

SAVE THE CHILDREN

# PUSH AND PULL FACTORS OF INSTITUTIONALIZATION OF CHILDREN

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A Study based in the Eastern Province of Sri Lanka

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2011

## SUMMARY

Institutionalization of children has apparently been among the preferred care options in the past for children who lack parental care. In Sri Lanka, in the context of an unsettled security situation particularly in the Northern and Eastern Provinces followed by the Tsunami disaster of December 2004, the number of institutions providing shelter and care for children saw an unprecedented increase. In consequence new laws and systems were put in place to monitor the institutionalization process, standardize facilities and care as there were many reports of violations of child rights by certain institutions. Following upon this standardization process, a system of compulsory registration of all children's institutions including all children's homes falling within the purview of the Probation Officers was introduced with the managements of the institutions held accountable for all their activities. A few years of the implementation of these new standards, a necessity arose to assess the programme in the context of the latest trends and situations on institutionalization of children in the Eastern Province particularly to determine the need for fresh interventions for future developments.. This paved the way for a research project focusing on the push and pull factors of institutionalization of children in the Eastern Province.

This research on the institutionalization of children in the Eastern Province carried out by Save the Children with the support of the Department of Probation and Children Care Services and National Institute of Social Development attempts to examine the factors that causes families in the Eastern Province of Sri Lanka to place their children in institutions and to recommend ,substantiated with evidence, de-institutionalisation supported by the necessary services to reintegrate the children into the family based environment and thereby advocate and facilitate the reduction in the number of children entering institutional care

The study begins with the identification of the push factors that force the children out of their homes into children's homes, before identifying the pull factors that attract/draws the children away from their residences to become entrapped within institutions. Using the information thus gathered the issues of institutionalization and those of de-institutionalization of children are analysed before recommending measures to revamp the system of institutionalization for those children in need of such facilities. .

To obtain the basic information required for the study a survey based on a structured questionnaire was conducted. The information obtained was of 150 children in selected institutions and 150 of the deinstitutionalized children living outside.. The percentage distribution of the samples selected among the three districts of Batticaloa, Trincomalee and Ampara was based on the district wise distribution of the chosen institutions. The

percentages of the samples thus worked out for the three districts namely Batticaloa, Trincomalee & Ampara were 42%, 32%, and 26% respectively.

Once the quantitative data were thus obtained qualitative information obtained from a series of key stakeholder interviews with over 50 officials from the government institutions, Non Governmental Organisations (NGOs), institution managements, and social workers were used to clarify certain interpretations. In addition district wise workshops were held with children in institutions and deinstitutionalized children. In this exercise child participation techniques were used. To fine tune the analysis of the findings sensitive information too was gathered from by holding separate workshops for girls and boys from the institutions. Besides these workshops which were 12 in number, focus group discussions too were conducted with the parents of de-institutionalized children in the three Districts. The methodology adopted was the mixed type allowing greater flexibility in the choice of techniques to suit the purpose of the research study. Such a facility enabled the use of the independent opinion of 'outsiders' to underscore the validity of the outcomes

The outcome of the analysis of the key findings of the study are presented in line with the objectives of the study. Among the push factors relationship difficulties caused by death of parent/s, family separation emerged as the most dominant factor while poverty came second as a causative factor in pushing children out of their homes. Temporary inability of primary caregivers to cope as well as migration of parent/s or caregiver came up as the next important causative factors that forced the children out of their homes/. Education and protection are highlighted as the other major reasons for institutionalization. Tsunami and the war do not come out as important causative factors. Children sent to institutions by parents to avoid forced recruitments by armed groups was among the many other reasons that made the parents or caregivers to institutionalise the children for protection

Among the factors that lured the children towards institutions and kept them within institutions, education emerged as the foremost. Quality education is generally provided in almost all the institutions which are supplemented by additional tuition classes. The children are also given the opportunity to attend classes linked to programmes in higher education and vocational training. Many of the basic needs provided at the institutions such as food, water, shelter, clothing, access to health care services, electricity, access to information and materials required for education cannot be afforded by the families of those children in their homes. Personality development and grooming children for diverse employment opportunities are other facilities offered by almost all the institutions. Provision of a protective environment to the children by the institutions was also seen as an attraction towards the institutions. Forced or coerced pull factors such as disruption of family links through unwanted intra institutional friendships while discouraging family interactions that indirectly force children to stay in institutions were also noted as factors that entrapped children in institutions. In addition, the availability of local and foreign

funding to support institutional care, and the related incentives given to the administrators and workers for managing the institutions were seen as major driving factors that contributed to the successful operation of the institutions as profitable business ventures to the detriment of the innocent children who were most unknowingly institutionalized.

Breaking of family bonds, mainly the bond between the mother and the child through the process of institutionalization is discussed as an important issue under issues of institutionalization. Instances wherein children, who fall ill are sent home to the parents by the institution underscores the unethical practices that flout the responsibilities of the institutions. Depriving children of exposure to appropriate socio-environmental development available in the world outside is seen as damaging situations that could compound the situations of deprivation that such children experience. A significant percentage of children in institutions fall prey to unethical forced or coerced religious conversion carried out by many institutions that are established directly or indirectly by faith based organizations. Although in general, institutions are said to provide safer environments for children to live in, which in practice many of them do not. Though acceptable standardization and monitoring initiatives have been put in place, some abusive instances appear to have been created within institutions. Physical and sexual abuse by caregivers and older children in institutions is discussed as another factor of concern. Factors and situations that could lead to organized child trafficking through such institutions is also discussed in the relevant sections. Differential treatment of children based on the 'perks' or 'santhosams' that parents could afford to gift the institutional managements is also discussed as a harmful factor. Many of such situations have created a doubt in the minds of many questioning the appropriateness of the term "voluntary" in the title of such children's home as many of them function as profit making enterprises and not as providers of humanitarian services to the disadvantaged children.

In spite of these negative factors of institutionalization, one cannot overlook the necessity to run children's institutions to ensure that such facilities are made available to those children who become social misfits or unsuccessful in their lives. Moreover the currently adopted de-institutionalization process appears to have some serious flaws at the post de-institutionalization stage wherein the monitoring of progress is not done satisfactorily. Insufficient allocation of funds for the operation of such monitoring systems of de-institutionalized children has had negative impacts on those children. Children re-integrated with families that continue to experience abject poverty have had detrimental effects on the 'returnees' as those poor families could not afford to provide the same care, education and other facilities for the returnee children. When the re-integrated children returned to their original educational institutions they failed to adapt to the rural schools, children and staff. The related 'culture shocks' experienced by the re-integrated children have invariably led to children dropping out of school. With this trend of in the 'drop-out's, the most unwanted

consequential developments such as the engagement in child labour, entering into child marriages, resulting in the high incidence of child mothers and child fathers have taken place jeopardizing the development of the next generation to come.

Recommendations based on the findings of this study which was obtained by employing the multi stakeholder approach. Active participation of children in institutions, children's clubs, community, government and non governmental stakeholders as well as the private sector at different levels are proposed to increase the efficiency of the monitoring system to ensure the provision of appropriate and just care to children through institutions and to ensure further transparency in the process of institutionalization, administration and utilization of funding allocated for institutions. On the other hand, empowering communities through target interventions is also looked at. How to overcome the grave situation of donor dependence well accommodated by the people in the peripheries and their disability to cope with reduced donor interest and funding is looked at from an internal resource mobilization to reduce poverty to reduce push factors.

## ACKNOWLEDGEMENT

“Push and Pull Factors of Institutionalization of children in the Eastern Province of Sri Lanka” was conceptualised and implemented by the Save the Children in Sri Lanka with funding from the USAID.

This was a multi-stakeholder study conducted with the active participation and contribution of the Commissioner and Probation Officers of the Department of Probation and Childcare Services, Officials of the National Child Protection Authority, Child Rights Promotion Officers (CRPOs), Police Officers, Authorities of Children’s Institutions, Officials of International Non-Governmental Organisations (INGOs), Officials of Non-Governmental Organisations (NGOs), Officials of Community Based Organisations (CBOs), Parents of Institutionalized and De-Institutionalized Children, Institutionalized and De-Institutionalized Children and members of Communities. We wish to place on record our deep appreciation of their enthusiastic response and active participation.

We are thankful to Quazi Ghiasuddin, Acting Country Director and Win Aye, Head of Protection, at the Save the Children for outsourcing the study and readily extending their assistance .

The research project was managed by Thatparan Jeganathan, Protection Advisor, Save the Children. We are grateful for his direction and support throughout the study in identifying the research team, reviewing research design, tools and draft report, supporting us in the training of the research team, organizing logistics for training and field work, and monitoring the progress of the study.

We are grateful to Save the Children District Teams in Trincomalee, Ampara and Batticaloa, particularly, Mark Patterson, Chrysantan, Andrew Lazarus, Nithyavathany Benedict, Paskeran, Asmi, Mary Vijitha Tisseverasinghe, for their keen enthusiasm and dedicated contribution in the administration of the study, organizing meetings, focus group discussions(FGDs), and workshops.

Yasir Arsath, Arun Sivagnanam, Balamathy Vairavapillai, Jeyaran , Jananthan, worked as field researchers of this study and contributed with great commitment by conducting the survey, participating at FGDs and Workshops, supporting in the translations and data entry.

With appreciation and gratitude for the contribution of all stakeholders of the research,

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31 May 2011

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## ABBREVIATIONS

CBO	-	Community Based Organisations
CRPO	-	Child Rights Promotion Officers
DPCS	-	Department of Probation and Childcare Services,
FGD	-	Focus Group Discussion
GN	-	Grama Niladhari
HRC	-	Human Rights Commission
INGO	-	International Non-Governmental Organisations
IDP	-	Internally Displaced Persons
LTTE	-	Liberation Tiger of Tamil Eelam
NCPA	-	National Child Protection Authority,
NGO	-	Non-Governmental Organisations
NISD	-	National Institute of Social Development
PO	-	Probation Officers
PHI	-	Public Health Inspectors
POIC	-	Probation Officer in Charge
SPSS	-	Statistical Package for Social Sciences
SMS	-	Short Message Services
USAID	-	United States Agency for International Development
UNICEF	-	United Nations Children's Fund
VHMT	-	Voluntary Home Monitoring Team

## DEFINITIONS OF TERMINOLOGY

- **Caregiver**- an individual, such as a parent, foster parent, or head of a household, who attends to the needs of a child.
- **Child**- A human being below the age of 18 years (United Nations Convention on the Rights of the Child, ratified and accepted by Sri Lanka)
- **Child Protection**- the measures and structures to prevent and respond to abuse, neglect, exploitation and violence affecting children
- **Child Abuse**- Acts or omissions by a care-giver leading to actual or potential damage to health and development, and exposure to unnecessary suffering to the child” (The initially used definition) and or “Anything which individuals, institutions, or processes do (acts) or fail (omissions) to do which directly or indirectly harms children or damages the prospects of safe and healthy development into adulthood” (A wider definition)
- **De-institutionalization**- means the release of institutionalized children, especially child victims, from an institution for placement and care in the community.
- **Gate-keeping** - the process of referring children and families to appropriate services or care arrangements with the aim of limiting the number of inappropriate placements.
- **Kinship care** - full-time care of a child by a relative or another member of the extended family. This type of arrangement is the most common form of out of home care throughout the world and is typically arranged without formal legal proceedings
- **Standards** –which \ established by authority as a rule for the measure of quantity, extent, value, or quality; or measure sanctioned by government, as the standard of the institutions.
- **VHMT**- Voluntary Home Monitoring Team

# CHAPTER ONE

## INTRODUCTION

### **1.1 The phenomenon of institutionalization**

Institutionalization, as delineated in this treatise, refers to the placement of a person or persons in the care of an institution. Institutions as phenomena, are creations /mechanisms devised by humans to meet certain needs of society. Those mechanisms often reflect the human needs and/or the collective choice of a particular time, and culture. The terms “institutions” and “social institutions” often used interchangeably, are also used to refer to different types of social forms, including conventions, rules, rituals, organizations, and systems of organizations. Social institutions are different to social forms such as conventions, rules, social norms, roles and rituals which are often the constitutive elements of institutions. The term "institution" is applied either to particular formal organizations of government, public service etc, or to customs and behavior patterns important to a society. The informal manifestations are structures of relationship, obligation, role and function. The informal forms are also seen as social orders of human psychology, culture, habits and customs.

Historically institutions or organizations have emerged as social structures with a social purpose. Institutions as social institutions are often organizations and each society has its own set of social institutions. Certain types of institutions established by many countries at some points of time have been set up particularly to provide institutional care to resolve the social problems of the needy. Many such Institutions are established with good intentions, in the belief that those were the best way to provide the care needed.

Within a society the development and functioning of institutions, though stigmatizing, may be regarded as instances of development that specifically emerge to function in a pattern of

social self-organization, while individual, formal organizations, identified as "institutions," may be deliberately and intentionally created by the people. Example: A place for the care of persons who are destitute, disabled, or mentally ill.

The term Institutionalization is used, in this study, to refer to a process which places people in institutions such as hospitals, group homes or orphanages. for a short or long time period. Though considered as living arrangements that decreases social relationships such institutions often provide better care options for the clients to learn new skills, improve behavioral and psychological problems, and develop healthier self-esteem. The practice of Institutionalization has had very long histories both in the developed and developing worlds.

## **1.2 Institutionalization of Children**

As defined by Tolfree 1995) institutional care for children is “a group living arrangement .... in which care is provided by remunerated adults who would not be regarded as traditional carers within the wider society.” This definition implies that it is a professional relationship between the adults and the children rather than one that is parental and it is an organized and deliberate structure for the living arrangements of children.(Dunn A., Jareg E., Webb D. A)

Institutionalization of children is often delineated as an act of placing children in a facility outside of their home. When the children are emotionally or physically handicapped they are placed in a therapeutic facility outside of their home. These facilities are meant to provide a highly controlled environment, as safety is of primary importance for the children who should be protected from abuse, drugs, and suicide attempts. Institutionalization for emotionally disturbed children and adolescents is usually not meant to provide long-term treatment. The average stay ranges from several months to an year or two . Physically handicapped children generally remain in residential care until they are able to live on their own, or for the rest of their lives, depending on the severity of the handicap. Such institutions are expected to stay in close contact with the child's parents and encourage visitation whenever possible Children in institutional care rarely have the opportunity to form an attachment to a parent figure/carer, and they spend less time on play, social interaction, and individual care than children in a family

Children are sometimes institutionalized when their home environment becomes hostile. There have been instances however when the child is institutionalized to protect him/her from abusive parents, but the child may continue to remain vehemently loyal to the parents. Such situations are hardly accepted by Social workers and other institutional staff alike. Occasions like that may develop into challenging situations to the staff of institutions to keep to the mandated goals of the institution.

The effects of institutionalisation on child health, development and wellbeing as illustrated in several studies have not been encouraging. It is widely believed that institutional forms of care almost inevitably result in negative outcomes for children. Over the last six decades numerous studies have convincingly provided evidence on the fact that institutional care is detrimental to the cognitive, behavioural, emotional, and social development of young children. Child welfare experts differ widely on the possible effects of institutionalization on the children. They believe that in spite of the many improvements made particularly in the quality of residential care that incidences of neglect or below-standard care continue to exist.

With an emphasis on rules, chores, schedules, neatness, cleanliness, and order, the best institutional care offers emotionally and physically handicapped children a better chance at life. They can learn new skills, improve behavioral and psychological problems, and develop self esteem. In a protected environment abused children can learn to think of adults as kind and dependable. In choosing the proper residential treatment, parents should look for these criteria: a nurturing live-in adult staff; a family-style arrangement; low youth-to-adult ratios; high rates of positive interactions between youths and adults; psychologically informed treatment planning; ongoing evaluation and formalized after-care plans. Whenever possible, the child should be involved in his or her assessments. It is the recognition that institutional forms of care almost inevitably result in negative outcomes for children. Over the last 50 years numerous studies have documented the fact that children growing up in institutions often demonstrate delays in physical, emotional, social and cognitive development

To make a decision to place a child in a treatment center is very difficult for the family as it becomes an event fraught with emotion. Parents have also to face criticism from friends and other family members. The dangers of institutionalizing children are pervasive and take place all over the world. Countries and institutions are joining hands to call for an end to the institutionalization and abuse of children.

### **1.3 Institutionalization of Children -the Sri Lankan Context**

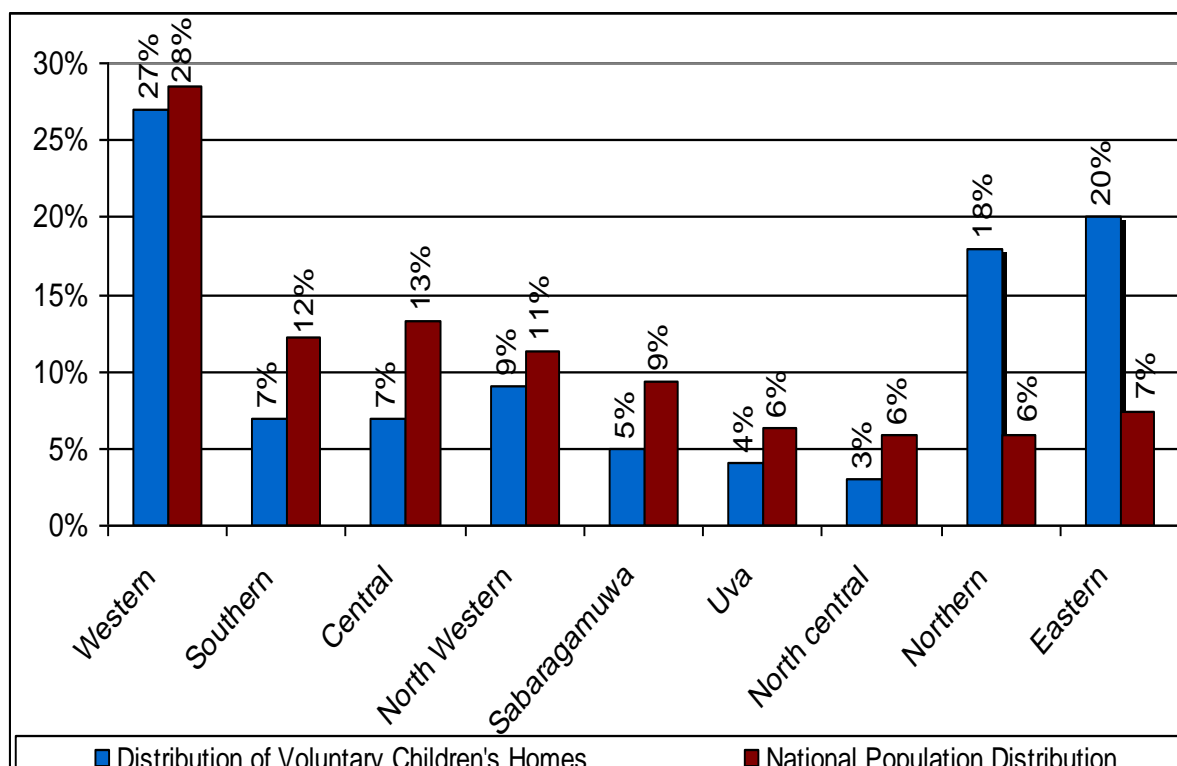
In Sri Lanka, though the philosophy of institutional care has been prevalent as an alternative living arrangement for a considerably period of time, as a concept it is relatively recent from the colonial period. For quite awhile institutionalisation has been viewed as a preferred care option in Sri Lanka for children who require special attention. In 2009, 14,842 children were institutionalised 2,234 of them were institutionalised in state-run residential institutions and 12,608 were admitted to certified voluntary children's homes. Currently there are more than 21,100 children in 488 voluntary residential care institutions in Sri Lanka (run by well-wishers, religious leaders, community) and children hosted in the 22 State-run residential institutions, including remand homes, certified schools, and receiving homes.<sup>1</sup>The number of officially registered children's institutions has significantly increased from 142 in 1991 to 500 in 2007 (Save the children, UK 2009)

In the Northern and Eastern Provinces of Sri Lanka, the number of institutions have increased by several fold during the past decade and there seem to have been a significant interest to establish voluntary children's homes by various faith based organisations, non-governmental organisations (NGOs) and individuals. The number of Voluntary children's homes increased from 19 in 1995 to 136 in 2008 in the combined Northern and Eastern Provinces. With the introduction of the regulations and compulsory registration of voluntary children's homes, the number has reduced from 136 in 2008 to 120 in 2009 in those provinces.

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<sup>1</sup>Department of Probation and Child Welfare – 2005

**Figure 1.1 Distribution of Voluntary Children's homes by Provincial population**



A close perusal of the distribution of National Voluntary homes as per provincial population reveals that the number of the National Voluntary homes established in the Northern and Eastern provinces far out number those in the other provinces except in the western province.

### **1.3.1 Current Child Care Situation in the North and East**

The information collated on the situation of children in the Northern and Eastern provinces showed that many of the residential institutions for children while serving as the main facility providing care to children who lost their parents (more than 33% have both parents, 48% have one parent and only 14% have no parents amongst the 19,000 in voluntary homes

(Csaky 2009) also functioned as the main support institutions to both men and women responsible for the care of those children encountering problems in difficult circumstances.

Evidence from a Probation Department project particularly highlights the fact that such institutions are seen as places offering better opportunities by poor families and government child care workers alike (Probation Officers, Child Rights Promoting Officers, care givers in the institutions) They considered such institutions as ideally suited for the education of children as well as for the care and protection of child victims of abuse despite the fact that the standards of care were very poor in a majority of these institutions. This finding appeared to have relevance to the findings of a study by the UNICEF and the government of Sri Lanka (2007) which revealed that only 2% out of the 488 voluntary residential homes were compliant with standards pertaining to proper individual care of children.(Rocella,2007)

A survey of children in institutions in the North-East of Sri Lanka showed that 40% of them had been placed in institutions due to poverty. Evidence obtained from a Save the Children project corroborates this finding related to the fact that many families were compelled to institutionalize their children due to their inability to provide the required food and healthcare. Another major factor that appears to have attracted many of those who placed children in the said institutions was the provision of free education. The fact that a large majority of children in these institutions were aged between 11 and 18, led to the inference that families with children studying in higher grades beyond the 6<sup>th</sup> grade resorted to the practice of placing their children in such voluntary residential institutions to ensure the continuation of their secondary and higher education, The poor transport infrastructure facilities available in many of the remote home villages which made those children travel long distances to school would have contributed as additional factors towards the said institutionalization.

The practice of poor parents migrating abroad institutionalizing/abandoning their children in residential care appeared to be a common and convenient practice. There were occasions reported where some poor families were coerced into giving up their children in exchange for money by suspect child care institutions and adoption agencies with the view to either gain/earn by providing residential facilities to such children or by trafficking those children. (Rocella 2007) However, as it is highly probable that the root causes may differ from what is

apparent these instances should be investigated further. Possible livelihood support to prevent such institutionalizations and facilitate reintegration will be explored in the analytical discussions on the findings..

### 1.3.2 Types of Child Care Institutions

The types of Child Care Institutions coming under the purview of the Department of Probation and Child Care include remand homes, certified schools, receiving homes, detention homes, national training and counselling centres, approved schools and voluntary children's homes.

However, on the basis of the definition given for the institutionalisation of children, institutions such as hostels, boarding houses, Pirivena of the Buddhists, Araneripadasalai of the Hindus, Madrasa of the followers of Islam, Seminaries of the Catholics and Christians which run such institutions for educational purposes too fall into the category of children's institutions. Some such institutions that accommodated children for religious education have ceased to exist.

**Table 1.1 Types of Child Care Institutions**

Type of institution	Details
Remand Homes	Remand homes are detention homes established to house children while their cases are being heard in courts of law. Children in remand homes are detained for the following reasons; suspicion of murder, attempted murder, arson, victims of abuse and sexual harassment, theft, quarrelling, disobedience, straying, being stranded, use of liquor/ drugs, child labour, for further investigation unclassified. The six Remand homes in Sri Lanka are located in Pannipitiya, Anuradhapura, Kithulampitiya, Ranmuthugala, Weralawatta and Jaffna.
Certified schools	Certified schools provide a systematic vocational training to the children admitted. There are 5 certified schools in Sri Lanka, located in Makola, Kappetipola, Hikkaduwa, Ranmuthugala and Kondawil. The reasons for admission of children to such schools include, theft/ burglaries, disobedience to parents, sale and use of alcohol, in need of care and protection, attempted suicide and unclassified.

