide adequate care and support or
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• whose parents are desperate to provide their children with opportunities they themselves simply can’t provide.

Given that the best possible environment for children is generally with their families – the best approach is to try to prevent children being separated from their homes in the first place. Therefore, for children whose homes don’t or can’t provide adequate care and support, the preferred solution from UNICEF’s experience is that simple and cost-effective support be provided in a timely fashion to households in order to reduce the institutionalization of children. In cases where families are simply not capable of taking proper care of children, the preferred solution in UNICEF’s experience is the introduction of the next best thing to family care, i.e. the networks of foster families. UNICEF further suggests that additional support from the government to these foster families can form the backbone of an alternative care system for children (Roccella 2007, p. 6).

RESEARCH OBJECTIVES

The research objectives can be listed as follows;

• To ascertain the extent to which the Sri Lankan government has taken into account the resolution adopted by the General Assembly of the United Nations on Guidelines for the Alternative Care of Children.

• To explore unique guidelines proposed by Sri Lankan statutory bodies against the background of international instruments.

• To discover whether the current ‘General Standards’ are designed for wide dissemination among all sectors directly or indirectly concerned with issues relating to alternative care, and seek in particular to;

1. support efforts to keep children in, or return them to, the care of their family or, failing this, to find another appropriate placement solution, including adoption and foster care,

2. ensure that while such permanent solutions are being sought, or in cases where they are not possible or are not in the best interests of the child, the most suitable forms of alternative care are identified and provided, under conditions that promote the child’s full and harmonious development,

3. assist and encourage the government to better implement their responsibilities and obligations in these respects, bearing in mind the prevailing economic, social and cultural conditions in Sri Lanka,

4. guide policies, decisions and activities of all concerned with social protection and child welfare in both the public and the private sectors, including civil society.

The aims of this research are to;

• review findings and analyse them in the context of children’s rights, and produce a set of guidelines for a practical mechanism to implement policies and governance practices of institutions responsible for those children’s rights, ensuring life chances of children and young people in VCHs in Sri Lanka,
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- develop guidelines to protect the rights of children and young people in VCHs,
- advocate for the standard of care the children receive, and the opportunities they deserve in order for them to reach their full potential and integrate into their societies when they attain maturity and leave the VCHs.

The aim is to ensure that children in institutional care have the standard of care and life chances they deserve, in order for them to become effective and productive citizens in the social, cultural and economic development of Sri Lanka.

METHODOLOGY

In the first instance, this research synthesized a reference list of published and unpublished documents as well as a list of different practices of policy and governance relevant to life chances of children in institutional care in Sri Lanka. Subsequently, the study extended by means of a field study to collect primary data from a range of questionnaires and interviews.

Field surveys were conducted in every province of Sri Lanka. Research participants represented the policy makers and the service providers who are responsible for the well-being and protection of the human rights of children in institutional care.

Research participants were as follows,

- Policy makers (provincial commissioners and senior probation officers of DPCCSs)
- Policy officers (probation officers of DPCCSs and child rights promotion officers of divisional secretariats)
- Service providers (managers of VCHs)
- caregivers (matrons and wardens of children’s homes)

Life chances of children and young people in institutional care in VCHs are based on and impacted by the decisions made by policy makers. The policy officers who act as intermediaries play a major role in the implementation of these policies. Service providers and caregivers who actually practice these policies are charged with the difficult and challenging responsibility of protecting children and young people. The opinions and the proposals forwarded by these four groups of people, based on their experiences, will all have equal weight in determining the life chances of children and young people who are in alternative care institutions. Therefore, the recruitment of these four groups as participants for the study was based on the aim of using their feedback to produce a set of guidelines for the process of policy making and governance of children’s homes informing;

- policy makers in timely and appropriate policy making,
- policy officers in translating these policies into practice,
- service providers in interpreting these policies into guidelines,
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• caregivers putting these guidelines into practice.

