

CASE STUDY



Reintegration from residential care to kinship care during COVID-19

Mary is a 12-year-old girl from Kenya. When she was seven years old, Mary's parents died and she was placed in the Vision of Charity Children's Home by her extended family, who felt they could not care for her or ensure that she continued with her schooling. In March 2020, the Government of Kenya issued a directive that all congregate care settings including Charitable Children's Institutions (CCIs) must release children with known families as part of the strategies to mitigate the spread of COVID-19.¹ Mary was sent to live with her maternal grandparents.

Shortly following this directive, the Government of Kenya realised that children and families were unprepared for such rapid reunification. The Government called on partners such as Changing the Way We CareSM (CTWWC)² to assess and support the reintegration of children and their families.

CTWWC collaborated with a local partner organization, the Interfaith Council of Clerics (ICC) to determine the needs of Mary and her family. Initially, the family were given emergency material support to help them deal with the loss of income associated with the pandemic and to support Mary's care.

To ensure Mary's grandparents could look after her in the longer term, CTWWC helped the family to apply for government cash transfers and the National Health Insurance Fund. The family was also given an income-generating grant to start a small business selling chickens and firewood.

Due to COVID-19, social workers' travel was curtailed, and, Jane, the case worker assigned to Mary's case, initially had to contact Mary and her grandparents by phone to check on her wellbeing.

This virtual case management was supported by tools developed through the Government's National Care Reform Core Working group.³ Recognising the importance of case worker support, CTTWC worked with the government to ensure that they were considered essential workers and were provided with personal protective equipment to make their community and family visits safe.

This meant that caseworkers could visit families like Mary's face-to-face and continue to promote the importance of family-based care in communities. Mary and her grandparents met regularly with Jane in the open air to limit the risk of COVID-19 infection.

Mary initially missed her friends from Vision of Charity Children's Home and found rural life hard. In her meetings with Jane, Mary described the challenges of adjusting to a new home, getting to know her grandparents and their children, contributing to household chores, and the simpler living of village life. Mary found it difficult to make new friends. She remembers desperately wanting to be back in the familiarity of the children's home with her friends.

“I just wanted to be with my friends. I didn't want to share a bed with my cousins. I wanted familiar meals and to go to my old school again.”

Mary

When schools and CCIs reopened in the autumn of 2020, Mary returned to the Vision of Charity Children's Home. Her grandparents supported this move as they wanted Mary to be happy and educated, and assumed the schooling would be better in the CCI than in the village.

“Mary had been registered for grade four national exams through Vision of Charity Children's Home. Her grandparents wanted to make sure she could sit for exams and be certified to continue her education. At this time, they also struggled with economic stability and worried about Mary's happiness.”

Jane
SOCIAL WORKER

The COVID pandemic had given Mary an opportunity to reconnect with her grandparents, cousins, and wider extended family and community. Once Mary was back at Vision of Charity Children's Home, Jane continued to emphasise the importance of family care and provided counselling to Mary and her family. Mary was able to visit her grandparents and cousins regularly.

“At first I liked being back with some of my friends, but I also missed my new community and my grandparents.”

Mary

After months of counselling and many family sessions, Mary decided to go home permanently. Many steps were then taken to prepare for and support safe and long-term reintegration, including involving Mary and her family in case planning and identifying goals, strengthening the family's small business, and making plans for Mary to go to the local school.

The children's home agreed to pay Mary's school fees and transportation to a private school in a town neighboring the grandparents' village. Jane provided psychosocial support, parenting training, and a reunification grant which allowed the family to purchase new sleeping mattresses and clothes for Mary and her cousins.

“The support from Jane (CTWWC) was not only the material things we needed but having someone to talk to; someone we can count on and walk with us through this journey of making the move back to family.”

Mary's grandmother

“I like having someone who understands that it takes time for me to get used to the changes...I can call Jane; she listens to me and pays attention to what I'm going through. Her advice has helped me to learn how to be at home...”