Safe House	Safe houses are state run accommodation and care providing facilities that keep children whose court decisions are pending
Receiving Homes	State Receiving Homes are set up to provide the necessary safety and protection to children who have not had the opportunity to live with their own families temporally or permanently. Orphaned, abandoned and destitute children live in Receiving Homes. There are 8 such State Receiving homes in Sri Lanka, , namely, Prajapathi in Panadura, Ruhunu in Galle, Sujatha in Bandarawela, Jaffna, Abaya in Anuradhapura, Tikiri in Peradeniya, Amilasevena in Migalewa and Paradise in Kuruwita.
Detention Homes	Detention Homes are institutions established to rehabilitate destitute children over 8 years of age who loiter around as beggars. Currently there is only one Detention Home for such children in Sri Lanka located in Halpatota. In addition these homes also accomodate children detected of burglary, theft, sale and use of alcohol, those children in need of care and protection, and those disobedient to parents and unclassified reasons.
National Training and Counselling Centres for Children	This facility hosts children who have been sexually abused and raped, engaging in theft, straying children, disobedient children, children engaged in child labour, married under aged children, children stranded and suspected of committing crimes.
Approved school, Maggona	Approved School in Maggona was established to shelter and provide psychological and physiological protection to orphaned, deserted, destitute and abused children.
Voluntary Children's Institutions	Voluntary Children's institutions form the majority of the child care institutions in Sri Lanka. Though they are managed by non governmental parties, they are monitored by the department of Probation and Child Care services. These voluntary children's homes accommodate children with various issues such as poverty, negligence by parents, orphaned, family separation etc. Originally it was not required by law to have a court order to accommodate a child in a voluntary children's institution until 2008 when the law was amended to make it compulsory for greater intervention by responsible state institutions. At present there are approximately

	20,000 children in voluntary children's homes in Sri Lanka.
Children's Homes for Disabled Children	These homes provide shelter and care for the children with physical and mental disabilities. Though these homes host children, the subject is covered by the Department of Social Welfare.
Hostels Managed by Ministry of Education	Hostels of government schools are monitored by the Ministry of Education, but the hostels of private schools are monitored by the respective schools. There is no clear data on the number of such public sector and private sector school hostels and the number of children who are placed in such hostels. According to the definition of institutionalisation, school hostels should also be considered as institutions.
Private boarding houses	Children following primary and secondary education away from home are accommodated in private homes that provide room/s on sharing basis and individual basis on a monthly rental. In some cases the house owners provide meals for the boarders.
Religious Institutions	<p>Pirivenas hosts cares and provides specialised education on Buddhism for children. Pirivenas come under the purview of the Ministry of Education. Accurate information/data on the number of such Pirivenas and details on the children in such Pirivenas are not available.</p> <p>Araneripadasalai are managed by certain Hindu institutions which accomodate and provide special education on Hinduism to children The exact numbers of such instiutions and the number of children accomodatedci those are not known.</p> <p>Seminaries of some Christian and Catholic institutions accomodate and provide specialised religious education for children . However, the practices adopted in the accommodation of children in such Seminaries have changed. The exact number of such seminaries and information on the number of children currently accommodated in such institutions are not available.</p> <p>Madrasa managed by the Islam Mosques host, care and provide specialised education in Islam for the children accommodated in them. The number of such institutions and the number of children accommodated in those Madrasas are not known.</p>

#### 1.4 Institutionalization Procedures

Usually a child could be institutionalized between the ages of 5 to 18 years. In case if a child is institutionalized before 5, he/she is kept in a safe home and is given for adoption. A child could be institutionalized based on an application submitted to the Probation officer by the care giver or by a court case. When submitting an application for institutionalization, supporting documents such as father's/ mother's death certificate, Samurdhi card, Grama Niladhari's (GNs) recommendation for the child, should be submitted.

Before taking the decision of institutionalizing a child, in some instances, 'Family Group Conference' is held where the Probation Officer arrange a meeting with the extended family of the child and facilitates the family to take a decision on the care option for the child. If the family could not come up with a solution or decides on institutionalizing the child, a Case Conference is organized.

A Case Conference is conducted for each child, before the child is institutionalized. The case manager who is working on the case organizes the case conference. The case manager can be PO, CRPO, NCPA. He can decide on persons to be invited to the case conference based on the nature of the case. The invitees for the case could include PO, CRPO, NCPA, Doctors, Legal Officers, Teachers, JMO, Police, Child, Parents, and Extended Family Members.

If it is a court case, until a decision is made based on field reports on investigation of history and case conferences, the child is hosted in a Safe House.

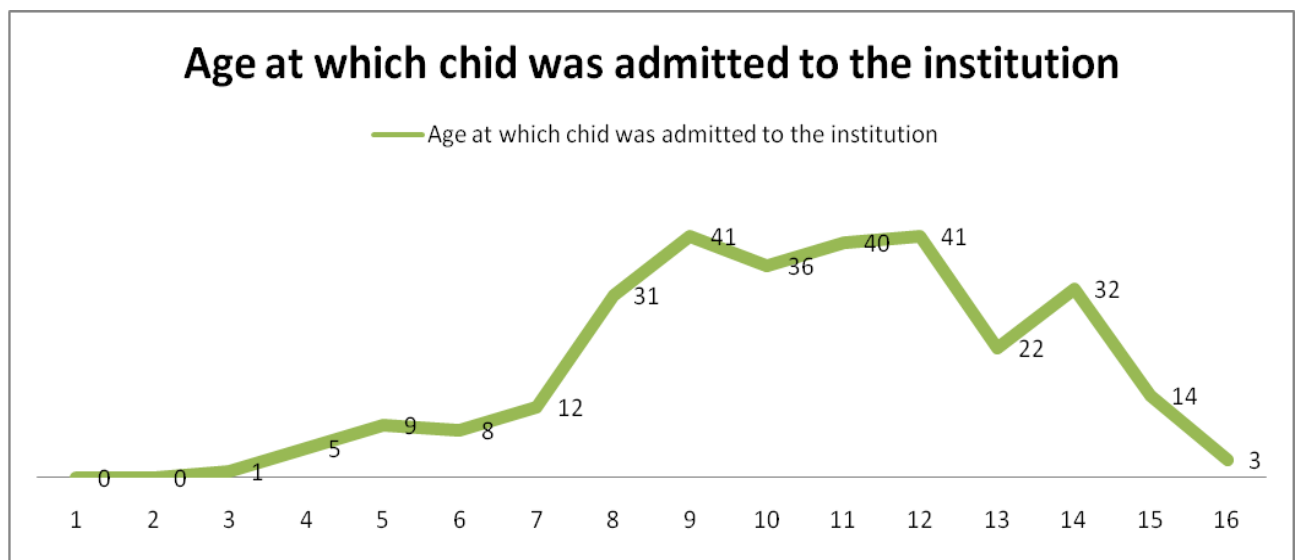
Usually an institution is selected based on children's ethnicity and religious background. In cases where there are no vacancies in institutions where children of the same background are hosted, child is admitted to an institution of a different religious faith or ethnic background.

Before new laws were introduced to increased intervention of the state actors within the procedure of institutionalisation, Children's home managements were allowed to directly identify prospective children for placements in the institutions. At present, the institutions have no authority to request for children or to get children directly and it is a sole responsibility of the department of Probation and Child Care and other line ministries where necessary.

### **1.5 Admission Age & Duration of Stay**

As depicted in figure shown above, the ages of most children institutionalized are between the ages of 8 and 14 years. This could be interpreted as related to the education policy, which states that education of children below 14 is compulsory and to the minimum age of admission of the Voluntary Children's Institutions, is 5 years.

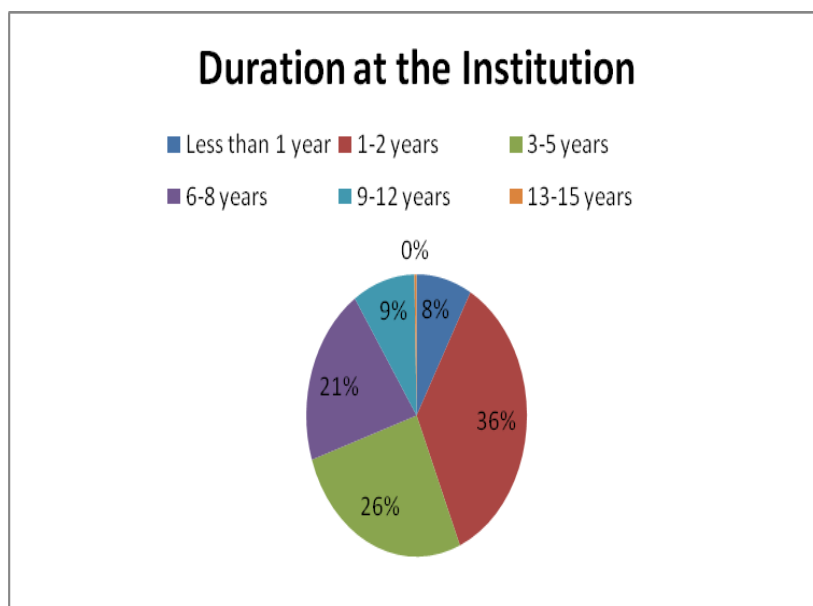
**Fig 1.2 Age at which the child was admitted to the institution**



### **Duration of Stay at the Institution**

Information/data obtained on the stay period of children in such homes shows that 64% of children have been in institutions for more than 3 years despite the fact that the Government regulations state that children shall be allowed to stay in any such institution for only a period of less than three years,

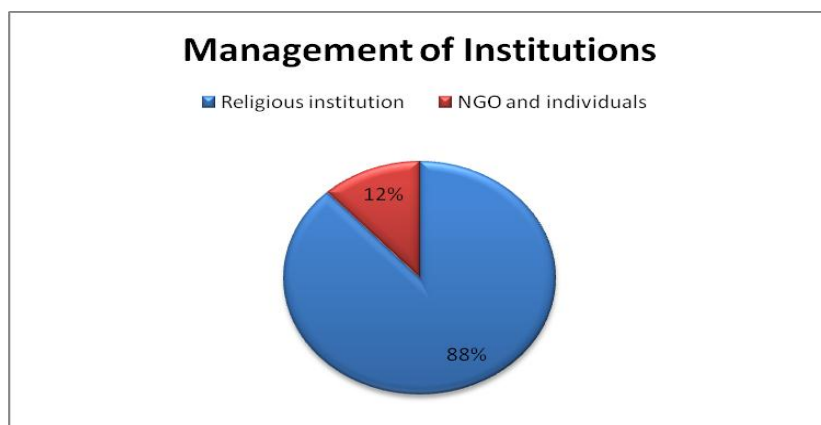
**Fig 1.3 Duration of stay at the Institution**



## 1.5 Management of Institutions

88% of the institutions under scrutiny are managed by religious organisations while only 12% are managed by NGOs and individuals. All Voluntary institutions are registered and monitored by the Department of Probation and Child Care.

**Fig 1.4 Management of Institutions**



## 1.6 Funding for Institutions

Funding for Institutions comes from different sources. It includes funds from the Probation Department, local philanthropists, philanthropists among the diaspora, donations from religious institutions, donations from International and local Non-Government organizations and self generated funds. Generating funds for the institution depends on the networking

and entrepreneur skills of the Head of the institution. Self generated funding could come from various sources, such as, Paddy lands- rent- earned money, home gardening, dairy productions, renting movables.

## **1.7 Monitoring Mechanism**

### **1.7.1 Registering Voluntary Children's Institutions**

The Department of Probation and Child Care services has made it compulsory for child care institutions to register. This was initiated in May 2010. In As registration became compulsory ,institutions which not comply with the stipulated standards had to be closed down. Few of the institutions are in the process of registering

### **1.7.2 Developing a Voluntary Home Convention**

Probation Department of Eastern Province have developed a Draft Voluntary Home Convention, which spells out standards that should be maintained by Voluntary Children's Institutions in the Eastern Province.

### **1.7.3 Voluntary Home Monitoring Team-**

Voluntary Home Monitoring Team (VHMT) consisting of the Probation Officer, Social Service Officer, National Child Protection Officers (NCPO), NGO representatives, representatives of the Mental Health Unit of the Ministry of Health has been newly established to monitor the children's homes.

Assessment of institutions by the VHMT is a very effective measure that has been put in to place to monitor such institutions. VHMT assessment is conducted once in two years. The first VHMT assessment was conducted in 2010. On the basis of such assessment, institutions were graded from A to D. At the end of the assessments the institutions are given a list of recommendations to attend to. The VHMT monitors regularly the progress of the institutions on the basis of those recommendations.

### **1.7.4 Visits by Officials**

- **Visits by Probation Officers**

Probation Officers in the respective Divisional Secretariat Divisions are allocated institutions to monitor regularly. They visit the institutions periodically, but it was observed that the Probation Officers do not follow a uniform schedule to visit institutions.

- **Visits by Police Officers**

Police personnel from the Police Women and Children's desk visit such institutions. Visits by the Police have not been consistent. Such visits have been regular in certain areas while some areas were neglected. The purpose of these visits are to interact with the management and the children regularly in order to ensure the security and safety of children.

- **Visits by National Child Protection Authority (NCPA) Officials**

The NCPA officials seldom pay visits to the voluntary children's homes to investigate matters pertaining to child protection and to collect data for research.

- **Visits by Public Health Inspectors (PHIs)**

PHIs pay visits to voluntary children's homes to evaluate and advise on sanitation, dengue prevention and hygiene issues related to food.

#### **1.7.5 Placement Committee meetings**

The Placement Committee meetings are organized for children in voluntary homes, in order to monitor the situation of each child in the institution. Home Manager, Child, Parent and Probation Officers are supposed to participate at such placement committee meetings. Such meetings held for each child is expected to be conducted once in 6 months but due to difficulties related to logistics they have not been held in regularly.

#### **1.7.6 Internal Management System**

The management systems vary depending on the donor source of funding and the capacity of the management at different institutions. Usually there is a Board of Management for the institution consisting of the matron of the institution and a few financially well established people, social activists and religious leaders. Child Representatives on the Boards is seen as a novel concept that is yet to be experimented by the institutions. There are a few instances where few of the children work as monitors to become members of the sub-committee

that monitors the overall progress of children. Institutional managers maintain good partnerships with school principals to maintain and monitor the progress in education of the children from the institution concerned .

### **1.8 Justification for the Study**

A close perusal of the literature available on institutionalization of children in Sri Lanka revealed that there were no attempts made by scholars to investigate or study the causes of institutionalization of children in Sri Lanka. this research shall therefore fill that lacuna discernible in the literature pertaining to the institutionalization of children in Sri Lanka. it is also expected to contribute to the recent trend of advocating the importance of family care in child development (Amarasuriya & Jayatilaka 2003) In this regard the findings of this study are expected to validate this stance emphatically. This study on the 'push' and the 'pull' factors in the institutionalization of children in Sri Lanka particularly in the eastern province shall therefore be a new addition to knowledge

# CHAPTER TWO

## METHODOLOGY

### 2.1 INTRODUCTION

This study adopts a participatory approach methodology using quantitative and qualitative data obtained through a variety of research methods and statistical techniques. This combination of different methodologies qualifies the study to be considered as a piece of work using the 'mixed method' research methodology. The research design combines survey method (quantitative) with multiple approaches including the case study approach (qualitative).

In order to achieve the research objectives, a multi-stakeholder participatory method of data collection was utilized to obtain the required information for the study. The main component of the research was a survey conducted by administering two structured questionnaires that were designed to capture the relevant detailed information from institutionalized and de-institutionalized children covering the three districts of the eastern province. For closer perusal in the selection of the institutions a cross section of the institutions were taken into consideration through the information obtained from children in the selected institutions and from de-institutionalized children. Triangulation of qualitative data was done with the information provided by parents of de-institutionalized children and the stakeholders at the interviews and focus group discussions.

#### **Objectives of the research**

- To examine the push and pull factors that causes families in the Eastern Province of Sri Lanka to place their children in institutions
- To recommend the required support services for the maintenance of family unity and adequate parental care, to improve reintegration of children, and thereby to reduce the numbers of children entering institutional care

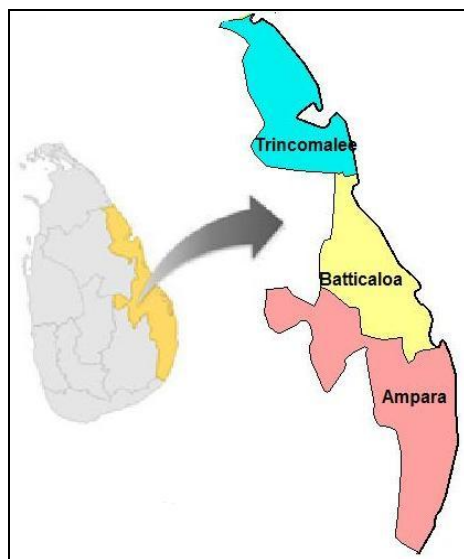
- To obtain the most appropriate information relevant to the research in hand questions were formulated with care. The questions thus formulated were:

### 2.3 Research Questions

- What are the driving factors that ‘push’ children into institutions?
- What are the factors of ‘attraction’ in institutions that ‘pull’ children in?
- What factors encourage families to take their children back?
- How do combined factors impinge on the family decision making process?
- What support facilities are required to strengthen the family unit in order to prevent institutionalization?

### 2.4 LOCATION OF STUDY AREA

**Fig2. 1: Map of Sri Lanka - showing the location of the study area**



#### 2.4.1 DESCRIPTION OF THE LOCATION

The Eastern Province of Sri Lanka comprising of the districts of Trincomalee, Batticaloa and Ampara, is home to a population of 1,460,939 wherein Tamil, Moor and Sinhala account for 40%, 38% and 22% of the population respectively (Dept.of Census & Statistics 2010) The provincial capital Trincomalee is located in the district of Trincomalee. The entire province is currently in the process of returning to normalcy following upon the end to the conflict that spanned a time period of over three decades. The area is richly endowed with

resources that support a diverse economy; Its diverse economic activities include fisheries, agriculture, mining, tourism and the service sectors. As a Province recovering from the armed conflict, social inequalities and vulnerabilities continue to persist trickling down to the most marginalised and vulnerable particularly the children who require immediate attention and care.

There are 71 registered voluntary children's homes and 12 unregistered voluntary children's Homes in the Eastern Province of Sri Lanka. Out of the total number of registered Voluntary Children's homes, 16 were located in Trincomalee, 43 in Batticaloa and 12 in Ampara. Besides these, 3 other homes were located in Batticaloa run for children with disabilities. The total number of children currently living in these homes total 2,177 (May 2011).(Dept. of Probation & Child Care Services 2011)

## **2.5 METHODS OF DATA COLLECTION**

Convenient data collection methodologies were developed to suit the multi-stakeholder participatory approach adopted. The study used both quantitative and qualitative data.. The data collection method therefore included a survey, interviews, focused group discussions, workshops of a consultative nature, and case studies.. Of these except for the individual interviews, and focus- group discussions all other data collection methods were used to obtain the relevant data on both institutionalised and institutionalised children. Further details on the sample survey are given in (table 2.1)

### **2.5.1 SAMPLE SELECTION**

From among the different categories of institutionalised children the study chose to select samples/respondents from among those residing in voluntary children's homes in the Eastern province monitored by the Department of Probation and Childcare services.(see section 1.3.2 for further details on the relevant institutions) Other institutions where such children were institutionalised were the voluntary children's institutions (monitored by Department of Probation and Child Care Services); children in school hostels (monitored by Ministry of Education) and residential homes for children with special needs (monitored by Ministry of Social Services).

**Table 2.1 Data Collection Method**

Data collection method		Ampara	Batticaloa	Trincomalee	Total
Interviews	Stakeholders	15	25	17	57
Workshops	Children in Institutions (Girls)	1	1	1	3
	Children in Institutions (Boys)	1	1	1	3
	De-Institutionalized Children	1	1	1	3
Focused Group Discussions	Key stakeholders	-	-	1	1
	Parents of De-institutionalized Children	1	1	1	3
Survey	Children in institutions	39	63	48	150
	Reintegrated children	39	63	48	150
Case Studies	Children in institutions	5	5	5	15
	Reintegrated children	5	5	5	15

### 2.5.2 The Survey

The primary source from which data were obtained for this study was a survey of 150 institutionalized children and 150 deinstitutionalized children comprising of a total of 300 children. The sample distribution for this survey was based on the proportionate distribution of children's institutions within Districts of the Eastern province. In the selection of samples within each district quota sampling method was used. Quota sampling method as the non probability version of stratified sampling was found to be the most suitable for use within a short time period made available for data collection for this study.

Within the sample selected care was taken to select half the number as females. The survey instrument used was a set of well structured survey questionnaires. In the case of the children of ages between 4 and 17 living in institutions these questionnaires were used to ascertain the reasons for being institutionalized, the human rights encountered by those

children and their own perceptions of being institutionalized. The data obtained from the survey were analyzed and translated using SPSS.

The same exercise was repeated for children between the ages of 4 to 17, who have been de-institutionalized, to identify particularly the impact of the push and pull factors of institutionalization. As in the case of the data collection of the institutionalized children the data obtained on this category with 50 % of the sample being girls were analyzed and translated using SPSS.

All other data collected through other methods of data collection which were largely qualitative, were used as supplementary sources of data to substantiate and supplement the findings from the main survey. The survey methods used to obtain the supplementary data mentioned above were as follows. The main respondents in these exercises were certain key stakeholders and Parents of de-institutionalized children.

### **2.5.3 Individual interviews**

Interviews were conducted with relevant key stakeholders who had connections with the institutionalised/de-institutionalised children from the three districts of Trincomalee, Batticaloa and Ampara. The categories of interviewed officers besides the Probation Commissioner included Probation Officers, Child Rights Promotion Officer, National Child Protection Authority Officials, Officer in charge of Women and Children's Desk at the Police Station, NGO/ INGO officials working on protecting children's rights, institutional staff members. A total of 57 interviews were conducted in the 3 Districts. (See Annexure A for the list of names of persons interviewed).

### **2.5.4 Focus Group Discussions (FGDs) with Key Stakeholders**

Four Focus Group Discussions were conducted mainly to elicit required information from key stakeholders and parents of de-institutionalised children. The purpose was to identify reasons for children being institutionalised, to ascertain child rights situation in institutions, to identify instances of success or failures of de-institutionalising children and identify effective deinstitutionalization ways. Due to time restrictions only one such FGD was conducted for key stakeholders in the district of Trincomalee. The stakeholder categories

represented in these discussions included Child Rights Promotion Officer, Probation Officer, National Child Protection Authority Officials, Officer in charge of Women and Children's Desk at the Police Station, NGO/ INGO officials working on protecting children's rights and institutional staff members. The FGDs conducted for the parents of de-institutionalized children were three in number including one each in each of the districts of the Eastern province

### **2.5.5 Workshops**

#### **With institutionalized children**

A total of six (6) Workshops were conducted with children currently residing in institutions. The purpose was to obtain data on their perceptions regarding the reasons for being institutionalized, current conditions in institutions, children's future aspirations, support needed for de-institutionalization etc. Four institutions were purposively selected from each District in order to capture the diversity among the institutions most effectively. 7 children were selected from each institution. Separate workshops for girls and boys were conducted in each District. . There were a total of 6 Workshops from the three Districts. Child participatory methods were used to extract children's concerns. Tools used at the Workshop included a Mapping Exercise, Problem Bag Analysis and Stakeholder Analysis Diagram.

#### **With De-Institutionalized Children**

To understand the situation of de-institutionalised children separate workshops were conducted with one held in each of the three districts. Information on their situation prior to de-institutionalization The sample for the workshop for was purposively selected from the de-institutionalized children's list, considering age, gender and the type of institution they used to live. 14 children participated in each workshop. With 3 Workshops held on each from the three Districts. Child participatory methods were used to extract information and the children's concerns. Tools used at the Workshop included an Essay on 'My Experience in an Institution', Problem Bag Analysis and Stakeholder Analysis Diagram.