The guidelines that will emerge as an outcome of this research analysis will ensure that the children in Sri Lankan voluntary children’s homes have the standard of care and life chances they deserve, in order for them to reach their full potential and to integrate into society as effective and productive young citizens when they attain maturity and leave the children’s homes.

**The questionnaires:** All members of three participant groups (POs, CRPOs and caregivers) were approached via mailed questionnaires in a census approach. All four questionnaires consisted of two sections. The first section was structured with closed questions to procure general information (age, gender, ethnicity, religion, educational and professional qualifications). The second section included open-ended questions to ascertain further information about the participant’s views on existing policy, quality of life and life chances of institutionalised children.

**Interview schedules:** All nine commissioners of the provincial DPCCSs’ were interviewed to collect information on policy implications and their role in the policy making process. This study aimed to get insight and collect information about service provisions to institutionalized children by managers of VCHs. Therefore thirty managers from different children’s homes were interviewed to discuss the range of possibilities in much greater depth (see Wordsworth, Y 2011, p. 96). Two interview schedules were utilized during interviews with policy makers (commissioners of DPCCSs) and service providers (managers of VCHs).

Open ended questions have been used in questionnaires and interview schedules considering many advantages compared with closed questions. This avoided respondents being locked into pre-defined response formats. Unstructured questions have been useful for generating range, meanings and novel ideas as this is an exploratory stage of research. Since the questions were flexible, it gave respondents freedom to express complexity and diversity (as proposed in Wordsworth, Y 2011, p. 89). Although it took more time and was more difficult when articulating choices or reasons, depending on the question, it enabled me to receive unanticipated answers. Furthermore, by using open-ended questions I was able to receive deeper and richer information and more understanding of the respondent’s points of view. However, in terms of open ended questions included in questionnaires, some questions had not been answered, a problem common to such surveys (Wordsworth 2011, p. 89). This may be due to more work and extra time needed for the participants to answer open ended questions than selecting a pre-defined response. The two most challenging factors with regards to open-ended questions were handwriting illegibility and coding responses to find similar themes.

The responses to the questionnaires and the narratives of interviews were analysed on the basis of the Guidelines for the Alternative Care of Children and the General Standards for promoting the quality of service in voluntary children’s homes. The answers were separated into several themes and rated to identify the core themes.
INITIAL FINDINGS

Limitations: This paper discusses findings on two research question of this study. Findings are based on narratives and responses of policy officers, service providers and caregivers. Each narrative is discussed in the context of ‘Guidelines’ adopted by the General Assembly of the United Nations.

“A key question asked of both policy officers and service providers was how the quality of life and life chances could be improved.” The second key question posed by this research was; “What is the saddest and the happiest experiences that you have encountered during your service period?” The participants’ answers provided a clear picture of the varying level of the standards of quality of children’s homes and lifestyles of children in an atmosphere of out of home care environments. Some responses are unique in nature and some are of immense vitality when finding novel mechanisms and approaches to enhance life chances of children. Policy makers speak about ‘quality of life of children and their well-being’, mostly in an objective manner (Stiglitz et al. 2008, pp. 61-95). They are concerned about children’s health, education, personal activities, social connections etc. that fall among objective features shaping quality of life as explained by Stiglitz et al. (2008, pp. 67-93). Policy makers have direct contacts with policy officers but not with caregivers. They seldom have direct contact with children in institutional care because the overwhelming numbers of children largely prevents the possibility of direct interaction. This disables policy makers’ opportunities to sense the methods for enhancing children’s subjective well-being that is encompassed by children’s life satisfaction, and their absence of negative feelings and presence of positive feelings. Policy makers’ decisions on policies and guidelines are mainly based on meetings and discussions with the policy officers. Consequently, policy officers become intermediaries to extract objective well-being measures determined by policy makers.