Mary

Jane visits the family regularly. Mary's grandparents have taken to calling Jane just to check-in between visits.

“They will call just to share the good news with me; to tell me about Mary's school performance or their success at the market. They call me to tell me how well they are doing. I can hear the bond they have formed in their voices.”

Jane

SOCIAL WORKER

Mary is now in grade six at the private school. The vision of Charity Children's Home continues to pay her school fees and transport. Last term Mary took the second to the top position in her class. Recently Jane bumped into Mary out in the community.

“She was returning home from school. She was with a whole group of friends. They were laughing, smiling, skipping, sharing stories of their day. Mary's happiness, her comfort at home, is visible...”

Jane

SOCIAL WORKER

Mary is one of the thousands of children in Kenya who were sent to family care suddenly without any preparation when the COVID-19 pandemic hit. Prior to the pandemic, there were an estimated 40-45,000 children in registered CCIs (and an estimated 200,000 in unregistered residential care facilities).⁴ Access to services and education were found to be the main factors leading to placement.⁵

Research by CTWWC in three counties shows that 57% of the children in care left CCIs as a result of the pandemic, with an estimated 95% of these children going to live with parents or other relatives.⁶

CTWWC and local implementing partners traced and supported over a thousand of the rapidly reunified children through case management and other interventions. Very few of the children or families had been prepared for reunification, and many were found to have unmet basic needs.

CTWWC social workers also report that for reunified children to stay in families, families need assistance, and education systems must be reformed so that high-quality schooling is provided close to home.

Although there is a lack of comprehensive research, anecdotal evidence from CTWWC social workers suggests that without educational reforms and family support, like Mary, many children reunified with families during the pandemic did return to CCIs. It takes preparation and support, like that provided by Jane, to see a reunification through to successful reintegration.

1 This mandate extended to other forms of congregate care such as boarding schools and charitable and statutory children's institutions.

2 The CTWWC initiative in Kenya works with the Government of Kenya and through local partnerships, to ensure that children and families rapidly reunified are identified, properly assessed and provided with family strengthening supports and services through case management while at the same time helping to transition CCIs to family and community-based services. Learn more about Changing the Way We Care at: <https://www.changingthewaywecare.org>.

3 See the set of tools on Better Care Network: <https://bettercarenetwork.org/library/particular-threats-to-childrens-care-and-protection/covid-19/package-of-covid-19-case-management-and-virtual-monitoring-guidance-and-tools>

4 Aben, C. (2020) *Preliminary Report on the Status of Child Protection in Charitable Children's Institutions in Kenya*. Kenya: National Crime Research Centre.

5 Ministry of Labour and Social Protection, State Department for Social Protection, Department of Children's Services. (2020). *Situation Analysis Report for Children's Institutions in Five Counties: Kiambu, Kilifi, Kisumu, Murang'a and Nyamira Summary Report*. Accessed at: <https://bettercarenetwork.org/library/the-continuum-of-care/residential-care/situational-analysis-report-for-childrens-institutions-in-five-counties-kiambu-kilifi-kisumu-murang>

6 CTWWC (2020) *Coronavirus Disease 2019 (COVID-19) Situation Report - May 2020*. Report provided by the initiative.

Acknowledgements

This document has been produced as part of the regional learning platform on care in Eastern and Southern Africa. The platform and its corresponding documentation were planned and conceptualised by UNICEF Eastern and Southern African Regional Office (ESARO) and Changing the Way We CareSM (CTWWC). CTWWC is funded by USAID, the GHR Foundation and MacArthur Foundation. The platform provides an opportunity for government, UNICEF and others involved in care reform in the region to share learning on care reform.

This document has been made possible with funding from USAID's Displaced Children and Orphans Funds. It was written by Emily Delap of Child Frontiers and CTWWC

For more information contact: www.unicef.org

© UNICEF 2022