### **2.5.6 Case studies**

30 case studies were conducted with 15 currently residing in institutions and 15 children who have been de-institutionalized. The age group of the sample was between the ages of 4-17. 50% of the sample was girls. Case studies included institutionalised/deinstitutionalised children, parents/ caregivers and siblings of the child.

## **2.6 DATA ANALYSIS**

Quantitative data were analysed using SPSS software. The field research team was mobilized to code and enter data to SPSS. Qualitative data were analysed manually by recording, coding and sorting based on types, classes, sequences, processes, patterns, or wholes.

A two day data analysis workshop was held in Trincomalee for the research team to analyze the quantitative and qualitative data and frame recommendations.

## **2.7 LIMITATIONS OF THE STUDY**

The main constraint of the study was the limited time allocated for the study compelling the research team to hurry through the study to complete in two months. This is reflected in the prevalence of a high percentage of orphans in the sample and the outcome of the study. The time factor impinged on the size of the sample limiting the selection to the children in Voluntary Children's Institutions managed by the Probations Department. A bigger sample would have certainly yielded a more meaningful outcome. School hostels managed by Ministry of Education, Safe homes, Receiving homes, by Social Services Department could have also been included to arrive at a better outcome.

The timing of the field work in the study also was not conducive to work with a good representative sample of children because in April 2011, the time allocated for field work, was vacation period for most children which limited the categories of children who could have been included in the sample. The possibility of certain amount of bias in this study also seems possible because the children considered for the sample in the survey with

deinstitutionalised children and the workshops with de institutionalised children were already linked with Save the Children in Sri Lanka programmes and were de institutionalised under a project conducted by Save the Children in Sri Lanka. The parents of de institutionalised children were also selected from among the families of de institutionalised children under the above project

# CHAPTER THREE

## FINDINGS - I

### THE ‘PUSH’ FACTORS OF INSTITUTIONALIZATION

#### 3.0 INTRODUCTION

This chapter identifies, as per findings of the survey, the reasons or the ‘push’ factors that placed the children in institutions. In all the cases of the survey sample it became clear that there were more than one reason responsible for the institutionalization of the children. The reasons for institutionalization as stated by the respondents of the survey are classified under appropriate headings in this chapter. The classifications, as presented on the basis of their importance, are arranged as follows: relationship difficulties, poverty, education, protection, natural disaster, conflict, violence against the child, need for special care, social status, discipline, security, HIV/AIDS, trafficking, prosecution, and loss of documentation.

#### 3.1 MAJOR REASONS FOR INSTITUTIONALIZATION

Figure (3.1) presented below gives a summary of the responses at a glance, the reasons for institutionalizing children in the Eastern Province as a whole. This graphical representation shows that the largest percentage ( 36 %) of the children are institutionalised due to relationship difficulties in the family while Poverty (29%) , education (18%) and protection (12%) are shown to account for the next most important factors that caused the institutionalization of children

**Figure 3.1- Reasons for Institutionalizing Children**

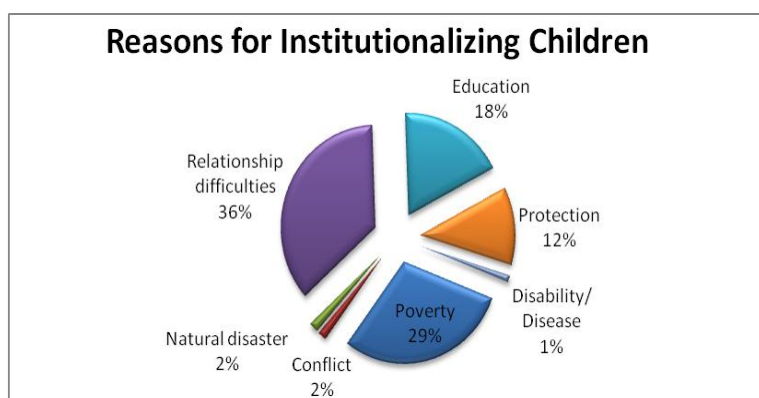
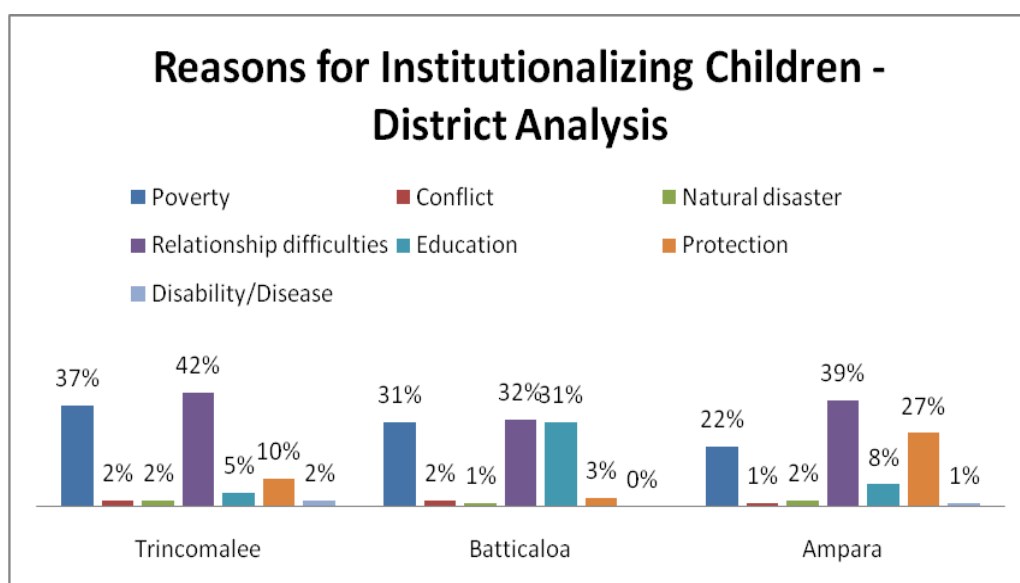


Figure 3.2 depicts a breakdown of the causative factors by districts. Disaggregated information presented district wise also reveal the importance of relationship difficulties as the primary cause for institutionalising children in all three districts of the province. Though Poverty does not come up as an important causative factor in the districts of Trincomalee and Ampara, it remains significant in the district of Batticaloa. Relationship difficulties however remain as the major factor for the institutionalization of children in all districts. In the area of education Batticaloa district registers the highest (37%) showing a significant trend in the institutionalization of children in the district. In the district of Ampara protection has scored the second highest response as a reason for the institutionalization of the children.

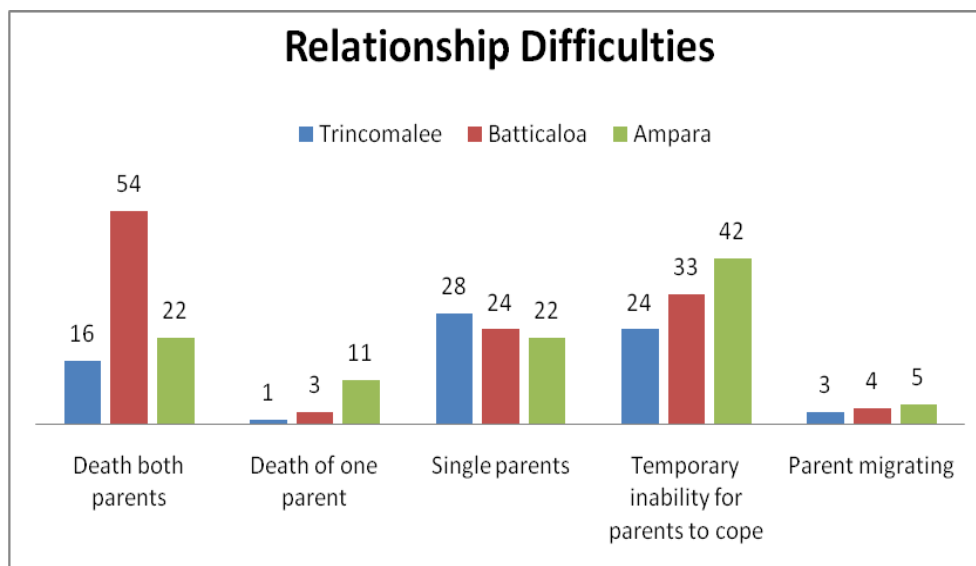
**Figure 3.2- Reasons for Institutionalizing Children by Districts**



### 3.2 ISSUES IN FAMILY RELATIONSHIPS

In this study issues in relationships particularly within the family, have emerged as a major cause for the institutionalization of children in Sri Lanka. . The relationship difficulties experienced within families included loss of both parents, loss of one parent, divorce, re-marriage of one or both parents, mental or physical illness of a parent and too many siblings . The diagram given below presents the district wise distribution of the number of children institutionalised due to relationship difficulties. The difficulties in relationships are presented in the said figure to depict the situation under the primary reasons identified such as the loss of both parents, loss of one parent, temporary inability for parents to cope and parent migrating.

**Figure 3.3- Causes of Relationship Difficulties**



When difficulties in relationships are experienced in the immediate family, members from the extended family normally step in to take charge of the situation . In the case of the families under study here the limited capacities of the extended families particularly in finances and the lack of commitment have not been of any help to those who encountered such difficulties. Following statements corroborate the situation regarding the relationship difficulties that caused institutionalization of children-

‘My daughter and son-in-law lost their lives due to the Tsunami in 2004. I was left with 3 grandchildren the eldest boy was 8 and the youngest girl was 4. I don’t have a way of looking after them. I don’t have a regular

means of income and I am suffering from asthma and chest pains. I had no other option than institutionalizing all 3 children.'

Grandmother, Batticaloa, Under 'Parents of De-institutionalized children'

'My husband left me and my child for another woman in 2008. Then my son was only four years old. I have been to school only upto grade 4. I didn't have any form of income. We lived in a small hut. As I have to make a living I decided to work as a domestic helper. I got a job in Anuradhapura. They pay me Rs.5000 per month and provide accommodation. Till my son was five years, I kept him at my mother's place. Then decided to institutionalize him.'

- Mother, Ampara

### **3.2.1 DEATH OF ONE OR BOTH PARENTS**

In the case of an orphan, institutionalization was seen as the best option by most members of the extended family and by most of the interviewed key stakeholders as well. The reasons given include, the inability of the extended families to bear the burden of another child financially as well as the inability to allocate time for the care and protection of the child.

As mentioned in the limitations of the study, the sample number of children in the study included a significantly high number of orphaned children because the survey was conducted at a time when it was the school vacation period for the children. In this sample 92 children out of a sample of 300 (figure 3.3/ 3.4) were institutionalized due to demise of both parents. This number is considered significant as it reflects the fact that most orphaned children do not have any close member available from their extended family to visit even during their school vacation. The district wise distribution of the orphans in the sample institutions is shown in table below

**Table 3.1- Number of children with both Parents dead**

District	Number of children with both parents dead
Trincomalee	16
Batticaloa	54
Ampara	22
Total	92

### **3.2.2 ABANDONMENT**

Abandonment occurs when the primary caregiver of a child withdraws from his/her responsibility towards the bringing up of the child. This could be due to various reasons such as family separation, sickness or disability of the primary caregiver or family member, too many siblings in the family and both parents going out of home for employment. A mother's statement given below illustrates such a case

'I have 2 daughters, Madu (15 years), Ama (8 years).I got separated two years ago. The house I lived, agricultural land and the cattle belonged to my husband. After our separation my husband requested us to leave the house. Now I live in a small rented room. I don't have a steady source of income. I find it difficult to provide an education and to protect my 2 girls. When I go for casual labour work, my girls are all alone in our small rented room. I had no choice but to institutionalise my children to safeguard their future.

### **3.2.3 SINGLE PARENTS**

61 children out of the 300 in the sample have been institutionalized due to the parent being single at the death of one parent or separation or divorce of parents. In cases where the single parent was the mother, the child has been institutionalised either due to the inability of that parent to support that child economically , or as a result of an affair with another man.. In cases where the single parent was the father, the child has been institutionalised due to the inability of the father to care for the child during working hours, and/or addiction to alcohol and/or having a relationship with another woman.

**Table 3.2- Reason for being Single parent and number of children with single parent**

	Reason for being single		Total number of children with single parents
	Death of one parent	Separated/ Divorced	
Trincomalee	26	1	27
Batticaloa	10	3	13
Ampara	10	11	21
Total	46	15	61

There is a significant trend in the category of separated/ divorced parents in all three districts. Parents of 46 children out of 300 are either separated or divorced. (see table 3.2)

#### **3.2.4 TEMPORARY INABILITY OF PARENTS TO COPE**

Parents experiencing a temporary situation wherein they are unable to cope with stresses have resorted to institutionalising the child/children. Out of the sample, 99 children have been institutionalized due such inabilities. Those temporary inabilities were related to events like the death or separation of a parent, sickness of a family member and/or indebtedness of primary caregivers etc.

In instances where the loss of the breadwinner due to various reasons such as family separation, death and temporary or permanent disability occurs the parent who remains abandoned, which in most occasions is the mother, becomes economically active which often make her more vulnerable to become victimised in the process. When such instances occur in larger families, the older children, or the eldest in the family is compelled to take up the role of the breadwinner. Such situations provide adequate justification for the institutionalisation of those children living in total deprivation due to reasons often beyond their comprehension. In such instances the availability of such facilities to institutionalise the children is a blessing. Certain other instances wherein the breadwinner is arrested by

the police or detained by the Department of Probation and Child Care Services, the other children in the family become marginalised due to lack of income

Temporary inability of the parents/caregivers to cope with situations also occur due the fact that most parents are engaged predominantly in agricultural/fisheries related pursuits which are seasonal by nature. The parents of most of these children are seasonal farmers, farming labourers, fishermen or labourers in fishing related work. The income of such labourers are very much dependant on the environmental condition and marketability of their produce. They are rarely accommodated by the formal banking and finance system, to obtain loans. This makes them reach out to the local village vendors and sometimes they resort to work on half share basis which invariably entraps them in the vicious circle of poverty. Thus many of them find themselves living in abject poverty not being able to support the children. Such situations have resulted in dropping out of school and engaging in agricultural/fisheries related activities as child labour.

### **3.2.5 PARENT MIGRATING**

The main cause for the parents migrating was reported as poverty. Many of them went in search of better employment opportunities. Following such migration the family dynamics changed to result in children living without protection exposed to unwanted elements. No member of the extended family system was prepared to take charge of those children resulting quite often in the institutionalization of the children concerned. The statement given below substantiates this situation

‘Vinusha is 17. Her father died and mother migrated to work as a domestic worker in Kuwait 5 years ago to make ends meet. Since the day she went abroad there has been no communication with the child and the mother. Once a month, Vinusha’s mother sends money to her elder sister for their expenses. Elder-sister is married and has a 2 year old child. She is not in a position to take care of Vinusha.’

Another consequence reported following the migration of the parents was the development of relationship difficulties within the families. The children of such parents with no protection often become vulnerable to many sex related threats from members within the family and others in the community. They become easy prey to perverts and abusers. In

many instances the person/s responsible for the abuse are said to be close relatives of the family or neighbours. The most disturbing trend that was reported was incest; which had been identified as one of the reasons that had lead to the institutionalisation of children in the eastern province. These situations demonstrate the extent to which children without parental care suffer both physically and psychologically

### **3.3 POVERTY**

Poverty was seen as the determining factor in institutionalization as it pervades almost all the push factors discussed in this chapter. People who are in poverty lack education or access to information which invariably leads them into conditions of abject poverty over time. Therefore, these peripheral areas from where most of the children in institutions come continue to remain backward and caught in the strangle hold of the vicious cycle of poverty. Poverty was seen as the determining factor in institutionalization as it pervades almost all the push factors discussed in this chapter. People who are in poverty lack education or access to information which invariably leads them into conditions of abject poverty over time. Therefore, those peripheral areas from where most of the children in institutions come continue to remain backward and caught in the strangle hold of the vicious cycle of poverty. The cycle of poverty defined as a phenomenon wherein poor families become entrapped in poverty with limited or no resources Therefore poverty stricken people experience disadvantages as a result of their poverty, which in turn increases their poverty and this leads them into the downward spiral of deprivation As a factor with a multifaceted nature poverty pervades all aspects of life Protection

### **3.4 EDUCATION**

One of the major causes for institutionalizing children is to provide education. Schools with good facilities are available in large numbers in the towns. The situation in the schools in the remote areas however remain inadequate and the children in those areas are compelled to attend such schools. Issues related to lack of facilities in remote schools include, lack of teachers, lack of infrastructure facilities including school buildings, toilets, electricity, limited desk and chairs, limited opportunities to participate in extra-curricular activities, limited educational resources such as Science lab, computers, library. Many rural schools do not have classes up to G.C.E. Advanced level. In cases where they conduct G.C.E. A/Level classes it is extremely difficult and therefore rare to offer the subjects in the Science and Math streams. The selection criteria of students to schools for grade 1 under

government circulars consider the distance from school to home and this makes it impossible for children from the periphery to enter well established well equipped schools in the urban areas. .

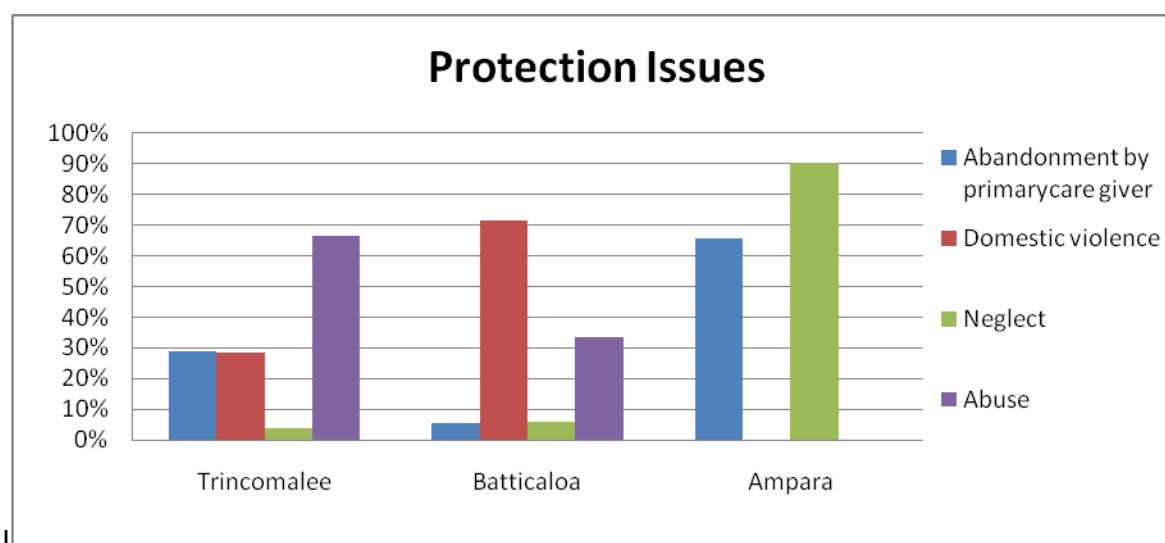
Children in remote villages also encounter problems related to transport as the village schools are located in far away locations with limited and irregular transport services available. As such there have been instances of children travelling over 7 kilometres to reach their schools and instances when some have been attacked by wild elephants while walking to school. Under such circumstances institutionalisation of children in acceptable institutions in town areas is seen as a blessing. Further more, once a child is institutionalised, finding placements in schools is done by the institution itself as caretakers in all aspects including legal responsibility. As most of the institutions have established direct/indirect links with the schools in their neighbourhood guaranteeing quality education to such children was a simple and effortless undertaking

In addition the facility available to attend tuition classes from such institutions located in urban areas have also become additional factors. As attending tuition classes has become a norm for G.C.E. Advanced level and G.C.E. Ordinary level students most parents and children depend on tuitions to pass examinations. As the availability of a large number of places conducting tuition in the urban areas the parents and children alike are attracted to the institutions in urban areas..

### **3.5 Protection**

Protection issues that lead to institutionalization include domestic violence, neglect, abandonment by the primary caregiver and abuse. Besides these the exploitation of children (which includes child labour, i.e., child soldiers, street children, child trafficking) and child mothers) are all considered as issues related to protection but they were not reported as push factors that had led to the institutionalisation of children in the study, as the selected sample did not include institutions that host such children.

**Figure 3.5- Protection Issues**



The situation regarding protection of children as depicted in Figure 3.5 reveals that the dominant issue in this regard varied among the three districts within the eastern province. The dominant issue identified in this regard in the Trincomalee district was abuse while Batticaloa depicted domestic violence and Ampara district abandonment by the parent or primary carer.

### **3.5.1 DOMESTIC VIOLENCE**

Domestic violence was reported as one of the major reasons that had led to the institutionalization of children in the district of Batticaloa. The types of domestic violence that these children experienced include witnessing regular fights between parents, and violent behaviour (mostly by the father) due to the influence of alcohol. Such circumstances had traumatised the children, and taken its toll on education and overall development of the children. On most occasions, the culprit for causing domestic violence is the father and/or other adult males in the families. As many instances of such violence were connected to the male members in the family. This increased the vulnerability of the children, particularly the girl child. Girls were therefore given priority in the institutionalization process.

### **3.5.2 NEGLECT**

Neglect occurs when the caregiver is not giving the required attention to the child, particularly in the development of the child in all spheres including health, education, emotional development, nutrition, shelter and safe living conditions. Neglect of the child is

closely interrelated with relationship difficulties of parents. In the Ampara District major cause for institutionalization based on protection issues was reported as neglect. The details related to such situations are illustrated by the narratives given below.

‘My mother has gone abroad and my father has re-married twice. I was living with my grandparents since I was three years old. My grandmother passed away last year. Afterwards my grandfather decided to put me into the institution as he could not look after me.’

Institutionalized girl (8 years), Batticaloa

‘My parents are divorced and both are married again. They sent me and my brother to our paternal grandparents house. I was feeling very sad. I could not eat, sleep properly or do any work in the new school. My grandparents decided to send me into a children’s institution.’

Institutionalized girl (9 years), Batticaloa

Issues of protection arise in the case of the children of step mothers and step fathers.. The Step parents who live with their step children under the same roof are often very neglectful about their step children. Over time such families, with biological children and half children become divided and/or polarised and are differently treated. Under such situations, the biological parent of the half son or half daughter is compelled to send them into institutions for security.

### **3.5.3 ABUSE**

The cases of child abuse were from institutionalized in Government Sponsored/ managed Safe Houses, Detention Centres, Receiving Homes, Certified Schools and Approved Schools. Within the sample selected it was observed that many were from the districts of Batticaloa and Trincomalee, It seems highly possible that those instances of institutionisation iblrThis situation may be interpreted to say the instituionsalisation of those affec5ed children may have been a consequence such incidents.mean that It coul be It therefore seems highly posibe could be itetpreted On this premise This could be inferred inered to illustrating the fact that institutionalisation of children had been a consequence of such happenings. . On

most occasions culprits of child abuse have been close members of the family. Several instances of incest have been reported where the children have been abused by the step fathers themselves. It was evident that most of the children who were abuse victims have lost their mother or were living with other relatives to become victims of abuse perpetrated by close relatives and neighbours. As mentioned under neglect, children living with step mothers and step fathers become liable to such abuse and are eventually institutionalised. Of recent abuse and neglect POVERTY WAS SEEN AS THE DETERMINING FACTOR IN INSTITUTIONALIZATION AS IT PERVADES ALMOST ALL THE PUSH FACTORS DISCUSSED IN THIS CHAPTER. PEOPLE WHO ARE IN POVERTY LACK EDUCATION OR ACCESS TO INFORMATION WHICH INVARIABLY LEADS THEM INTO CONDITIONS OF ABJECT POVERTY OVER TIME. THEREFORE, THESE PERIPHERAL AREAS FROM WHERE MOST OF THE CHILDREN IN INSTITUTIONS COME CONTINUE TO REMAIN BACKWARD AND CAUGHT IN THE STRANGLE HOLD OF THE VICIOUS CYCLE OF POVERTY. there is now great recognition of the damage that can be done to a child early in its life by abuse and neglect

### **3.6 THE NEED FOR SPECIAL CARE**

#### **3.6.1 DISABILITY**

Children with disability are seen as a burden for families as they have to invest more time and resources towards the wellbeing of such children This limits the chances of the healthy children further to access a sizable proportion of the resources. Therefore, children with disabilities are sent for special care in order to safeguard the needs of those children with disabilities and also attend to the interest of the other children if any. On the other hand, there have been instances where the disabled children have been managed at home while the healthy children are left to be managed by the institutions due to the lack of special care providing facilities in the area of residence In cases of disabilities children are admitted into Homes for Children with Disabilities. These homes are monitored by the Social Services Department and the respective Social Service Officers at the District and Divisional levels.