Caregivers’ experiences are very subjective as they have direct and very close relationships with children under their care. Policy officers are supposed to maintain regular visits to children’s homes and therefore they have the opportunities to connect with the caregivers, managers and the institutionalized children. This places the policy officers at the centre of this research. They play a major role, having direct contact with all other parties concerned with policy and governance of children’s homes and the children in institutional care. Therefore, when designing policies for the protection and well-being of children in institutional care, the policy officers’ suggestions and ideologies become very important in a survey of this nature as it attempts to assess the links between various quality of life domains for each child. This is well explained by Stiglitz et al. (2008, p. 94) in their recommendations stating that “Surveys should be designed to assess the links between various quality of life domains for each person, and this information should be used when designing policies in various fields.”

The important position of policy officers and caregivers with regards to ‘subjective and objective well-being’ of the institutionalized children was the rationale for commencing the discussions on narratives based on their experiences (Stiglitz et al. 2008, pp. 61-95). (PO = policy officer, CG = caregiver, PM = policy maker, SP = service provider).
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**Narrative PO1:** “I have been disappointed by witnessing the harsh and punitive regimen applied by the managements of children’s homes towards institutionalized children.”

**Narrative CG1:** “It was lunch time at a children’s camp. There were not enough spaces in the dining table and therefore the boys were having their lunch sitting on the stairs. One boy had kept his plate on his knees and while eating accidentally dropped some food on the floor. One matron jumped at him and put all the dropped food back on to his plate and growled, “Now, eat all these!” I was so shocked to witness the awful behaviour of the matron and, I still remember the heartrending feelings on that boy’s face.”

**Narrative PO2:** “I was fascinated to see the selfless efforts of a lady manager who managed to socialize all 21 children during her management in a children’s home. Although she was a foreigner, she manifested as the mother of the children at all times.”

**Narrative PO3:** “One day I went to a children’s home for an official work. I was talking with the matron in the lobby. A little while later, a girl of age seven who seemed sleepy appeared from her bed room squeezing her eyes. She went straight on to the knees of the matron and kept her face over the neck and nestled to the matron. The matron gave child a hug on her forehead and clasped to her chest. The girl further snuggled to the matron and closed her eyes and went sound to sleep. My eyes were filled with happy tears as I witnessed the real affection for charges that I expected from a children’s home. It really was an untainted experience. It was not at all unlike a typical child nestling to her mother.”

**Discussion 1:** PO1’s narrative illustrates a policy officer’s negative attitudes towards caregivers’ behaviour as a whole. Narrative 2 is an experience of a caregiver. CG1’s experience justifies PO1’s viewpoint. However, PO2’s and PO3’s experiences demonstrate good practices in children’s homes. When these narratives are discussed in the context of children’s rights, the CG1’s behaviour contravenes paragraph 96 of the Guidelines. It states that ‘inhuman or degrading treatments that are likely to compromise the physical or mental health of the child, must be strictly prohibited in conformity with international human rights law’ (UN 2010, p. 15).

Guidelines paragraph 50 identifies ‘reintegration’ as the principle task of the caregiver. PO2’s narrative is an excellent example of a caregiver that is mindful of her tasks. PO3’s narrative is a decent example for a caregiver who runs her children’s home in conformity with Guideline paragraph 12, which signifies the importance of ensuring children a stable home and of meeting their basic need for safe and continuous attachment to their caregivers, with permanency generally being a key goal (UN 2010, p. 4).

**Narrative PO4:** “Some children, who had been institutionalized for they had no proper guardianship or security, reported dead after falling ill in the children’s home. This was the saddest incident during my service period. These deaths were caused not only because of the shortcomings of the children’s home alone, but also the lack of the State’s intervention to improve the quality of these children’s homes. This further hurts us as we represent the government to advocate for the standard of care of these institutions.”
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**Discussion 2:** Guidelines paragraph 91 states that “Accommodation in all alternative care settings should meet the requirements of health and safety (UN 2010, p. 14).” PO4, being a policy officer, regrets the state’s inability to advocate for the above guideline as he strongly believes that by doing so they could have avoid such deaths. He is further shamed for being unable to improve the standard of quality of children’s homes.