#### **3.6.2 PSYCHOLOGICAL NEED**

Due to stigma associated with psychological disorders and limited understanding about such disorders, the survey could not adequately cover children admitted due to psychological

needs Only one child out of the total sample reported he was institutionalized due to psychological disorder.

### **3.6.3 DISEASE/ AILMENT**

Disease or ailments of care givers or other extended family members (i.e., grandparents, uncles, aunts) resulted in children being institutionalized. When certain members of the household need the special full time attention of the primary care giver the children are institutionalised where care could be obtained. This is discussed as an issue coming under the area of temporary inability of parents to cope.

### **3.6.4 JUVENILE DELINQUENTS**

Juvenile delinquents are cared for at the institutions managed by the government and are usually not sent to voluntary children's homes through court orders. The definition of "delinquent" and a "victim" needs to be further clarified in order to place those children in specialised institutions depending on the nature of offence, victimisation or vulnerability. At the moment, victims of abuse, violence, neglect and exploitation are placed in remand homes, certified schools, receiving homes, detention homes, national training and counselling centre and at the approved school along with delinquents.

## **3.7 SOCIAL STATUS**

Child care institutions functioning in a competitive world make every possible attempt to provide attractive services to lure their prospective clients/service users towards their institutions. In such a situation fair amount of propaganda is also undertaken. With such a business outlook such institutions manage to attract children from affluent homes to earn that status in society. Once thus established these institutions continue as reputed institutions in quality education and discipline

Institutionalizing children in such institutions has become a status symbol of families which could afford. As opined by some parents;

'One of our relatives was in the same institution who studied well and was selected to the University.'

- Mother of a De-institutionalized Child, at the FGD in Batticaloa

‘When we send our children to institutions, respect for our family from other villagers also increase.’

- Mother of a De-institutionalized Child, at the FGD in Akkaraipattu

Children from such institutions are looked up to by other children and neighbours due to their obvious educational development and personality development gained from well equipped, regimented institutions. This acquired positive social status gained by institutionalised children impact on the neighbours to consider institutionalisation of their children for better education and quality development of their personalities.. Such instances has a chain reaction in the neighbourhood leading to the institutionalisation of more children from the same neighbourhood. This is discussed further under pull factors of institutionalisation.

### **3.8 DISCIPLINE**

Many parents felt that institutionalization was the best option to discipline their children, which included training in good manners, training in speech ,and social graces that include eating manners/habits, respecting adults, cleanliness and associating with friends etc. Children who were less obedient and were uncontrollable at home became prospective inmates/members of such institutions because children admitted to such institutions are expected to work according to a time table and respect the rules and regulations. Disciplinary action is taken against those children who fail to adhere to those conditions

### **3.9 SECURITY**

During periods of armed conflict in the Eastern Province of Sri Lanka many children were institutionalized for security reasons. As discussed in section 3.10 Conflict, institutionalization was considered as a facility that ensured the security of children orphaned or lost one parent, and displaced children and also as a safeguard against enforced recruitment. Although there are no security threats due to conflict currently, these children continue to remain in the institutions.

Many of the girl children continue to remain in institutions for security due to the lack of care available at home, for being an orphan, for being a child of a single parent, and in instances when both parents have to engage in economic activities outside the home,

### **3.10 CONFLICT**

The protracted conflict between the LTTE and Sri Lankan Army that spanned for over 30 years, impacting mainly the Northern and Eastern Provinces of Sri Lanka has led to the institutionalization of many children for rehabilitation. The conflict affected children who have been institutionalized may be categorized as child combatants, orphaned children, single parent children and displaced children. Most of the child combatants who were institutionalized in rehabilitation centres have been re-united with their families eventually.

Children who lost one or both parents due to war or those children who were displaced and were living in Internally Displaced Persons (IDP) camps were institutionalized due to the lack of adequate care.

It is interesting to note that only 2% of the children in the sample saw conflict as a reason for them to be institutionalized. This could be because of the child's limited comprehension of the larger scenario of the conflict and its aftermath. It may also be inferred and interpreted as a result of the change of purpose on receipt of funds from the original request to rehabilitate disaster affected victims to institutionalise poverty affected children..

### **3.11 NATURAL DISASTER**

Eastern Province is prone to natural disasters. The Tsunami of 2004 and regular floods in the area have caused many families to lose lives and assets.. Despite the fact that natural disasters led to increased institutionalization of children due to loss of assets and family members, as an immediate aftermath to the devastating impact of those calamitous events many parents had apparently taken their children away from the institutions.

Similar to the numbers of conflict affected in the sample, children affected by natural disasters too accounted for only 2% of the sample which is significantly low. Again this might be a reflection of how the institutions have marketed and how they have absorbed children.

### **3.12 HIV/AIDS**

HIV/ AIDS although considered as a serious cause for institutionalization in many countries, in Sri Lanka it was not evident as a serious cause for institutionalization.

### **3.13 TRAFFICKING**

According to the UN Convention “Child Trafficking” is said to be a scenario that involves three essential aspects; movement of children, for exploitation, willingly or unwillingly (UN Convention- 2000). Considering the above definition children being institutionalised due to the fear of forced recruitment by militant groups to engage in armed conflict can be cases of vulnerability in terms of the possibility towards trafficking.

### **3.14 Lack of Documentation**

Lack of documentation has been a problem to the children and their parents in the eastern province. A number of children who did not have their birth certificate, were not allowed to sit examinations in schools. This problem was very much related to the lack of parent’s certificate of marriage due the practice of not registering marriages in those villages. However this lack of documentation was not seen as an obstacle to the institutionalization of children as children without such documentation were institutionalized as the institutional management were in a better position to negotiate with the School management to ensure at least child’s basic education.

### **3.15 Interventions**

Religious institutions have sent their missionaries into the villages to identify children with vulnerabilities that could be absorbed into institutions. For this purpose, parents have been offered incentives ranging from a simple cash grant or buying groceries to building a house by such missionaries.

Although there is a set procedure that needs to be followed in order to institutionalize a child, managements of institutions, mainly some of the faith based institutions send their agents to the field to induce parents to opt for institutionalization and to guide them through the application process.

It is alleged that there have been occasions where certain institutions have been able to obtain registration despite their non compliance with the requirements of minimum standards by pressurizing and coercing the authorities through known officers influenced by the right political and other high level administrative connections

Although monetary bribing of officers by institutions was not observable it is alleged that certain strategically placed resource persons with the right connections are paid comfortably at workshops organized by some NGOs connected to institutions.

### **3.16 CONCLUSION**

This chapter outlined rather comprehensively the different types of factors that led to the institutionalization of children. The presentation also helped to highlight the fact that normally a combination of factors cause the institutionalisation of children with one factor functioning as the immediate causative factor. This aspect is brought out by the children when they are asked the reasons for institutionalization. They usually identify with the most immediate reason, such as being an orphan, parent's divorce, mother migration, for education and not relate to the macro issues such as conflict, natural disaster which affected the family situation

Poverty was identified as an all pervading factor influencing all the other reasons for institutionalization. It could therefore be interpreted to say that if the underlying cause meaning poverty, for institutionalization could be resolved all other issues would get resolved eventually.

Although the need for special care and child protection are major reasons for institutionalization, the sample selected did not cover adequate number of children from all relevant categories as the sample was limited to the Voluntary Children's Institutions in the Eastern Province monitored by Probations Department. Children with special care needs are looked after by institutions monitored by Social Services Department while children with child protection issues are mostly housed in safe houses, certified schools, receiving homes, detention homes and approved schools.

# CHAPTER FOUR

## FINDINGS II – THE ‘PULL’ FACTORS OF INSTITUTIONALIZATION

### **4.0 INTRODUCTION**

The previous chapter looked into the possible factors, referred to as the push factors, that encouraged people to institutionalise children into children’s homes; This chapter takes a close look at the pull factors that supported the driving force that pushed children towards institutionalization in order to work out the best strategy for the well being of those children who are in need of care. The push factor involves a force which acts to drive people away from a place and the pull factor is what draws them to a new location

Among the factors that attract children and/or their parents or caregivers towards children’s homes; access to basic needs, quality education, personality development, protective environment, access to an environment in which friendships and associations develop and access to vocational training remain important. Negative strategies used by institutions in order to keep children in institutions through systematically forcing children out of their homes, coercing children or directly forcing children to stay longer in institutions also support the attracting force of institutions.

Running children’s homes has developed into lucrative business ventures attracting prospective business minded persons to explore such possibilities. Availability of funding avenues for the institutionalisation of children has been a very important factor in this regard. Therefore, an estimation of the available resource inputs, the strategies adopted by children’s institutions to mobilise resources to ensure the sustainability of their institutions of care run for the children are also analysed in the chapter.

#### **4.1 MAJOR REASONS FOR BEING IN INSTITUTIONS**

Once a child enters an institution, there are many reasons for that child to continue to remain in those institutions (Figure 4.1). 69% of the children in the sample who are in such institutions believe that their primary reason for being in institutions is education which qualifies as the main pull factor. 14% remain in institutions because they are provided with facilities that their parents cannot afford. 7% of children in institutions remain as they prefer the institution instead of their home. This significant proportion of the children attracted/pulled by the institution seemed to prefer the institutions in place of their homes because of the better facilities provided. The development of hostile environments in some parental homes contributed to this attraction/pull of the institutions. Although poverty is stated as one of the main push factors leading to institutionalisation of children, only 4% of the children in the sample see poverty at home as a reason for them to remain in the institution.

#### **4.2 EDUCATION**

Access to quality education made available to those institutionalized children came out as the most important pull factor that attracted those children and kept them in those institutions. The institutions under consideration besides providing access to formal education also provided the opportunities for those children to participate in vocational training while being engaged in formal education even after completing their secondary education. Some institutions continue to support University education to those institutionalised children who gain admission to Universities.

##### **4.2.1 Schooling**

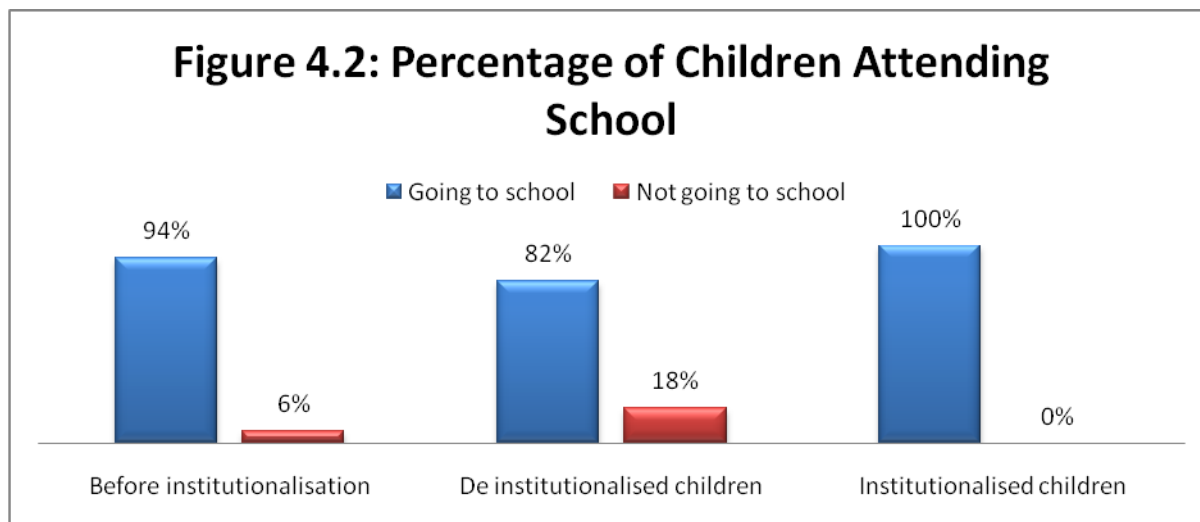
Although the concept of 'education for all' is adhered to by the state,, many in the rural villages do not have access to reasonably well equipped schools. To ensure access to education and/or quality education, Institutionalization has come to stay as an important entry point for the disadvantaged children. The survey indicated that 6% of the children in the sample who dropped out of school had returned to quality education following institutionalisation. (Figure 4.2) The children who hardly enjoyed schooling in inadequately equipped schools in remote areas were pushed out to access quality education in reputed

government schools. This is an instance where the push and the pull factors worked simultaneously to the benefit of some of those children.

The reported instances wherein children had dropped out of schools when de-institutionalised underscore this finding. Those children who dropped out did so when they were made to attend schools that did not have facilities similar to those that they were accustomed to during institutionalisation. Some preferred to get married and be employed. The fact that those children had passed the age period of 15 years specified as the upper age limit for compulsory education helped them to move away from education. This situation raises a few questions and one such question is; Are these students denied their fundamental right to quality education?

The efficiency displayed by most institutions in this regard seemed to work as a strong pull factor drawing the students from far away places into their fold. Managers of institutions have apparently contributed to the pull exerted by the Voluntary children's homes. They are said to be resourceful enough to work out the admissions of the institutionalised children to highly resourced schools in close proximity to their institutions. These institutions had apparently cultivated and maintained close links with the well equipped schools in the neighbourhood. The interest shown by such managers towards the progress made by the said children, at times, going to the extent of arranging tuition classes for those who needed them, needs to be investigated further to ascertain the reasons for such moves. Whatever the reason, be it profit or concern for the development of those children, these institutions have grown into powerful magnates pulling the children and/or attracting the caregivers to institutionalise those children in their respective institutions.

**Fig 4.1 Percentage of children Attending School**



#### **4.2.2 Tuition**

All the institutions in the sample encouraged tuition classes. Some institutions offered such facilities free. Some gave the choice to the children with no limit placed on the number of classes they could attend. These institutions also provided the opportunity to children to choose to attend additional subjects areas like drama, theatre, dance, computer, cookery, karate, which were outside the subject areas they needed to complete in their formal education. Some institutions arranged for in-house held tuition classes and made them compulsory offering the choice of going out to classes when needed.

#### **4.2.3 Access to information, TV, internet, libraries**

At present many homes provide children with access to information through the radio, and television (Figure 4.3) Many children schooling from home continue to rely on the schools for information and knowledge. But children attending least equipped schools in the rural areas do not have access to quality information and knowledge. Televisions, particularly the personal TVs, are hard to come by in the peripheral villages allowing children to watch TV with neighbours who control the choice of programmes to watch.. The children concerned had expressed their disillusionment in this regard . Similar situations arise regarding the use of computer facilities of friends and neighbours. The statements given below endorses this finding

‘At home we had to go to the neighbour’s house to watch TV. Whereas In the institution we have a TV. Although the programmes we can watch and the times are determined by the Matron, we are given a chance to watch TV daily.’

- Boy child in Institution, 13 years, Kattankudi

‘Before coming to the institution I have only heard about the ‘Internet.’ I didn’t know how to use it and what it is used for. In our computer class at the institution we are taught how to surf the net. Now I know how useful internet is. It is a way of connecting us to the world.’

- Girl child in Institution, 15 years, Ampara

Observations of some informants of the study have revealed that many of these children’s homes provide access to a diverse range of sources of information including the internet and computer based knowledge. Institutionalised children are provided with facilities to access libraries in institutions and schools in their neighbourhood. Such children themselves decide on the programmes to watch on TV, under the supervision of caregivers to control the content being watched to make them more child-friendly and education oriented. There are many institutions at which children could access to computer and internet facilities.

#### **4.2.4 Facilities for studies**

Children in institutions are provided with more space, peaceful environment, encouragement, monitoring and better facilities for education. In contrast, children at homes find it difficult to study due to crowded/congested houses with limited space / room for studies, frequently disturbed by neighbours least concerned about encouraging education. Added reasons like having alcoholic parents resorting to frequent domestic violence result in disturbed minds, least conducive to studies and the absence of any monitoring by primary caregivers combined with all pervasive factor of poverty manifested in the form of hunger dissuade children from educational pursuits..

In contrast most institutions follow strict time tables making it compulsory for the children to study at least for a few hours a day. Most of the institutions provide each child with at

least a chair, desk and a drawer /locker to keep their books and stationary in place. This is endorsed in the following statement

‘At home we don’t have electricity. We have only one all-purpose room in the house, which is shared by all the six members of my family. It is very difficult to study at home. My father comes after consuming alcohol and starts a fight with my mother almost daily. My younger brothers shout at me saying they want to sleep and to switch off the lamp.’

- Girl child, 16 years, Batticaloa

#### **4.2.5 Vocational training**

The custom to arrange to send inmates to Vocational Training programmes is practiced in many institutions. Local NGOs and INGOs support the organization of such vocational training programmes for institutionalized children.

However, many of the training programmes offered by the training institutions were found to be obsolete with many areas not covered in the programmes. This has affected the demand for certain courses. Furthermore there was a lack of networking among the vocational training institutions.

### **4.3 PERSONALITY DEVELOPMENT**

#### **4.3.1 Discipline**

Parents see institutions as a place where their children could be disciplined. Most institutions have time tables, children have to follow rules and regulations of the institution and good habits such as way of eating, arranging the belongings, participating in religious worship, respecting the adults, disciplinary language is taught.

The above statement gives a positive as well as negative viewpoints of institutionalisation and disciplining. Positive aspect is that children are made to become more independent and independent of their decision making. Negative aspects of disciplining of children is discussed under issues of institutionalisation.

### **4.3.2 Grooming**

The institutionalized experience can change children's personality. They are taught to take responsibility, to be accountable, to look after personal hygiene and to ensure cleanliness, including dressing in clean and socially acceptable clothing, to cultivate manners in talking, eating and in relationships, etc.

'I institutionalized my sons at the institution my nephew stayed. He was not only an inspiration to us but for the whole village. From his small days everyone in the village used to speak about him...how well behaved he is. He schooled at the best Government school at Batticaloa. Now he entered University of Peradeniya. He is the first person from our village to enter University.'

- A Mother, FGD of De institutionalized Parents, Batticaloa

'The whole village look up to our family as our son and daughter are in good institutions and are going to good schools.'

-Mother, FGD of De-institutionalized Parents, Ampara

Through grooming or "finishing" children in institutions are tailored to become employed in the service sector when they grow up. When children return for vacations during school holidays, neighbours easily recognise the "improvement" according to their perspective and become eager to send their children to institutions. Further, other children in rural communities are also encouraged for institutionalisation inducing chain reaction of institutionalisation.

## **4.4 BASIC NEEDS**

Providing basic needs such as water, food, shelter, health care and clothing are some of the major attractive factors offered by institutions to attract and keep children in institutions.

### **4.4.1 Water**

All the institutions have easy access to water, pipe bourn or well. Comparing the situation at home and at institution, most children have relied on wells at home. In contrast, pipe borne water is provided in many institutions. (Figure 4.4) Even if the water is provided in

institutions by wells, they are pumped. When children are at home, they travel longer ways to get to the source of water hence limiting their time for education and other activities. At the institutions, with water being provided by pipes, , access to clean water is increased and time consumed to access water is much less. In the society, it is the girl child or the woman that bring water home from the source. Therefore in areas where the distance from water source is significant, there is always a chance for them to become victims of abuse and attacks by wild animals.

Availability of drinking water is greater when children are at the institutions in contrast to the situation at home. 18% of children in institutions do not have access to sufficient amounts of drinking water while they remain at home, (figure 4.5) again reflecting the nature of attraction that institutions provide with.

#### **4.4.2 Food**

All the institutions provide breakfast, lunch, dinner, morning and evening tea which provide with sufficient calories for sustenance and development for children. 24% o of the children has mentioned that they were not satisfied with the food they were provided while they were at home before institutionalisation. Over 96% of children mentioned that they liked the food that was given at the institutions. It is also interesting to show that 14% of children who have been de institutionalised have not been able to enjoy food security after they were de institutionalised. The reasons as state by the insitutionalised children included in the 3.67% of them disliking the food that was offered by institutions which included compulsory vegetarian and non-vegetarian food

#### **4.4.3 HEALTH**

##### **MEDICAL ATTENTION**

Under normal circumstances a sick child is taken to a Government hospital where . Medical Consultation and medicine are provided free of charge When medicines are not available in the hospital, it is bought out of funds made available from the institutional budget. (Figure 4.7)

Most institutions have a separate room allocated to accommodate the sick, If it is a very serious illness the child is normally sent home. This again implies that although the

institution takes on the responsibility as the primary care giver of the child, in an instance of an ailment, the responsibility for the injured continuing again vested on the original primary care giver, which is on most occasions, mother or the father. This will be further discussed under issues of institutionalisation.

## **SANITATION**

Sanitation facilities are another major form of attraction that institutions offer to the children who enrol to study. In their homes only 66% of children have access to safe sanitation. (Figure 4.8) with the rest relieving themselves in the open wilderness/ which has invariably led to infections like .....making use and infection. leading to them being more prone for worm infections and skin infections. Further, this practice also leads to other vector borne illnesses as well. However, in institutions, 100% of the children have access to safe sanitation. With increased availability of water and soap there is less chances for children to become susceptible of getting worm infections. However, it was observed that common toilets in some institutions are far from being sanitary, although the numbers suggest a more perfect picture. Insufficient number of toilets in institutions are also a problem. For example, shared unclean commode type toilets place children at risk of getting skin infections. However, the inclusion of random visits by a Public Health Inspector for monitoring of sanitation standards maintained by institutions contributes to the proper management of toilets in institutions.

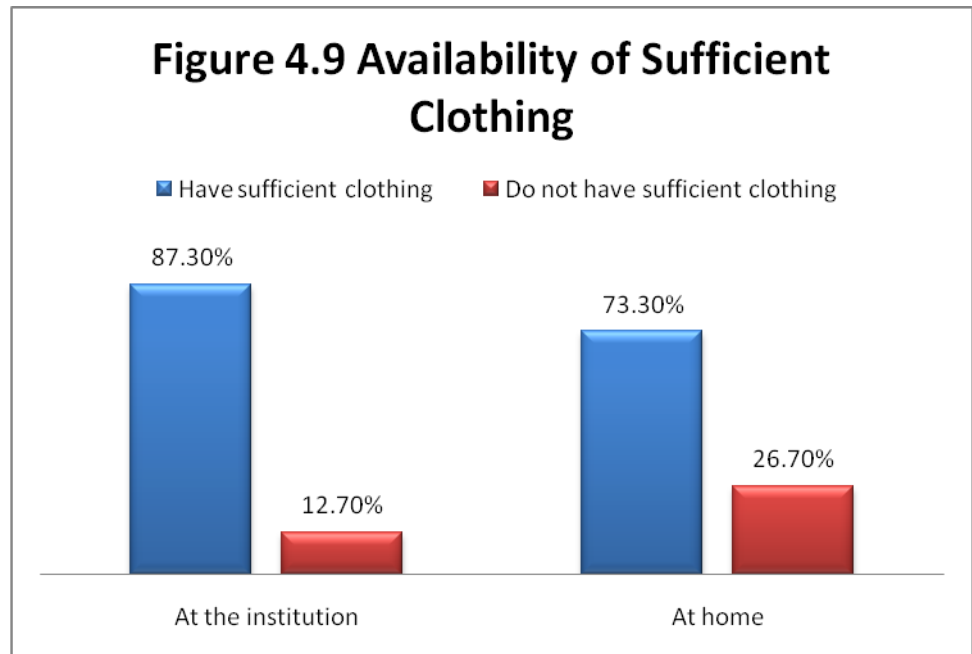
### **4.4.4 Clothing**

Most of the clothing needs of institutionalised children are taken care of by the institutions. However, there are some institutions that request parents to bring clothing for their children, explanation of the institution managements being the need for primary caregivers to have some responsibility of the children. As most of the children in institutions return home during school holidays, especially during the new year they are given at least a new clothing item during the stay with parents or primary caregivers at home.

26% of children in institutions have not enjoyed sufficient clothing while they were at home. (Figure 4.9) Some of the reasons for lack of clothing in homes is due to poverty and having too many siblings in the family. Even at the institutions, there is 12.7% that complain of

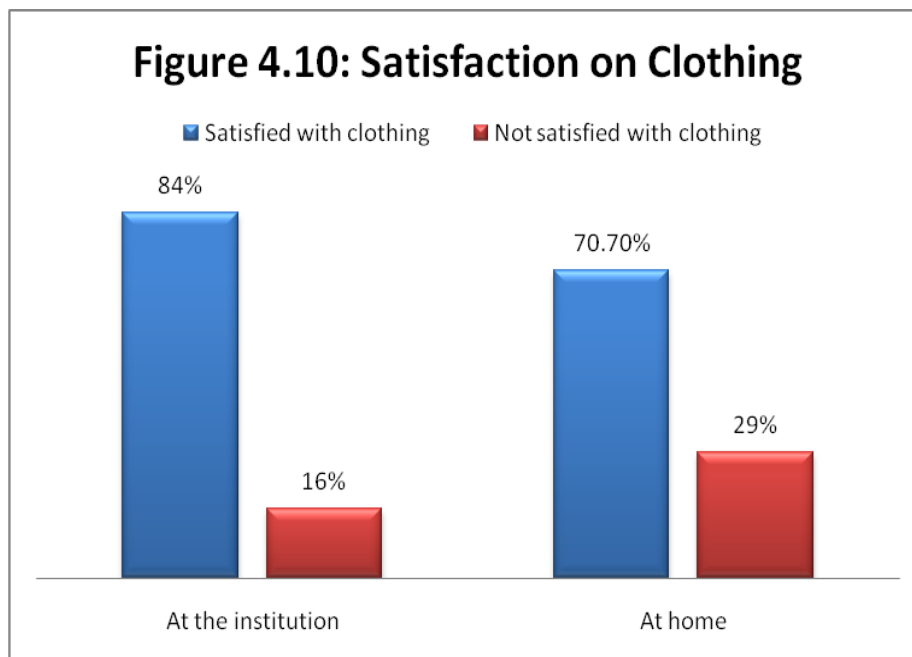
insufficient clothing, but still an improvement of clothing is seen while children are at institutions.

**Fig 4.2 Availability of Sufficient Clothing**



Although a similar pattern is seen on the satisfaction of the clothing (figure 4.10) provided at home vs the clothes provided at the institution this is not a mirror image of the availability of clothing chart. Major concern leading to dissatisfaction of clothing were donation of inappropriate clothing at the institutions. This may also be a reflection of cultural change that is promoted through institutions.

**Fig 4.3 Satisfaction on Clothing**



#### **4.5 INFRASTRUCTURE**

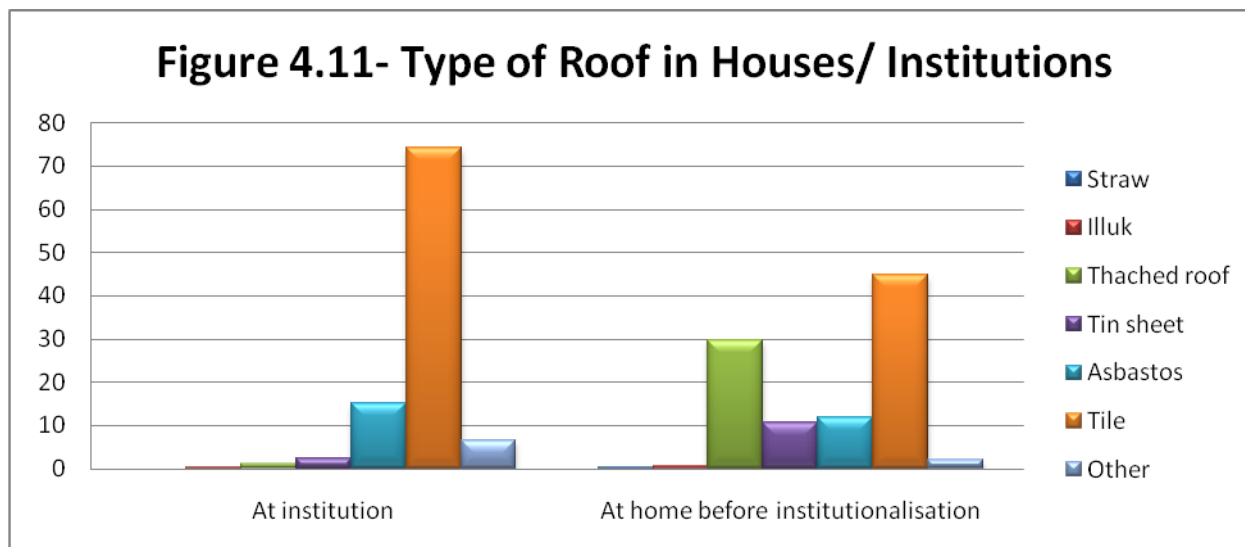
Infrastructure is defined as a substructure of any underlying system that is very vital for the success of any business venture. The children's homes that view children as their prospective clients/service users take every possible attempt to portray their organisation in the most attractive way to lure them in large numbers. To measure this the following aspects of the infrastructure such as the quality of shelter, sources of energy used and access to services were taken into consideration.

##### **4.5.1 Shelter**

Shelters were examined from the point of view of their roofing types types of walls and types of floor. As depicted in Figure4. the roof types of the institutions and the homes were found to be mostly tiled while those with asbestos roofing were much less in number. At the homes of the children other forms of impermanent or semi permanent roofing types such as thatched roofs and tin sheets are seen as fairly significant roofing material used by some of the houses of the children's parents/caregivers. The situation has not changed

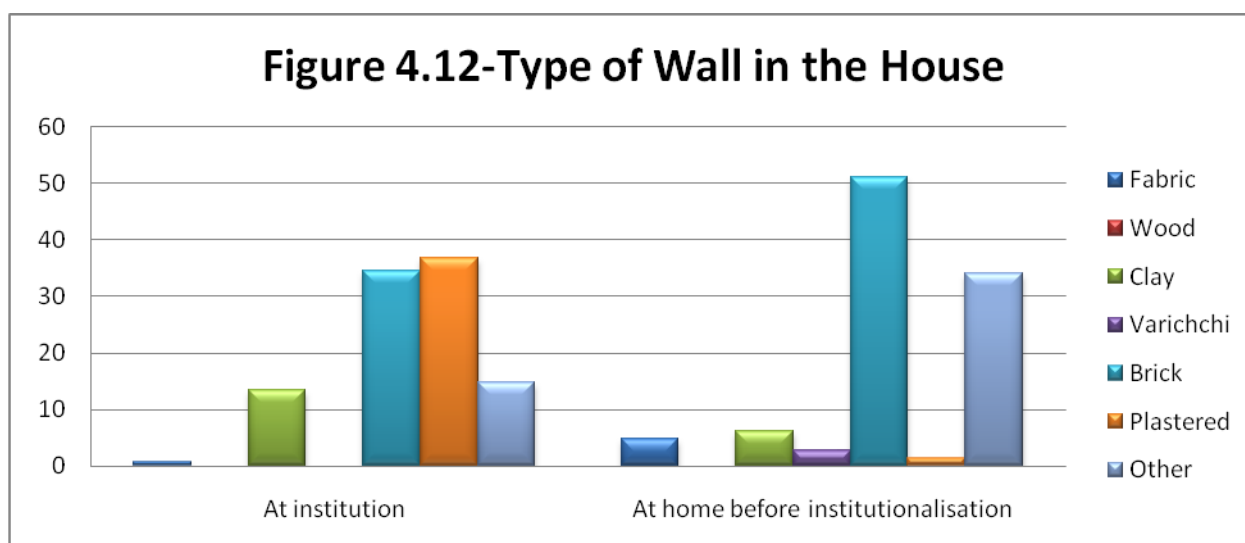
much or could be said to have deteriorated during the period children spent time at the institutions; while the immediate cause of it could have been the war.

**Fig 4.4 Type of Roof in Houses/ Institutions**



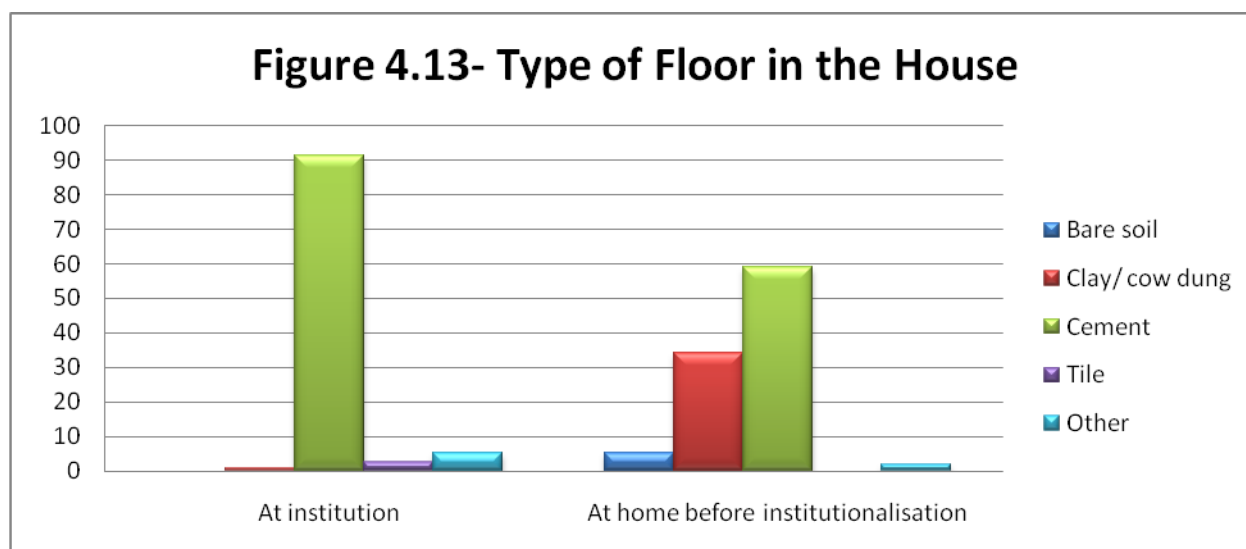
As regards the types of walls many of the institutions displayed plastered brick walls while the original homes of the children's parental/caregivers houses were found to have been built using a variety of materials. The data gathered indicated that the types of materials used for the walls had shifted from permanent (51%) brick walls to semi permanent clay (31%) during the time the children were institutionalised which could be a reflection of the impact of the war. Some improvement in the housing type was also visible which may have been due to the improved plastering of the walls..

**Fig 4.5 Type of Wall in the Houses**



The flooring of the institutions (figure 4.13) seems to have been mostly (91%) cement whereas the houses of the children before the institutionalisation of the children has been mostly cement (59%) followed by clay/ cow dung (34%). During the period that children stayed in institutions the floors houses have been upgraded from clay/cow dung floor to fully cement floors.

**Fig 4.6 Type of floor**



The overall housing picture as depicted in the figure 4.12 & 4.13 shows that the quality of housing of the children's parent's/caregivers had been poor in the period prior to the institutionalisation of those children while the child care institutions had better infrastructural facilities adding to the attraction they already had on account of other residential features.

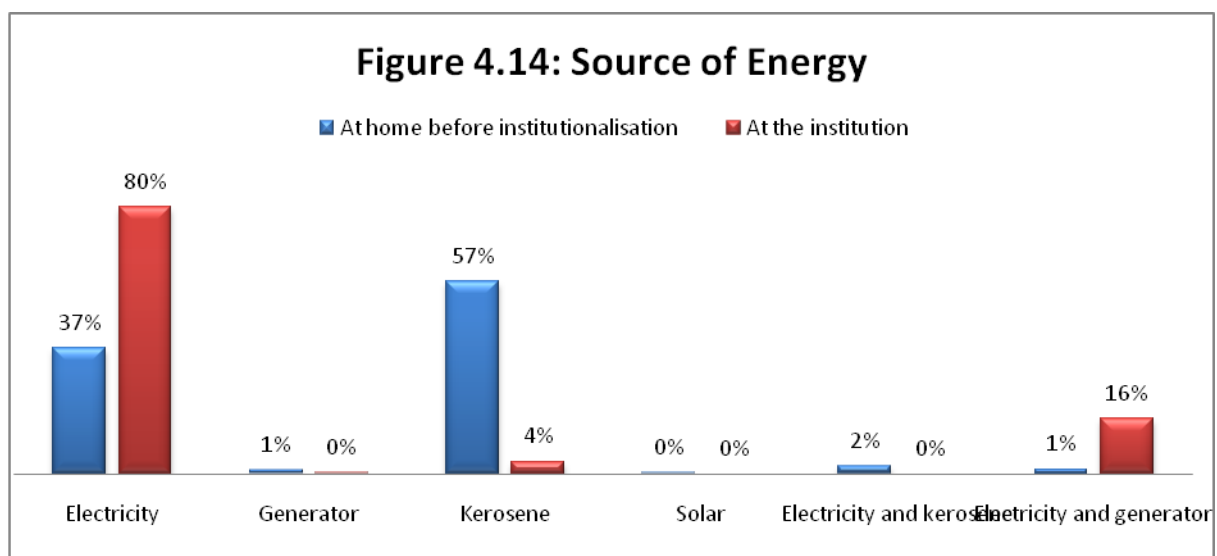
In this regard it is pertinent to mention that though the information obtained in this regard show that the quality of the children's houses improved after institutionalisation the improvements shown probably reflect the interventions by donor agencies connected to the post Tsunami reconstruction programmes that took place during the said period.

#### **4.5.2 Energy**

The data on the use of the different sources of energy between the institutions and the children's parental/caregiver's homes too show the quality differences in the infrastructure between these two sectors. The major source of energy used for lighting by the

parent/s/caregivers of the children under scrutiny in this study has been kerosene (57%) followed by electricity (37%) whereas at the institutions 96% used electricity and electricity/generators . (Figure 4.14). It was also discovered that 57% of the houses belonging to children’s parent’s/ caregivers had no access to electricity. This information also demonstrates the superior facilities that were available in institutions as opposed to those in children’s original homes. The quality infrastructure facilities available at the institutions is seen as attractions in those institutions for education and learning as opposed to the wide use of risky hazardous types of fuel used by the children’s parental homes This particular pattern may be contributing to the push factors that influence the decision on the institutionalisation of the children..

**Fig 4.7 Source of Energy**



### 4.5.3 Access to services

Services, such as education, transport, administrative and medical are located in relatively far away places from the children's parental homes. This inconvenience caused is aggravated further mainly due to the unavailability of public transport to peripheries of the Districts. Further more, in order to get a simple administrative service done from a Divisional Secretariat, they have to spend nearly a day. This is illustrated in the account given below

` We have to walk 7 kilometres to get to public transport. Even though three wheelers are available, we cannot afford them. When we get to the DS office it is sometimes past mid day and officers are gone for lunch. If one mandatory document required to process the service is not available, we have to come on a different day. If the relevant officer is not there, we have to come on another day. If we miss the bus and get delayed, relevant officers would be gone by the time we go to the office as the officers themselves come from far away and if they miss the last bus, they would not be able to get home before dawn. Amidst all concerns, if we return home in the last bus, walking 7 kilometres back is not safe as it is the time when elephants come onto the roads. If we safely return home, husband blames for being late'

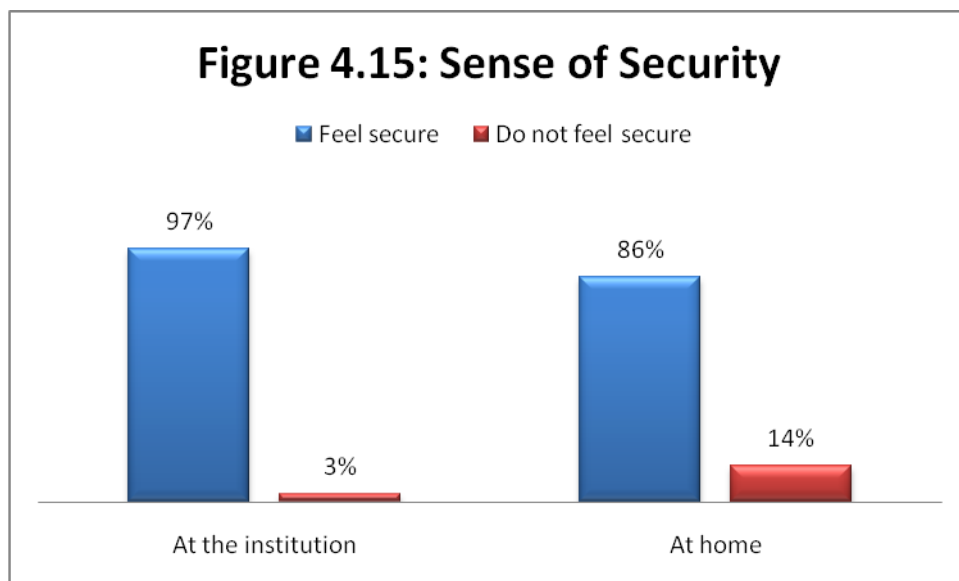
– A mother, FGD de institutionalised children, Trincomalee

Therefore it may be surmised that, the institutions in towns by providing better facilities attract /pull children towards their services.

## 4.6 PROTECTION

The protection available to children as depicted in figure 4.15 shows that , institutions provide children with a relatively protected environment. 14% of the institutionalised and de-institutionalised children believe that they do not feel secure at home.(Figure 4.15) In contrast, 3% of children believe that the institutions are providing an insecure environment.

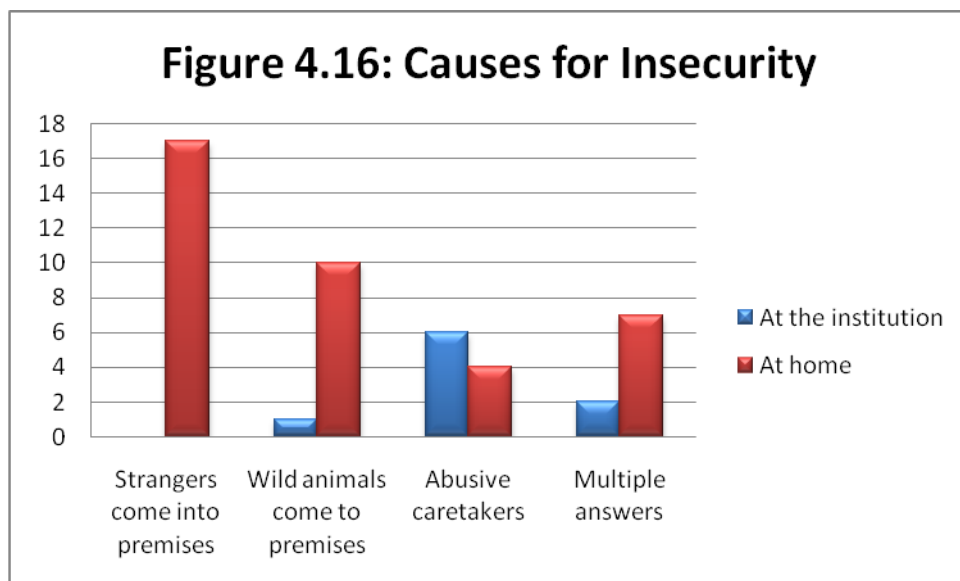
**Fig 4.8 Sense of Security**



When questioned on the factors that contribute to that feeling of insecurity, in institutions, (figure 4.16) children have observed that there is hardly any chance for strangers to come into the premise. In contrast, some children (over 5%) saw strangers coming into their homes (before institutionalisation) placed them at risk. This may be due to the limited protection in the houses besides other instances connected to the associations that the parents or caregivers had with other people in the society, armed groups, drinking partners of fathers. Entry of wild animals into houses is also indicated in the statistics where over 3% of children have referred to this threat.

Abusive caretakers were seen as the major reason for placing children at risk when they are placed in institutions. The form of abuse is not reflected. However, considering that the age group considered for the study mainly consist of adolescent age or sexually active age, children who are coerced, or have made to become addicts by fellow children or workers at the institutions may have also refrained from expressing their views in this regard, resulting in under representing the actual incident. 2 % of the children are reported as having experienced abuse by parents, caregivers at home

**Fig 4.9 Causes for Insecurity**

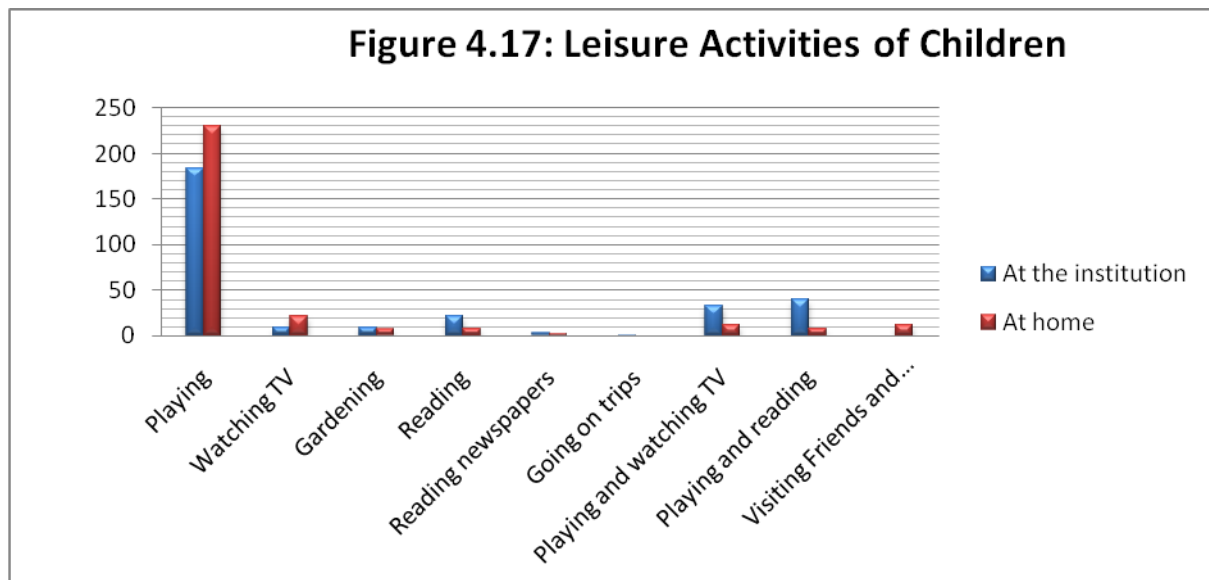


#### 4.7 RECREATION

Voluntary children's homes have been offering a wide range of recreation activities to the children in their care. In the case of the primary caregivers such offers are beyond their means. This situation once again highlights the difference between the providers of childcare at the informal and formal sectors. Many of the wide range of entertainment and sporting facilities that the institutions offer are beyond the means of the primary caregivers. Situation regarding recreational facilities is discussed under the following sub sections namely leisure, and study tours.

#### 4.7.1 Leisure

Fig 4.10 Leisure Activities of Children



At home as well as at the institution, children find playing as the major form of leisure. (Figure 4.17) However, combinations of playing, watching TV, and reading are seen as important forms of leisure among the children in institutions. Moreover visiting friends and relatives considered as leisure activities which the family member frequently undertaken are restricted is no longer possible after institutionalisation. The formal links established with government support show to have begun disintegration. This indicates how the original family links and social links are disrupted through the process of institutionalisation of children.

#### 4.7.2 Study tours

Leisure and recreation activities including study trips were occasions the children would not have had a chance with the family. Though these activities were mainly educational there were other negative aspects of regarding these trips which are discussed under issues of institutionalisation.