**Narrative PO5:** “During a six months training course, I spent two weeks in a children’s home in Pamunuwa to conduct a case study. For my case study observation, I selected a 12 year old boy. At the end of my two weeks when I was about to leave, this particular boy snuggled to me and was crying loudly. I tried to appease him and ask what he wanted from me. “Please bring me my mother, I want nothing other than that” he wept and screamed. I heard the boy’s yell crying for his mother’s warmth, even from a great distance when I was departing the home. The child’s mother had chosen continuously to travel and work abroad. I am sad about the mother’s insensitivity towards her child’s grief.”

**Discussion 3:** In the Sri Lankan context, for poverty reason, mothers may go overseas to work as housemaids, leaving their children in children’s homes as illustrated in PO5’s narrative. The general impression is that residential institutions – and often probation and child care officers – perceive themselves as the best welfare and protection option for children; the result of this understandable position is that not much is done to facilitate the reunification of children with their families, and re-integration with the community (Roccella 2007, pp. 31-32). This attitude discourages the ability of parents to leave children within their natural birth environments when they leave for work abroad. This severely breaches the most fundamental principle of the Guidelines, which is that ‘efforts should primarily be directed to enabling the child to remain in or return to the care of his/her parents, or when appropriate, other close family members’ (UN 2010, p. 2).

The role of the service providers as managers of the children’s homes is vital. The manager’s efforts, in every way, have direct influence on the quality of life and life chances of children in their institutions. Whatever the funding source is, whether from local/overseas funding or from the managers’ own wealth, the livelihood of the children’s home is defined by managers. Provision of amenities and selection of caregivers to the children’s home is also decided by managers. The following narratives and responses of managers emphasise how critically their thinking has resulted in improving quality of life and enhancing life chances of children.

**Narrative SP1:** “As this information is to help improve the standards of homes, I would like to honestly say that I would like to see improvement in the area of the social welfare department considering the needs of children before the imposition of standards. Some children are not ready to leave a children’s home at the age of 18 and I feel that this should not be a hard and fast rule but that they should consider each child’s case. After years of working with children we are not ready to just release them into situations that we know they are not ready for. Example: Recently we were told by the Social Welfare Department to send a girl home because she was now 19 years old. She had come to us with her younger sister because of abuse in her family after losing their mother to the tsunami. We did not want to send her home because we felt it was unsafe for her and she
was not mature enough to go home. However, eventually we had no choice but to release her. Within 5 months, she was pregnant and then needed to get married. Her younger sister is still with us. She is 17 years old. Will the same thing happen to her?”

Discussion 4: SP1 is a manager of a girls’ children’s home. She gives us evidence where policy officers have misinterpreted guidelines in actual practice. Guidelines paragraph 52 states that ‘Once decided, the reintegration of the child in his/her family should be designed as a gradual and supervised process, accompanied by follow-up and support measures that take account of the child’s age, needs and evolving capacities, as well as the cause of the separation’ (UN 2010, p. 10). SP1’s argument is that just because a child turns 18, the child’s family environment does not automatically switch to a safe environment. As a service provider, SP1’s appeal is that the officials should be very cautious when expediting their decisions and the decision should be in the best interests of the child, under conditions that promote the child’s full and harmonious development (UN 2010, p. 2).

SP2 is a service provider. SP2’s children’s home has been recognized as a better governed model children’s home. When he was asked to provide suggestions to improve the quality of life and enhance life chances of children and young people in Sri Lanka, his response was as follows:

Response SP2: “I propose my practice technique. That is the concept of the so called ‘good family’ as an example to improve the quality of life and enhance life chances of children in children’s homes. Every community has defined a ‘good family’ based on their cultural values and norms. If we can apply this ‘good family’ concept to the governance of children’s homes, it will not be difficult task to improve the quality of life and enhance life chances of children in children’s homes. Manager and the matron are the parents to a children’s home. It is common sense that a ‘good family’ should not have domestic violence. ‘Good family’ maintains sincere relationships to each other. When parents find their children good at different fields, they support children to develop their skills in these fields. Good parents never compare their children each other for good or bad. They admire children’s various talents in front of them but if they find ambiguities, they talk to them personally. Good parents try their level best to improve the quality of life of their children by fulfilling children’s needs. Likewise, if the manager and the matron of a children’s home take a ‘good family’ of the particular community as an example to run their children’s home, it will naturally become a good children’s home that improves the quality of life and life chances of children in the children’s home. Such children’s homes will naturally help children feel like being living in a homely environment that give them love, affection and security.”

Discussion 5: SP2 uses his own experience to answer the question. SP2 is particularly qualified to do that as his children’s home has been accepted as a model home. He explains that the cultural values and norms of the particular community where the children’s home is situated should be considered to identify the ‘good family’ of that society.
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The following three service providers strongly request policy makers to be very cautious when directing children into voluntary children’s homes.

Response SP3: “Sexually abused children should never be admitted to homes where orphans, abandoned and destitute reside. Government should manage homes separately for the sexually abused children. Special awareness programs should be conducted on these children’s behalf regularly.”

Response SP4: “Juvenile offenders should not be included into the children homes where small children are being institutionalized. All the policies should be changed in a manner where every child has the full security to lead his life in the children’s home.”

Response SP5: “When children are institutionalized by court orders or by the DPCCS, the child’s background (reason for entry into institutional care) should be taken into consideration. Children with abused histories and juvenile offenders should be separated from other children.

Discussion 6: There is no doubt that the above managers have experienced this sad situation and know how much it affects the quality of life and life chances of other children when mixed with sexually abused children or juvenile offenders. This is a signal to understand that the officials have not considered the reasons behind children’s entry into alternative care when admit them to care in children’s homes. There are State governed remand homes and certified schools intended for juvenile offenders and sexually abused children (DPCCS 2010, p. 1). “Regimented routines were found in the majority of institutions and corporal punishment was detected in some of them” (Save the Children 2005, p. 10). This report (p. 18) further states that children who had been abused did not receive specialist care and support from staff, despite the numbers of girls (31%) in certified schools who are victims of abuse. These evidence show cases that juvenile offenders and sexually abused children are in an even worse position than those who are simply without families. Therefore, officials need to make it clear that having refused to take in these children to VCHs, because of adverse effect on other children as pointed out by service providers, there is an ethical requirement to find suitable accommodation and upbringing these children without discriminations.

CONCLUSION

This study was designed to gain an insight into the nature and range of social and family difficulties contributing to children and young people being placed into alternative care in children’s homes in Sri Lanka. In particular, it will initially give a better understanding of guidelines, policy and practices recommended by the United Nations as well as the policy and practices adopted by the government of Sri Lanka, regarding the protection and well-being of children deprived of parental care or who are at risk.

In addition to cataloguing policies, it will reveal those that are applied in practice and those that are not applied, but remain as rhetoric. Data was collected through a survey including both face to face interviews and mailed questionnaires to a sample of participants (policy makers, policy officers, service providers and caregivers) that are
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directly responsible for the protection of children’s rights and well-being of institutionalized children.

The project will enable an understanding of the effectiveness of policy implications and governance practices that are now in place for the well-being and protection of children in children’s homes, thus assuring the enhancement of the life chances of those who are deprived. It will also address the policy process, especially the role of the ‘governance’ of children’s homes which are directly involved in the care of children. The study will provide a useful guide for institutions concerned with the alternative care of children. The research will also reveal existing policy practices and governance, and how these relate to the prevalence of quality of life, and the enhancement of the life chances of children in alternative care in other countries.
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Finally, this work will provide directions to policy makers and researchers on policy and services relevant to the needs of children, young people and their families; information to service providers on practice implications for child protection and out of home care services, and guidance to those practitioners who are charged with the difficult and challenging responsibility of protecting children in orphanages.
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REFERENCES