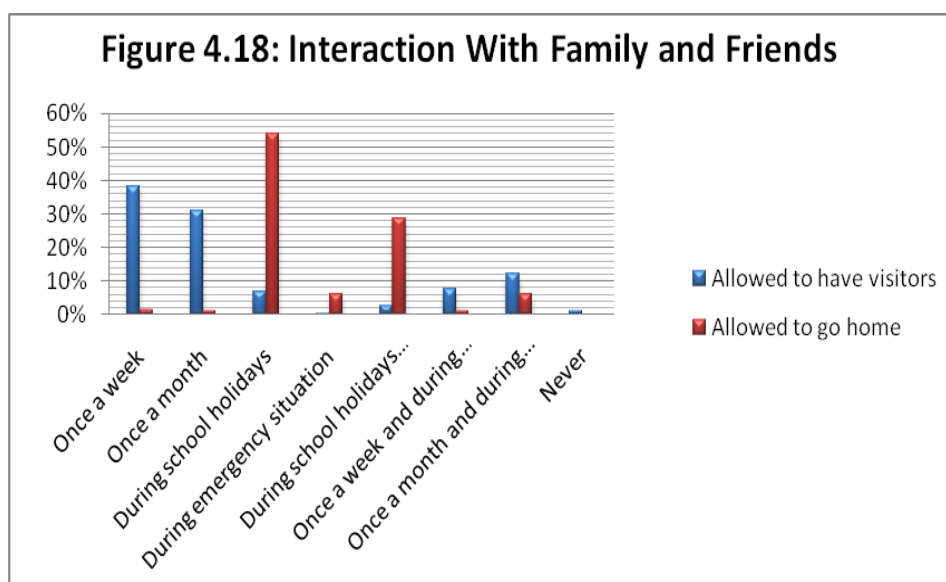
### 4.8 RELIGION

Most of the institutions provide the children with the facilities to practice their religion. However, in cases where there are children from Hindu backgrounds who are accommodated in institutions where the managements belong to another faith, such

children are marginalised and become vulnerable. This aspect is discussed further under issues of institutionalisation.

## 4.9 INTERACTION WITH FAMILY & FRIENDS

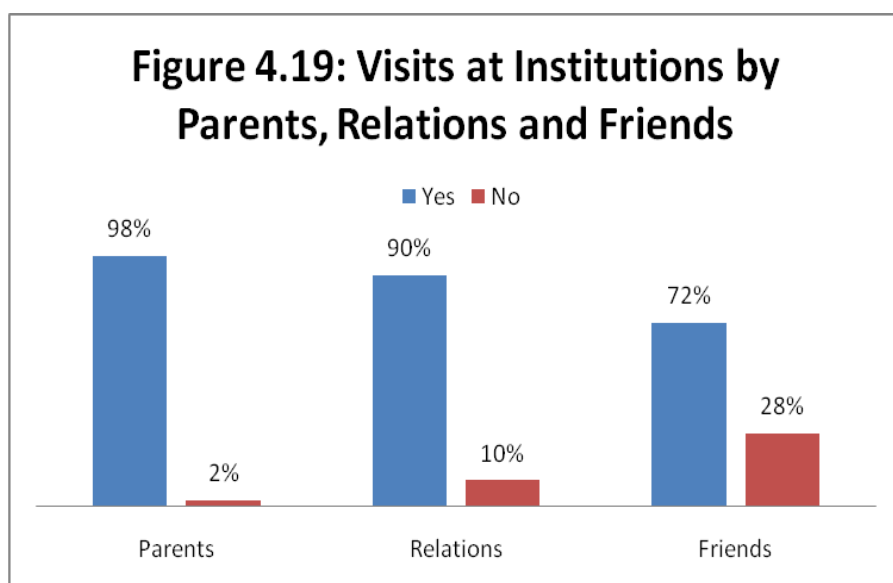
**Fig 4.11 Interaction with Family and Friends**



### 4.9.1 Regular interaction with family

The frequency of visits by the family and visits to their homes by the inmates of institutions and details on visiting hours are restricted at the institutions. Number of times family could visit the child, the number of times the child could go home and all other outings are determined by the management of each institution. Institutions that allow children to maintain a closer interaction with the family with weekly family visits and allowing children to go home for weekends, holidays remain a better attraction to children and family members rather than institutions with strict regulations that limit interaction with family. Most institutions allow visits by close relatives like the mother, father and siblings once a week (39%) or on occasions once a month (32%). (Figure 4.18) Most of the children (83%) go home during school holidays or emergency. Many institutions allow or request children to be taken home during emergency situations as in illness of the child or when there is a calamity in the family.

**Fig 4.12 Visits at Institutions by Parents, Relations and Friends**



#### **4.9.2 Relationships with friends in the institution**

It was noted that children develop deep relationships with friends in the institution and that some do not even want to visit homes for holidays. This might have been induced somewhat by placing children belonging to different age groups in one room where the children fall prey to intimate relationships. This aspect is further discussed under issues of institutionalisation.

#### **4.9.3 Culture Shock at Home**

Many de-institutionalized children and children who go home for the holidays encounter culture shocks when adjusting to the family after a stay in institutions. As issues related to identity negotiation and adjusting to the family cropped up the children prefer to return to the institutions or be re-institutionalized. As expressed by a key stake holder (given below) it appears that institutions with their updated facilities keep on attracting prospective clients; the students into their fold. The outcome of this are discussed under issues in institutionalisation

‘when our children are allowed to be with their parents and communities during the school holidays other members of the community often note the changes in those visiting children indicating a trend towards modernisation which most prefer their children to acquire and his has led to a chain reaction among those who advocate

preference to institutions resulting in a proliferation of such institutions in the country,

-Interview with Key Stakeholder, Trincomalee

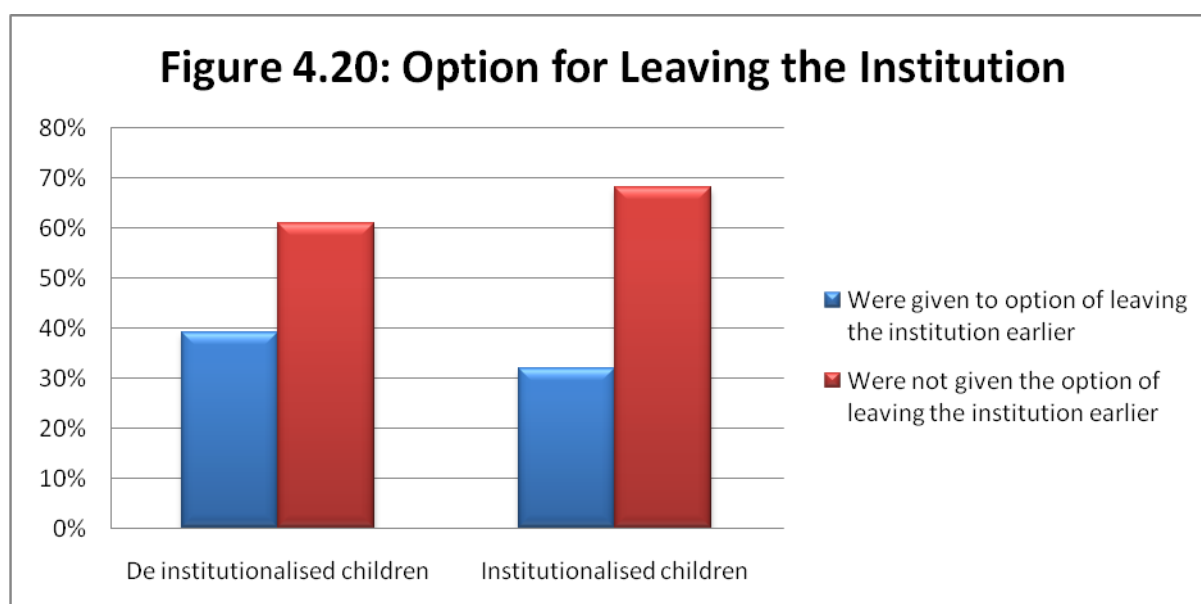
#### 4.10 CAMPAIGNING AT VILLAGE LEVEL

Many Institutions, mostly religious faith based institutions apparently actively campaign for institutionalisation at the village level.. Besides this active propaganda by those in business , Institutionalized children on the other hand visiting their homes during school holidays impress upon their neighbourhood on their personality development to encourage institutionalisation of children from among the the families in the community .

#### 4.11 OPTIONS TO LEAVE THE INSTITUTION

Apart from the above pull factors that were largely facilitated by the institutions to attract children into institutions and to ensure that the children remain in institutions, several other pull factors not so apparent had functioned as indirect pull factors

**Fig 4.13 Option available to Leave Institutions**



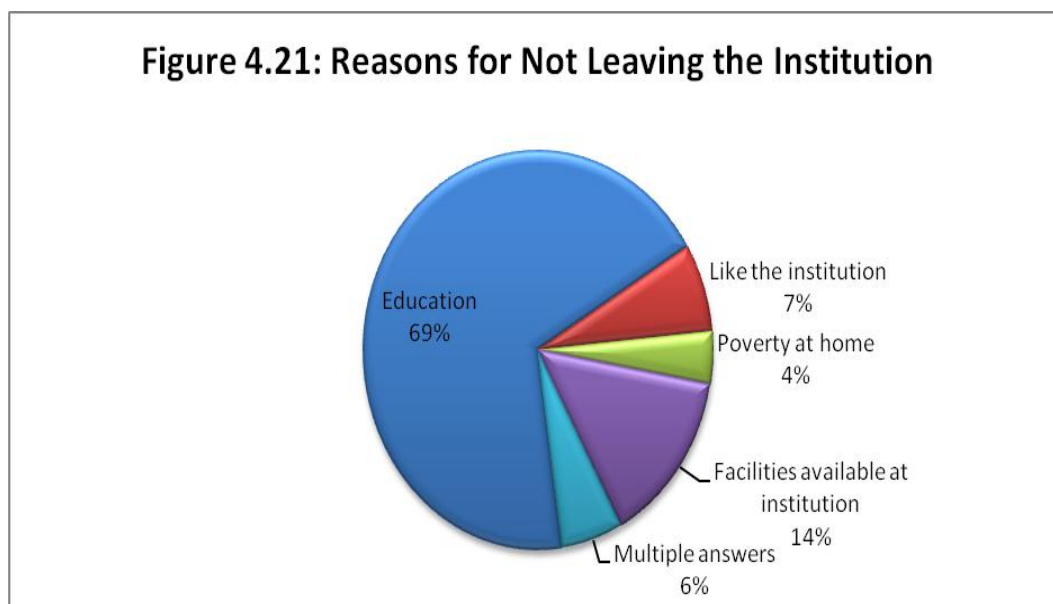
One such instance was connected to the desire to remain in the institution or not. During the period of institutionalisation, children were rarely (32%-39%) asked by the managements whether they wanted to continue to stay at the institution or whether they

would prefer to return to their homes. (Figure 4.20) The failure to conduct such an inquiry regularly therefore could be construed to mean that the managements of institutions preferred to keep the children in the institution without verifying the children's thinking on the subject. Between 61%-68% of children in the sample have reportedly never been offered the option of returning home permanently.

Out of the children who mentioned that they were given the option to leave said that they had to explain the reason for such a request. The main reason that kept children in institutions was education (69%) followed by the facilities available at the institution (14%). 7 % reported liking to stay in the institution as the main reason.

All these details illustrate the point that the dominant pull factors offered by institutions remain very strong. It is obvious that it is the pull factors rather than the push factors that keep children within institutions.

**Fig 4.14 Reasons for Not Leaving the Institution**

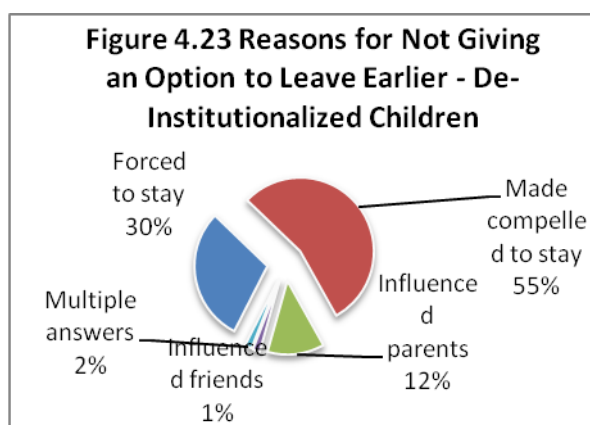
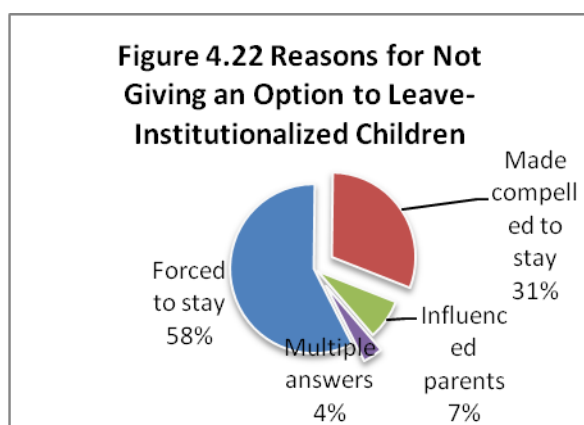


Out of the children who reported not being given the option to leave the institution, a further question was raised to clarify how they were not allowed to return home. (Figure 4.21) The answers given by institutionalised children and de institutionalised children were markedly different. (Figure 4.22 and 4.23) As elaborated below, among the children who were not allowed to leave the institution 58% of the institutionalised and 30% of the de-institutionalised believed that they were forced to stay in the institution. However, of the ones who mentioned that they were not given the option of leaving the institution 31% of

the institutionalised and 55% of the de institutionalised mentioned that they were coerced to stay in the institution. Other ways that are used by institutions to make sure that children remain in institutions is through influencing parents and using friends to convince the advantages of remaining in institutions.

Fig:4.15 Reasons for not using option to leave (Institutionalized Children)

Fig:4.16 Reasons for not using option to leave earlier (De-Institutionalized Children)



#### 4.12 SUBSTANTIAL FUNDING

Many of the voluntary children's homes apparently rely on foreign funding largely coming from the North American nations and the European Union countries as well as from the Sri Lankan diaspora in those regions. They also work through networks established locally. Running such institutions has become a lucrative business mainly in the aftermath of the conflict and Tsunami. According to the management of most institutions, on average the recurrent expenditure per child per month reached upto Rs. 5,000 per child. For an institution that hosts 30 children, therefore the recurrent budget would be an exorbitant amount of Rs. 1,800,000.00 per year, which is a substantial amount. This aspect is further discussed under issues of institutionalisation.

Much of the funding opportunities that became available from the Post Tsunami funding led to many people seeking out many avenues to acquire funding and resources within their capacities. An orphaned child in the context of the Tsunami was an area that provided sufficient ground for project development and eventual fund raising. Once the funding

sources were secured, it was a matter of absorbing more children into the institutions so that the institutions could be marketed better for resource acquisition. To get more children into the institutions various institutions used various strategies of which getting placements in good and reputed schools, and providing quality food, attractive facilities and after school tuition were some.

#### **4.13 CONCLUSION**

There was a diversity of pull factors that made the children remain in institutions. All institutions offer education and related facilities that children may not access at all if they were brought up in their homes. Children are encouraged to get themselves educated and guided towards achieving educational ambitions. Children in institutions have access to diverse sources of knowledge. Apart from these services, the institutions provide the basic needs such as food security, access to clean and abundant water and abundant power and energy whereby children are able to study for longer hours. Therefore, entry into such institutions opens a wide variety of opportunities for the children for the future..

Child participation is encouraged through institutionalisation in certain ways but still a question remains on the imposed limitations of actual participation of children within the community, family and also in practicing one's religious belief. Participation with the family is not discouraged in most institutions, yet, considering the financial constraints that the parents of institutionalised children incur, it is almost impossible for parents to visit children often. However, children's visits home for vacations provide grounds for attitudinal change among the villagers that facilitate the further development of the institutionalisation process.

Most of the children too agree that secure settings and protection are guaranteed by being in institutions. Therefore, institutions provide the opportunity to have a second home away from home.

Apart from the positive outcomes and positive aspects that pull children into institutions, there are also instances reported such as forcing and coercing children to stay longer in

institutions using diverse strategies such as placing older children with younger children in the same room that could be detrimental for the development of children.

Though the institutions offer good facilities, and encourage children to stay in the institutions, the question of whether it is in the best interest of the child or whether it is in the best interest of the institution that keeps children in institutions longer remains unanswered. The alternative of looking at it as opportunities available to commodify children for fund raising purposes and maintained to fulfil the financial interests of the management of the institutions is also open to discussion and debate.

Caring for children in the custodial care of voluntary homes provide managements with attractive dividends channelled mainly through organised religious institutions, Sri Lankan Diaspora and donor agencies from well endowed nations.. The availability of funding however ensures sustainability of the institutionalization of children.

# CHAPTER FIVE

## ANALYSIS OF FINDINGS I -

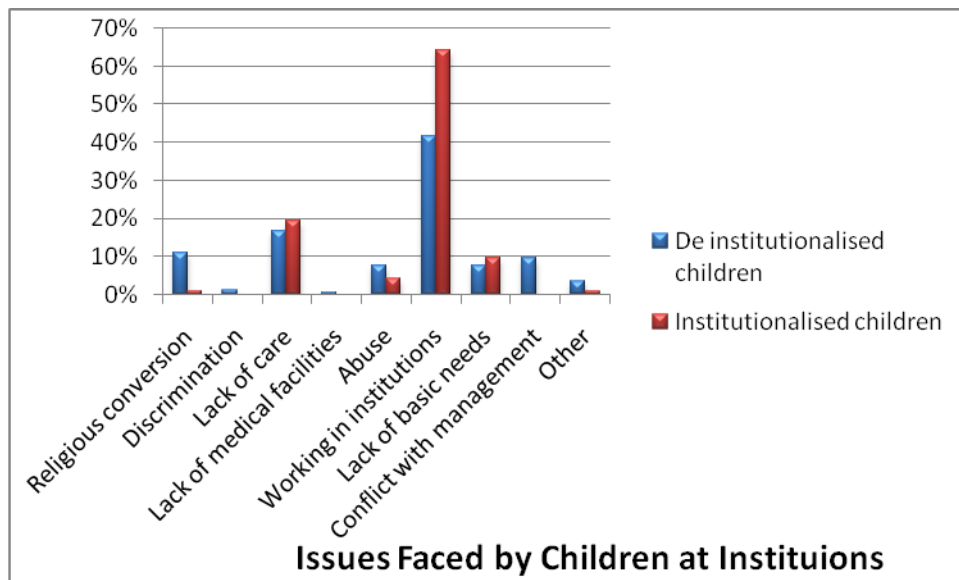
### ISSUES OF INSTITUTIONALIZATION

#### 5.1 INTRODUCTION

The findings presented in the preceding chapters illustrate the push and the pull factors that sustain the system of institutionalisation of children in the country. This chapter attempting to view the sum result of the impact of the push and pull factors looks at the types of issues encountered by the children and the impact of those on their lives. to recommend, substantiated with evidence, de-institutionalization supported by the necessary services to re-integrate the children into a family based environment and to advocate and facilitate the reduction in the number of children entering institutional care.

The major issues identified in this regard were break up of family bonding, religious conversion, lack of appropriate care, excessive control, discriminatory treatment, abuse, exploitation, lack of access to basic needs, limitations in child rights based participation and associations, hampering child development, lack of personal care and attention and insecurity. Many of the Voluntary Children's Institutions functioning as business ventures was also seen as an issue that needed attention. The Issues faced by child delinquents are discussed separately as these children are hosted in institutions away from Eastern Province.

**Figure 5.1: Issues Faced by Children at Institutions**



Working in institutions include carrying out day to day activities such as laundry, sweeping floors and garden rather than exploitation of children as child labourers. More than 62% of institutionalised children and more than 41% of de institutionalised children found getting them to work as a main issue. Lack of care is another area that is highlighted with 20% of the institutionalised children seeing the lack of proper care as an issue. Religious conversion was an issue among 11% of the de institutionalised children, but less than 1% of the children think of it as an issue. Similarly, conflict with management is seen as an issue by 10% of the de institutionalised children whereas children in institutions do not see that as a major concern. The difference between the data on institutionalised and de institutionalised children could be due to the change of laws and monitoring systems that came to effect after 2008.

## 5.2 BREAK UP OF FAMILY BONDING

It appears that Institutionalization reduces relationship with the family. Constant interaction with the family on a daily basis is limited to an occasional letter, visit by a family member or home visits during holidays.

When a child is separated from home, he/she feels home sick for an initial period which could be few days or few weeks as they miss siblings, parents and friends. Yet as illustrated by an institutionalised child, with time the child adapts to the institution fairly well

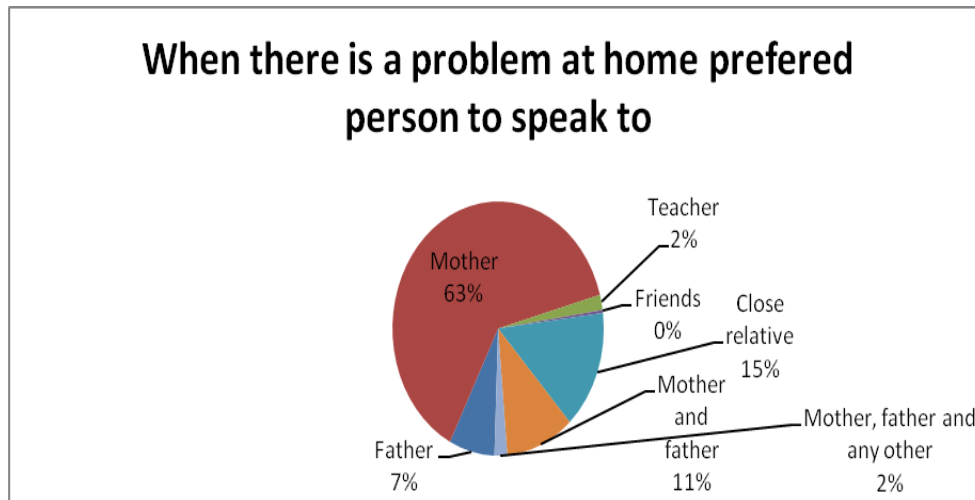
‘I felt very home sick when I was first sent into the institution. All what I could think was about my mother, two younger brothers and my best friend in school. I used to cry a lot when I went to sleep. I just couldn’t concentrate at school or study. After few weeks I got used to the life of the institution.’

(Abstract from an essay, De-institutionalized girl, 16, Ampara)

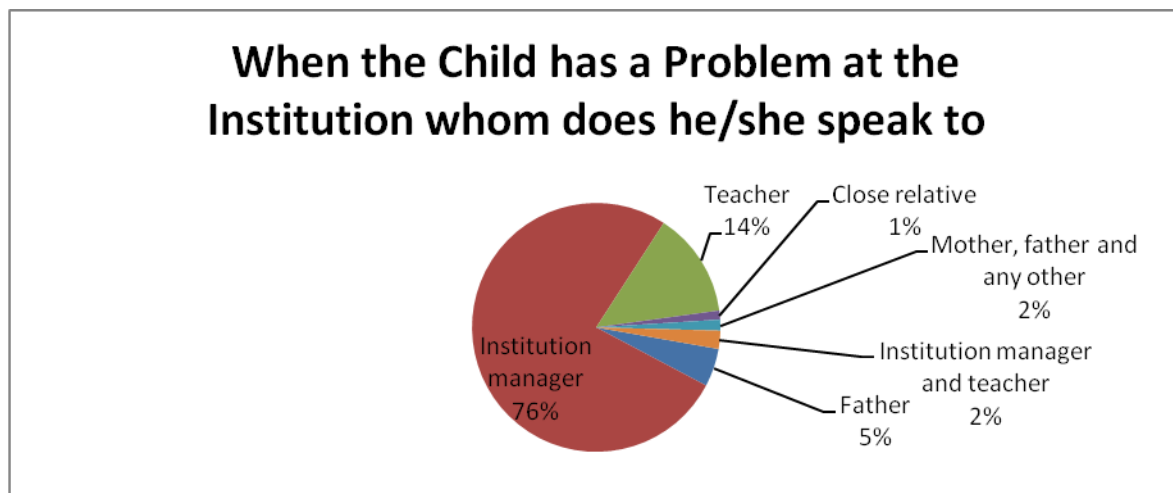
After institutionalizing, family visits are not regular due to various reasons; which include institutions not allowing parents to visit often; parents not being interested; parents not being able to afford the cost of the visit including transport, to give pocket money for the child or some gift which a parent feels is an obligation when visiting the child.

The information illustrated in the two figures given below effectively portray the comparison between the ways a child reacts to problem of break up of family bonding situations in their homes and in the institutions.. The first figure portrays that when a child has a problem at home, he/she relies mostly on his/her mother (63%), father (7%), both parents(11%) or close relative (15%). This bonding pattern discernible in a family environment is drastically changed when the child is in an institution. When the child has a problem in institution, 78% depend on the management of the institution to solve the problem. The children who relied on their mothers (74%) rather than their fathers (18%) had to completely forget their mothers with which the children interact mostly.

**Figure 5.2 Preferred Person to Talk to When the Child has a Problem at Home**



**Figure 5.3- Preferred Person to Talk to When the Child has a Problem at the Institution**



Moreover evidences reveal that institutionalised children are literarily blackmailed into viewing the advantages of institutionalisation by comparing material benefits that they receive from the institutions vs parental love and affection.

Due to the social issues hindering chances of the mother going to see the child in institution, it is seen that the children get more chances to talk to the fathers (7%) whom they relied on less even when they were at home with literarily no chance to talk to their mothers.

However, teachers (16%) seem to compensate by interacting and solving problems of institutionalised children.

Some questions were raised on the leisure activities and social contacts of the children and there were children who were used to go on visits to relatives and friends while they were at home, but are unable to continue the same practice while they were at the institution.

### 5.3 RELIGIOUS CONVERSION

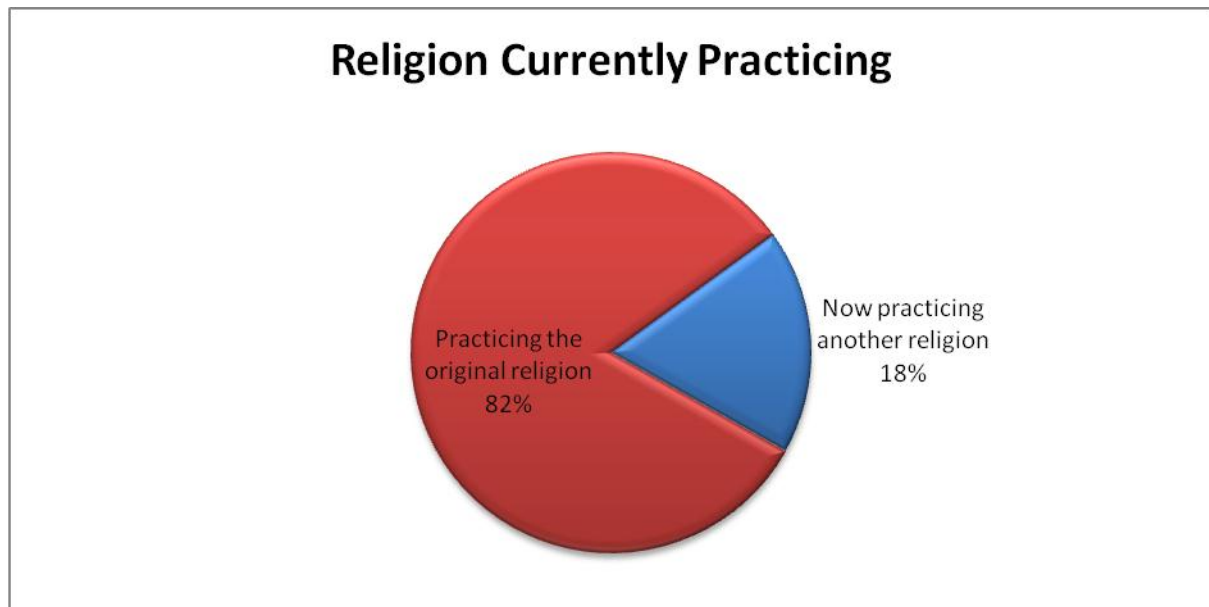
Most of the Volunteer Children's Institutions in the Eastern Province are based on the religious faiths of either Hinduism or Christianity. There are a few Volunteer Children's Institutions based on the faith of Islam and only one based on Buddhism. In the institutions based on Islam and Buddhist religious faiths, admission of children are restricted to those belonging to their respective religions only. In those institutions which are Christian faith based, children of other religions are admitted. Yet these children do not have the opportunity to practice their religion. Although a new faith is not forced on them, lack of facilities to practice their own religion and the requirement to attend prayers in the religion of the institution scheduled according to the time tables place the children in a position conducive to the possibility of conversion.

**Figure 5.4- Freedom to Practice Religion at the Institution**



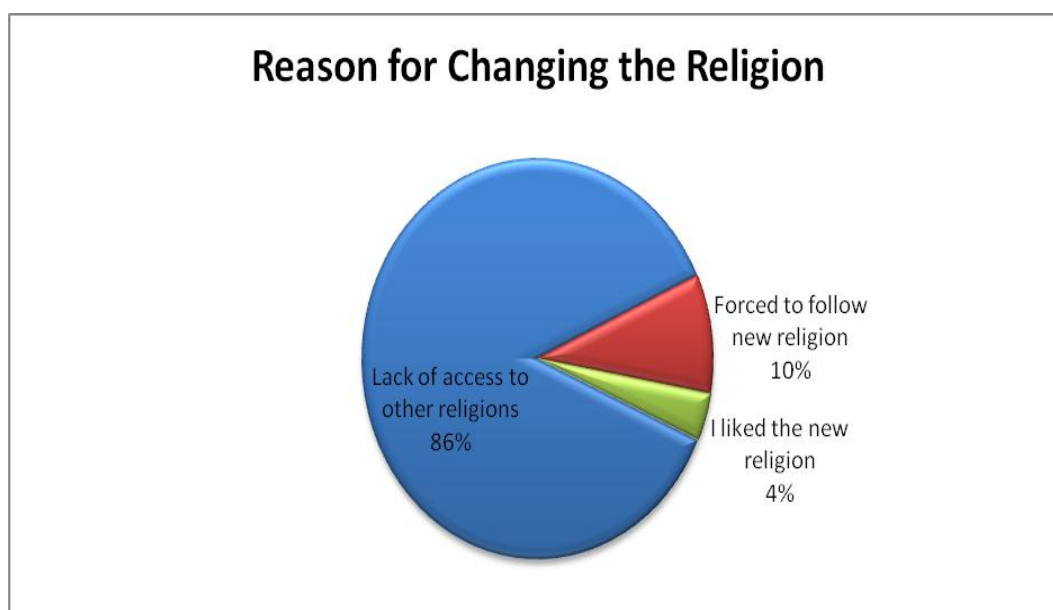
According to the above figure, 22% of the children in institutions do not have the freedom to practice their original religion.

**Figure 5.5- Religion Currently Practicing at the Institution**



From the total sample of children 18% are reported to have been converted into another religion. In this regard, it is highly possible that some children who have converted to another religious faith may have concealed their real status for various reasons.

**Figure 5.6- Reason for Changing the Religion**



According to the 18% of children who had changed their religion, 86% had apparently changed due to lack of access to their religious facilities. 10% of the sample is said to have been forced to follow the new religion. Only 4% of the sample had selected the other religion with consent. The case cited below illustrates one such incidence

Aligambe Gypsy families are Telugu speaking Malayalam people following Hinduism. A Christian father has promoted institutionalising many children belonging to these Gypsy families into Christianity based Voluntary Children's Institutions in Trincomalee, Batticaloa and Akkaraipattu. The Reverent father is reported to have encouraged those children by mobilising the community to acquire Christianity and give up their original religious culture.

#### **5.4 CONTROL MEASURES ADOPTED**

Children's activities are controlled by the institutional time table and the bell. Although it is seen as a means of disciplining children by the Management of the Institutions, many children (both institutionalized and de-institutionalized) felt they lose control over what they want to do in their lives and how they want to do it as a result of the control by the institution using the time table and bell. Some of the statements by children about how they feel they are controlled in the institutions are as follows-

'I like to study till late night. I just don't feel like studying in the morning as I feel sleepy. But in our institution the lights are switched off by 9 a.m. and we have to get up and study at 4.45 in the morning.'

- Boy (14 years), Ampara

'I always wish I could sleep at least till 5.30 -6.00 but we have to get up at 4.00 in the morning. This is what I don't like about the institution.'

- Girl (15 years), Trincomalee

'I feel uncomfortable when I hear the bell. We have to do everything for the bell- to get up, eat, worship, play, study, sleep. The bell is controlling our lives in the institution.'

- Boy (15 years), Batticaloa

Punishments are used as a means for controlling and disciplining children at the institution by the Institutional Management. Common punishments used include, scolding, beating, keeping the child without food, work in the garden, stand on the table, clean manager's home.

In some cases senior children also punish the younger children to maintain discipline in the institution. For example, when younger children are fighting, in order to stop the fight older children intervene by scolding or beating the younger children.

Furthermore to better manage the institute, older children are used by placing them with younger children in one room. This practice could easily lead to homosexual relationships between children and also other abuses of younger children. In such circumstances the older children are likely to force younger children to perform cleaning and laundry chores besides other unwanted errands.

## **5.5 DISCRIMINATORY TREATMENT**

Discriminatory practices of being partial to some children seem to be common in many of these institutions. This practice invariably results in the development of inferiority complex among those children who do not receive such treatment. Favouritism, as illustrated in the case given below, seems to occur due to the personality of the child and/or the influence of parents and family members (in instances where parents/ family members come from socially recognized backgrounds and are closely monitoring the child).

“Ishani is the favourite of the institutional Manager. She is pretty and is very good in school work. She knows how to get about the Manager and get things done, including going for all the tuition classes she is interested in. She never does her chorus in the institution but she is never been scolded for not doing her part. It is my bad luck that I am not pretty...no one listens to me.”

- Girl (14), Batticaloa

Discriminatory treatment towards the child occurs in cases when the parent/ primary caregiver neglects the child and hardly visits or takes the child home, if the child doesn't possess an attractive personality, and if the parents are not in a position to pay the fee in

time those children remain neglected creating a situation for them to feel unwanted to the detriment of their personality development.

Such discriminatory treatment was seen only in certain institutions and therefore it cannot be generalized as a problem common to all institutions under study.

## **5.6 CHILD PARTICIPATION**

### **On Care Options**

In many cases the child is informed by the parents/ primary care giver about their decision to institutionalize the child and the reasons. The institution is also selected by the relevant Government officials, sometimes with the influence of the primary caregiver. The child therefore hardly had any option to express his/her views on the preferred care options

### **In the administration of the Institution**

Decisions related to children in institutions are made by the Management Board, Matron or based on the recommendations of the VHMT Committee. Children are not given any opportunity to participate in decisions regarding the administration of the institution.

## **5.7 LIMITS TO ASSOCIATION**

Institutions restrict children's association with the outside world to a great extent. It is done by restricting the number of visits by family members and other persons allowed to visit the child. This is determined by the institution. Some institutions allow once a week visits while some restrict the visits to once a month. Persons who could visit the child are most often limited to parents and close family members.

The movements of institutionalised children's are restricted to school and back in most institutions. The institutions that allow children to go for tuition classes expect the children to be back in the institution as soon as the classes are over. Restricted movements limit children's freedom of association.

Generally there is no freedom for children to talk with school friends after schooling hours or interact with any community member outside the institution. There are exceptions to this

norm in some institutions where children in the institution are allowed to play with children in the community.

Most institutions host only girls or only boys. As a result children do not get the opportunity to freely associate with children of the opposite sex. In Thapovanam and Sevana Sarana based in Trincomalee both girls and boys are placed in the same institution and are allowed to freely interact, play and study together.

### **5.8 CONSTRAINTS TO CHILD DEVELOPMENT**

Restrictions placed on the socio economic environment accessible to an institutionalised child normally restricts the child's access to the outside . The children do not get the opportunity to be exposed and learn from the harsh realities of the real world such as survival strategies of real world struggle including finding support for the family with livelihood activities, engaging in household chores including the food preparation process, developing relationships with family members including extended family and other community members. Children in institutions therefore have less opportunity to develop and preserve family bonding and once they reach adulthood they become estranged from friends in the institutions with whom they associated closely and are left in a world of their own with least associations socially.

Along with such instances emotional development of the children is further hampered by being institutionalised. As presented in figure 5.1, many children (between 41%-63%) consider performing daily routine work like arranging rooms, attending to work related to laundry and cleaning of the surroundings as an issue rather than as an obligation. Therefore, once the children come out of the institutions they run the risk of becoming social misfits due to the acquired selfish and socially irresponsible attitudes

### **5.9 LACK OF PERSONAL CARE**

Institutions are nothing more than shelters to many children. Such children cannot expect the personal care that they receive in their home in an institution Personalised care of attending to the personal needs and wellbeing of a child as a mother or grandmother is not possible in an institution.

Although institutions attend to health needs of the child including obtaining medicine when sick, it is difficult for an institutional caregiver to substitute a mother's care when sick. See expressions in his regard given below.

‘When I am sick I really feel home sick and cry thinking about my mother’

- Boy, 9 years, Workshop with Institutionalized Children, Batticaloa

Most children are sent to institutions because families have problems of their own, but the institutions send children home when the child is sick. In such vulnerable situations families find it difficult to care for the child. Parents are not financially stable to purchase medicine or to take the child to hospital.

#### **5.10 INSECURITY**

It was evident that many children felt secure and comfortable in the institutions except in a few cases when they felt the threats from wildlife (elephants and snakes); from sexual abuse and insecure feelings caused by staff members engaging in sexual relationships in common places.

In situations where there have been reported sexual abuse cases or threat of sexual abuse, Department of Probation and Child Care has intervened and sorted the issues by taking necessary action to punish the abuser, attending to needs of the victim and in some cases even closing down the institution.

The case to illustrate such instances is cited below:

EMMOUSE Children's home at Thambiluvil was a Volunteer Children's Institution with 49 children. The Institution was managed by a foreign Christian Pastor. The manager was sexually abusing the children and was not allowing them to go out of the institution. Subsequently the children's home was closed in April 2009 on a petition received by the Probation Officer and the children were reunified with the parents. Many of those children were provided with counselling by Probation Officers and medical officers at the Kalmunai Hospital before reunifying with parents.

### **5.11 INSTITUTION AS BUSINESS**

As highlighted in the chapter on the Pull factors of Institutionalisation, one cannot be naïve in not accepting the other motives of running such institutions. It is not just the good will of the caregivers nor the institutions that led to the initiation of such ventures. The promise of a substantial financial gain has been a primary driving force that drew the interests of persons looking around for lucrative opportunities to invest their monies. Those recruited into the management of such ventures too stood to gain in the process as illustrated in Chapter four.

Apart from the developmental investments, donor contribution per child per month for recurrent purposes is around Rs. 5,000, was very substantial. Institutions sponsored by locally raised funds were hard to come by, Most funding of such institutions came from overseas. Most of the institutions that are managed by faith based organisations are funded by their respective mother organisations and there are a few organisations that are funded by the Tamil Diaspora mainly in the European Union and North American countries.

It was reported that in some of these institutions that receive funding from the European countries and Sri Lankan diaspora in Europe, children looked malnourished. This could only be interpreted as malpractice wherein the children who are given shelter to stay are not fed adequately. This raises the question as to what happens to the rest of the money received from well endowed donors?

Many of the children's homes had apparently been established in the post conflict period and post Tsunami period. Substantial funding has been raised in the post Tsunami period to establish new institutions and to develop the institutions that were already functioning. In reality only mere 4% of the children accommodated in such institutions were affected by the war or conflict. Therefore, it is highly probable that the funds raised thus by marketing the issues of war and Tsunami was not fully utilised to benefit the children who were actually affected, and in all probability may have been used to reach out and lure children from far and interior places in the Districts hamstrung with poverty and family relationship problems to be admitted into their institutions.

It was also alleged that the management of an institution had used political clout through some local leaders in the area to influence the officers authorised to approve children's

registrations to support the registrations of candidates who did not meet the minimum admission requirements to be registered. The officers remain uneasy and frightened as they had to compulsorily flout the standard procedures laid down by the Department of Probation and Child Care for the registration of children into such institutions. The use of authority and bypassing systems to register an institution wouldn't definitely be done by the management solely for the benefit of the deprived children and are hence done simply because the management of the institution had some thing personal to gain from such businesses.

The case of a home Manager, Rev. Father in an institution in PeriyaNeelavani running away in April 2011 with a grant of 20 million given to the institution was unbelievable.. At the time of the field work of this study, the children were still in the institution and the board of management was struggling with the management.

Lack of transparency or managing to get away by not divulging the exact number of children accommodated in institutions, their earnings, spendings, details of facilities that are available to the institutions etc shows either the inefficiency of the monitoring mechanisms or the efficiency of the management keeping vital information away from the audit. Which ever way the information is kept away it appears that the system facilitates pilferage/ leakage of financial resources meant to provide care for the innocent children..

#### **5.12 UNETHICAL/DANGEROUS EXPOSURES**

There have been instances when children have been sent outside the institution to work as gardeners or on occasion to perform dangerous task like plucking coconuts at a high risk .

Children in institutions are alleged to have been taken 'study tours' to infamous beaches in the Western and South Western coastal belt without any approval of authorised officer from the Department of Probation and Child Care. These visits could well be within the vicinity of organised internal trafficking of children.

Some institutions that have links with the Sri Lankan diaspora mentioned that marriages are organised for orphaned girls through the institution. As commented by a manager of an institution

‘There are migrant Sri Lankans settled down overseas who are willing to marry orphaned girls. In such cases when girls are over 18 years, they are introduced to such boys so that they could get married and migrate overseas’

The above scenario sounds touching to learn that the poor orphaned girls are given a new lease of life but in reality it rings an alarm for those poor girls.. Although such practices could be done in good faith by the managements of such institutions it does not seem to be right. It could be taken to be a ruse of organised international trafficking entrapping the innocent girls for untoward earnings through sexual exploitation and even organ removal. A question that should be raised in this regard would be “why isn’t any young ladies from Sri Lankan diaspora coming to Sri Lanka to marry orphaned youth from institutions?”

### **5.13 ISSUES OF CHILD DELINQUENTS**

The delinquents or the children that have faced protection issues from the Eastern Province have no other alternative but to live in institutions established in other parts of the country as there are no specialised state run institutions in the Eastern Province. This prevents or at least reduces the family interactions of the child and also results in cultural shock. Secondary education in most of these state run institutions is conducted in the Sinhala medium, hence limiting the chances of the children coming from Tamil background access to any education. Even for children who are studying in the Sinhala medium, some state run institutions could offer classes only mid-way in secondary education, hence excluding delinquent or victimised children from accessing the major exams such as GCE Ordinary Level and GCE Advanced Level.

### **5.14 CONCLUSION**

Parental care is seen as the best option for a child. Section 5.2 in this chapter clearly portrays the extent to which institutionalization destroys children’s bond with the family and relations. Since parents and families have the most direct and lasting impact on children’s development break downs in that link lead to both immediate impacts, and long-term impacts on the child and the family leading to a series of events which affect the child in many ways.

The family as the basic unit of society, it still remains as an institution that nurtures and takes care of children until they become responsible adults. Personal connections and family bonds are very critical in strengthening the relationship between parents/guardians and children. As a result, children are adversely affected by tragic loss of their parents or close family members. One of the ways through which the physical, mental, emotional and social well being of a child can be guaranteed even after the death of a parent/s is through the establishment of permanent family connections with other family members or a guardian. It is important for parents to prepare for such situations by ensuring that a child develops permanent connections with close family members or a guardian who can take care of the child in their absence. Such plans have great benefits to children and the family because they prevent having children being institutionalised..

Religious conversions have been reduced to a great extent ever since the Department of Probation began to monitor the institutions closely. At the early stages missionaries had the freedom to select children for institutionalization but now only the Department of Probation and child care services has the authority to institutionalize a child. In spite of this system children belonging to religious faiths other than the faith of the institution are being admitted to institutions, particular into Christian institutions. In such instances the possibility of discreet conversion of the new admissions to the religion of the institution is highly probable .

Excessive control of children in institutions, regimented by rigid time tables, and bells has had negative impact on children's personality development. Prohibitive corporal punishments and various other forms of harsh punishments are used to control children not knowing that it is not allowed Positive disciplinary measures are un-heard of by management of most institutions.

Near non-participation of children in decision making is reflected in the manner in which the institutions are run. Children's opinion is not consulted in the preparation of time schedules, attending extra classes, food they eat, clothes they wear etc. This impinges heavily on the personality development of those innocent children seriously preventing the development of responsible behaviour and leadership qualities .

Association is also restricted and closely monitored by the institution which has had certain advantages in the children to the extent of making them withdraw from social contacts to become introverts. In the long run such individuals fail to maintain good social networks and thereby withdraw themselves into a lonely mode to become closed personalities to the detriment of the future development of child the old Volunteer Children's Institutions run by some individuals, NGOs and Missionaries for their own personnel gains is a serious matter that needs immediate attention

# CHAPTER SIX

## ANALYSIS OF FINDINGS II

### ISSUES OF DE-INSTITUTIONALIZATION

#### 6.1 INTRODUCTION

Although Institutionalisation is viewed as the preferred option to place a person or persons in the care of an institution several studies have demonstrated the harmful effects of institutionalisation particularly upon children. In consequence concerted efforts began to be made to transform systems of institutional care into those based on family and community support. This process called deinstitutionalisation is in force at present in the case of Children's Homes in Sri Lanka

De-institutionalisation cannot be achieved by just a single act of removing the clients , children in this instance, from institutions.. It is a process consisting of a collection of activities that involves the transformation of children's services.. It is a systematic, policy driven change which results in considerably less reliance on residential care and an increase in services aimed at keeping children within their families and communities.

As inferred from evidences the currently adopted de-institutionalization process appears to have some serious flaws at the post de-institutionalization stage wherein the monitoring of progress is not done satisfactorily Insufficient allocation of funds for the operation of such monitoring systems of de-institutionalized children has had negative impacts on those children. Children re-integrated with families that continue to experience abject poverty have had detrimental effects on the 'returnees' as those poor families could not afford to provide the same care, education and other facilities for the returnee children . When the

re-integrated children return to their original educational institutions they fail to adapt to the rural schools, children and staff. The resultant 'culture shocks' experienced by the re-integrated children has invariably led to children dropping out of school. With this trend of dropping out of school, the most unwanted consequential events such as the encouragement in child labour, entering into child marriages, resulting in the high incidence of child mothers and child fathers have taken place jeopardizing the chances for development of the next generation to come.

In recognition of the value of family based care as a preferred option the Department of Probation and Child Care Service along with the International and National NGOs are promoting and pursuing the process of de-institutionalization of the children. This Chapter attempts to identify the major issues related to de-institutionalisation and the possibilities of consequent reunification programmes. The issues considered in this chapter are limited to the impact of de-institutionalization on child survival, child development, non-discrimination, child participation, and the well being of the child.

## **6.2 DE-INSTITUTIONALISATION AS A THREAT TO CHILD SURVIVAL**

### **6.2.1 Water**

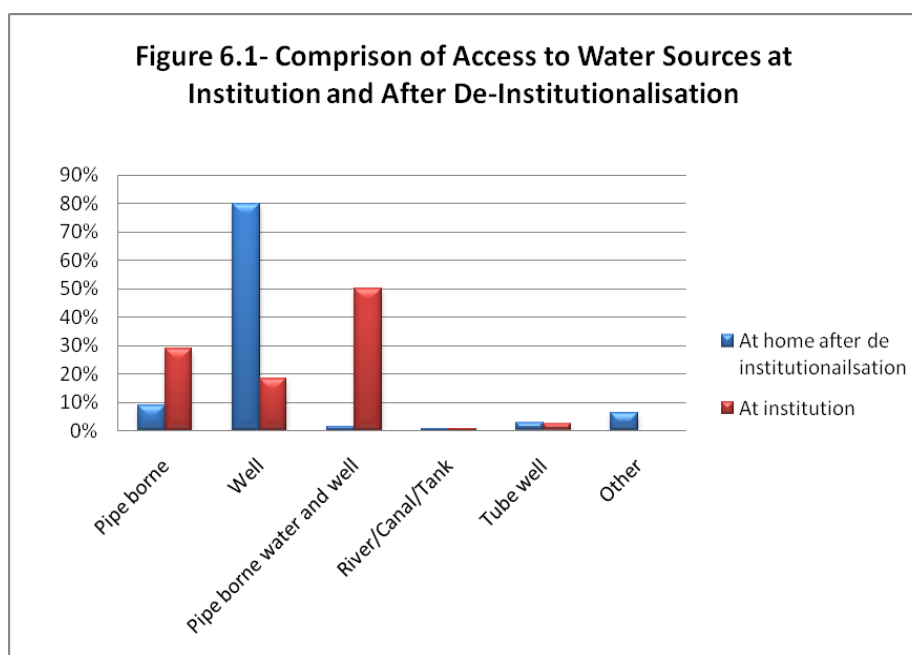
As mentioned in section children particularly the females walk long distances to access water from wells, rivers and streams. During the dry season particularly, those children who need to fetch water walk longer distances sometimes beyond as 8 kilometres. Walking long distances to access water has created security threats to the children. A de-institutionalised child expresses her fear thus;

'During the dry season we have to travel more than 2KM to access clean water. We don't have proper roads or bicycles to travel. Sometimes we risk the threat of attack by wild animals. If I have to travel by my self, I feel scared as I could be a target of hooligans that could even lead to sexual abuse and rape.'

- Girl, 14, De-Institutionalized Children's FGD, Batticaloa

Unlike the clean water provided in most of the institutions in abundance, the deinstitutionalised children are compelled to consume water that is poor in quality. (Figure 6.1) For example, water available to children in Kalladi is yellowish and stained.

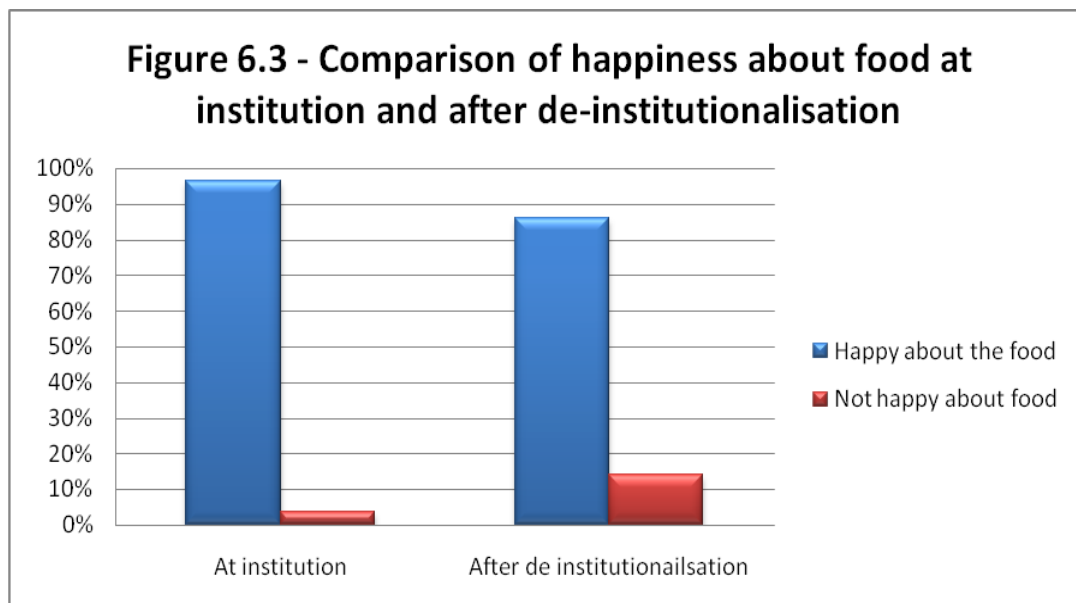
**Fig: 6.1 Comparison of Access to Water Sources at Institution and After De Institutionalisation**



### 6.2.2 Food security

Following de-institutionalisation children do not have access to quality food like the food that they had while they were at the institution. As a result to ensure their food security children had taken up employment to find the finances needed to obtain good food.

**Fig 6.2 Comparison of degrees of happiness expressed regarding food at institutions and after deinstitutionalisation**

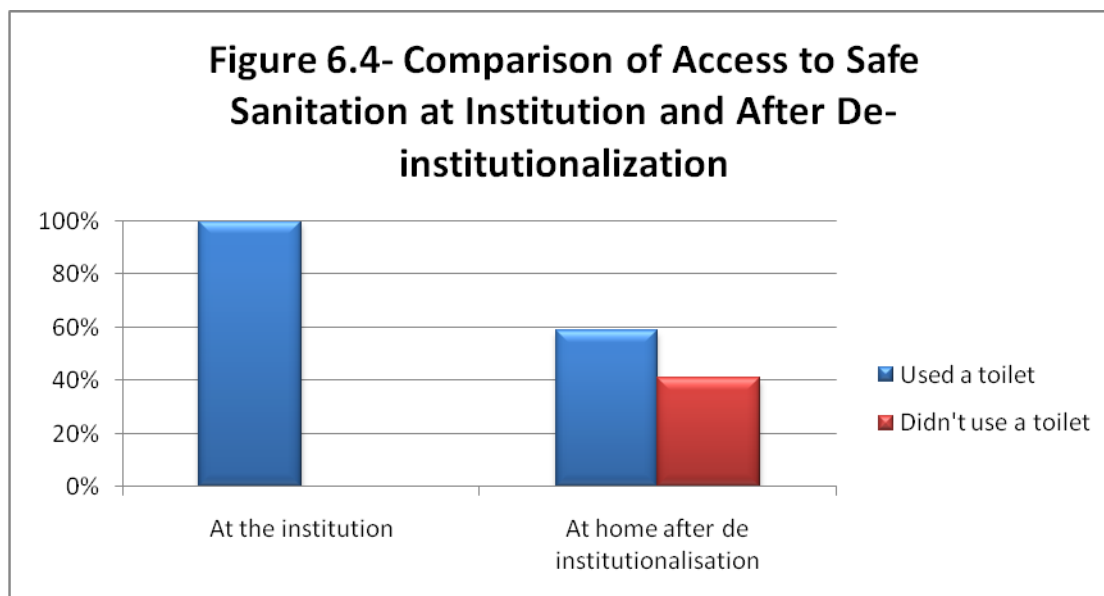


One of the main reasons for the institutionalisation of children, as mentioned by a parent had been the necessity to find good food and thereby ensure the food security of the children as they found it difficult to provide three meals a day due to poverty. Therefore, to place children back in such circumstances where families have limited opportunities to provide the children three high quality meals in adequate quantity is impossible. Furthermore, the gender based differences of food security is also seen in these communities. Local culture is such that a girl child's meal in a family is given least priority as the common belief is that the boys should be fed better as they are considered as the future bread winners of families. Such practices are bound to affect the development of the girl child but will also jeopardise future generations by malnourished girls having complications in their pregnancy and difficulties in breast feeding the babies adequately. Girl children in institutions do not face such situations as their food security is relatively good and cared for.

### **6.2.3 Sanitation**

Although children are taught in institutions how to use toilets properly and hygienically, once they return home, all that training becomes of no avail as over 40% of the children do not have toilets in their homes.

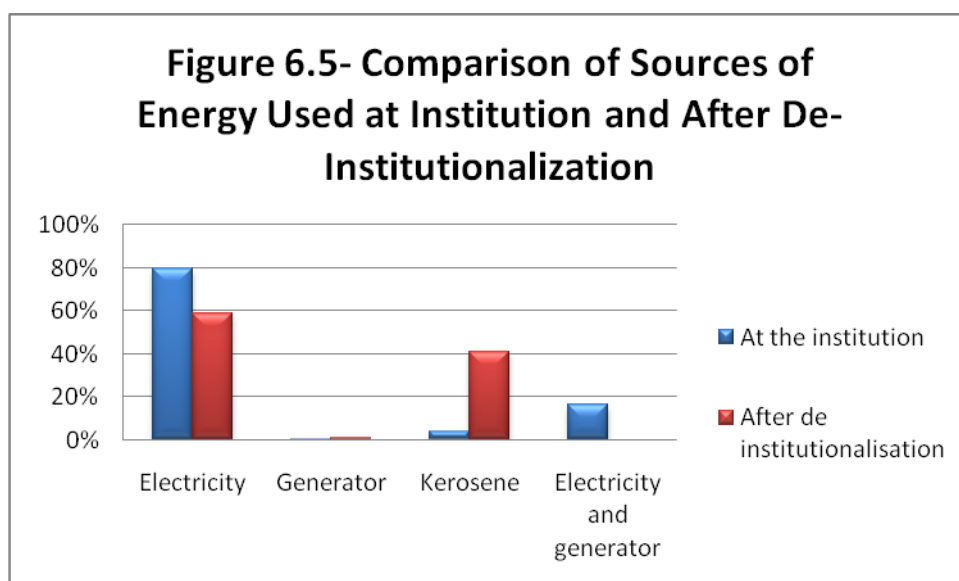
**Fig: 6.3 Comparison of Access to Safe Sanitation at Institution and After De-Institutionalization**



#### 6.2.4 Energy

Majority of the children (98 %) who enjoyed electricity and light at the institutions returned to the use of kerosene lamps (over 40%) for lighting in their homes. Quality lighting is essential to study long hours and without long hours which is needed to prepare for public examinations in Sri Lanka which are very competitive.

**Fig: 6.4 Comparisons of Sources of Energy Used at Institution and After De-Institutionalization**

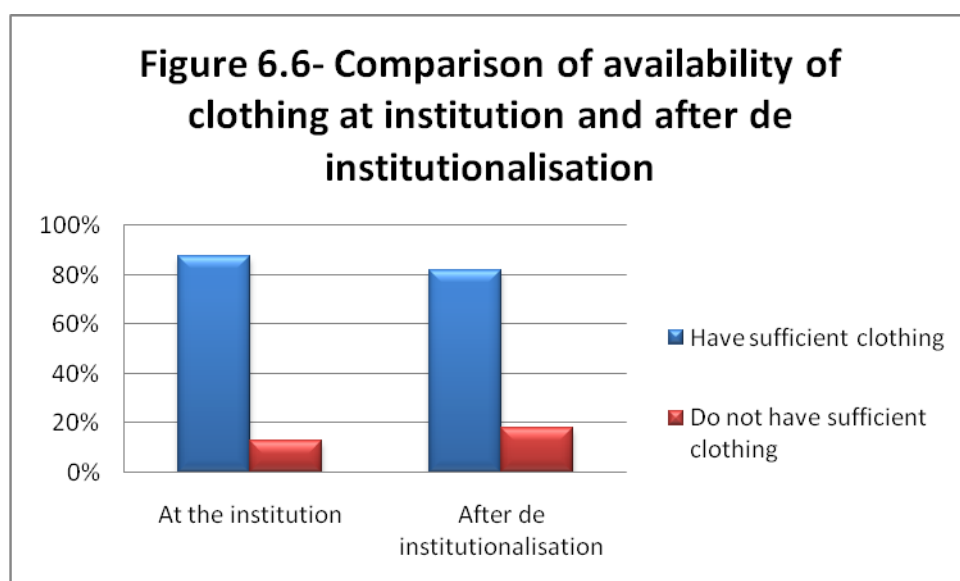


### 6.2.5 Clothing

As between the institutionalised children and the de institutionalised children, the expenses incurred on school uniforms differed. Although the material for the uniform is supplied by the government, the tailoring charges had to be borne. At the institutions such charges are borne by the institutions concerned but in the case of the de-institutionalized children the parents/caregivers have to bear the cost of tailoring the uniforms.

Younger children in the family rarely get a chance to wear new clothes. Often, it is seen that the younger children get to wear the old clothes worn by the elder siblings as it is difficult for the parents to afford too many new clothing items. The younger children suffer in the process sometimes leading to unwanted problems. Inspire of this situation over 80% of the de institutionalised children mentioned that they had sufficient clothing.

**Fig: 6.5 Comparison of availability of clothing at institution and after De-Institutionalization**



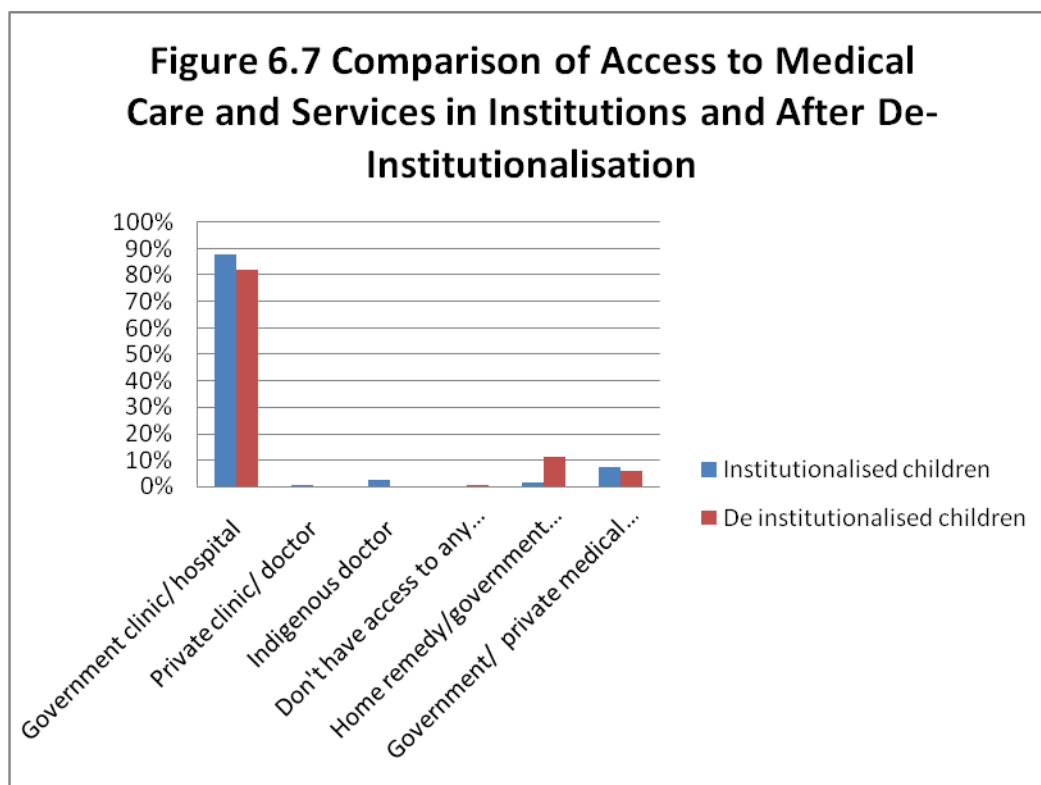
Even though the de-institutionalised children mentioned that they had sufficient clothing, they did not have the luxury of having a number of clothing items as they used to while they were in institutions.

### 6.2.6 Health

Access to good health facilities was limited to deinstitutionalised children. Such children enjoyed good health facilities during their stay with the institutions. The institutions with

access to good health facilities were able to provide access to good health facilities unlike in their homes. Therefore some children (over 10%) rely on home remedies to treat medical conditions. But as discussed in section, as many institutions had the practice of sending the children back to their parents/ Caregivers when children fell ill the deinstitutionalisation process did not create new issues in this regard.

**Fig: 6.5 Comparison of Access to Medical Care and Services in Institutions and After De-Institutionalisation**



In the rural agricultural communities, one of the key non communicable diseases was the infection of the respiratory tract. Infections induced by the use of agro chemicals during the flowering season, allergic reactions to pollen and dust most prevalent during the harvesting season have led to health problems in the study areas. As reported by the parents of de institutionalised children from the Paduvankarai Area, Batticaloa-

### 6.2.7 Protection

As identified in chapter 4 among the protection related factors that led to the Institutionalisation of children difficulties experienced in family relationships was found to be very important. Over 33% of the children in the sample did not have one or both

parents due to death. Other factors discussed under relationship difficulties included temporary inability of the parents to cope which was a concern for 33% of the sample.

Moreover, when both parents or the single parent go out to work out of sheer necessity, the children are left alone at home. This places them at a heavy risk of being abused by family members, neighbours /the step mothers / step fathers.

Furthermore, in situations of abject poverty when the houses of most rural families are located in areas vulnerable to rampages of 'rogue' elephants leading to issues on human/elephant conflict, children are placed at high risk.

Long distances to walk to access services also place children at heavy risk of being abused or coerced. Children having to grow up by themselves under conditions of poverty and extreme economic hardships are often at risk falling victim to sexual abuse, and sexual favours in return for financial or material incentives.

The vulnerability of child mothers is further discussed in a subsequent section

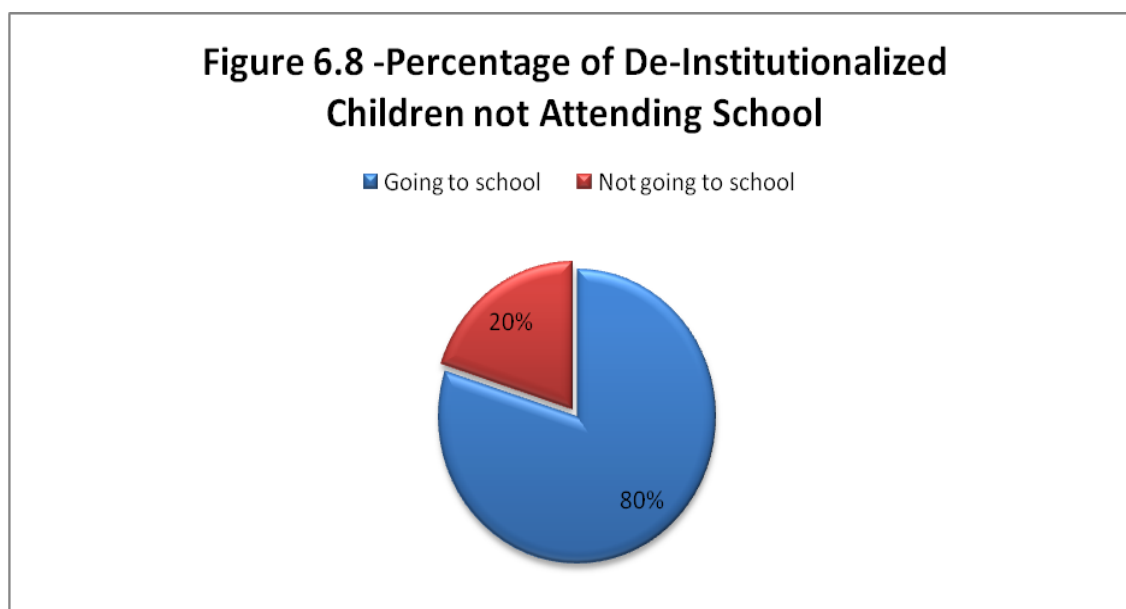
### **6.3 CHILD DEVELOPMENT IN THE CONTEXT OF DE-INSTITUTIONALISATION**

The process of de-institutionalisation has created many issues that require the attention of the authorities to be resolved. Among the many factors that had disrupted child development, education, being the foremost has been chosen for discussion here

#### **6.3.1 Education**

The issue here is that with de-institutionalization children who received quality education earlier are encountering situations wherein accessing to quality education is impossible. It is very difficult to access quality education from their homes. This has led to 20% of the de-institutionalised children dropping out of schools. Provision of quality education island wide is an issue that needs to be addressed at the macro level.

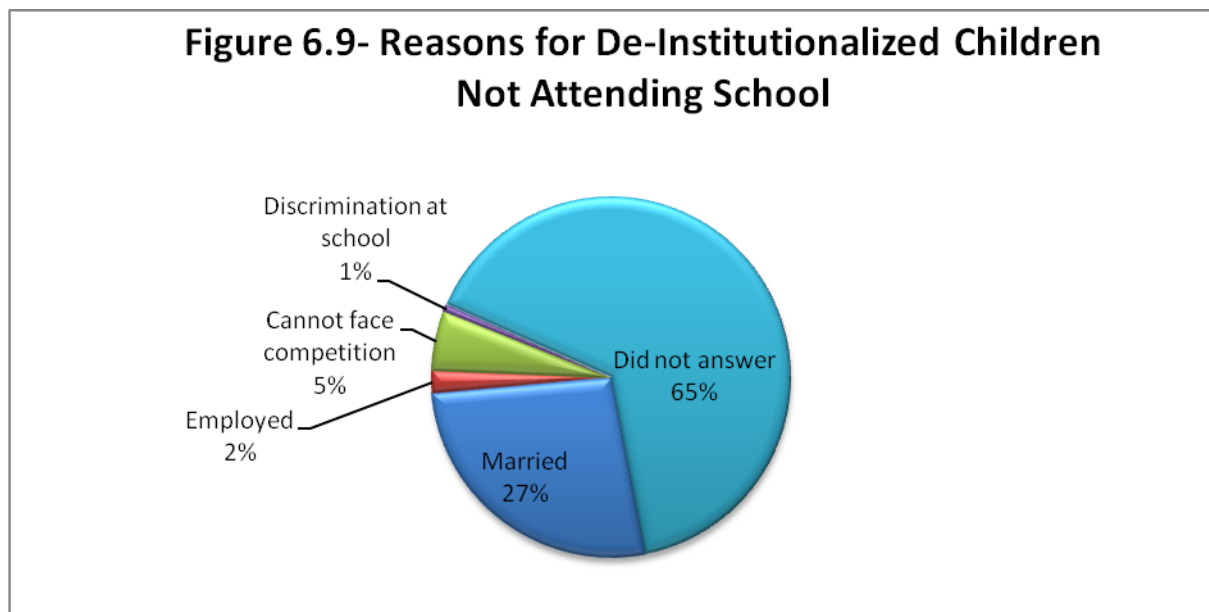
**Fig: 6.6 Percentage of De- Institutionalized Children not attending School**



While interrogating 20 % of the deinstitutionalised children who dropped out of schools 65% were reluctant to provide reasons.. 27% of the dropped out children (ie 5.4% of the total sample of de institutionalised children) were reported as having entered into matrimony after they were de institutionalised. Other reasons given by the said children included inability to face competition in schools, discrimination at school and being employed. However, many of these reasons including early marriage could not have contributed individually to the phenomenon of school drop outs unless they operated in combination along with other important reasons.

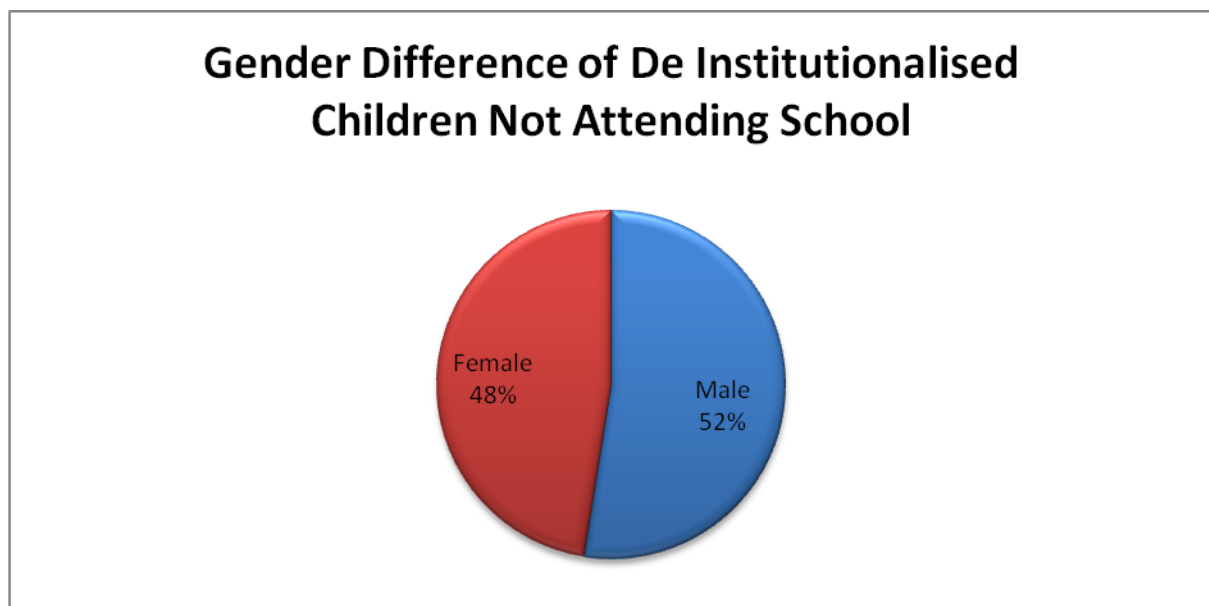
Although the children concerned did not mention their inability to adapt to the rural settings, circumstantial evidences revealed that the lack of the ability to adjust has been a primary cause for not taking to schooling in the remote/ rural areas. In the absence of conducive environments as provided by the institutions, the children could not cope. The schools they attended too were well equipped possessing all the facilities required for quality education. Thus the deinstitutionalised children were placed in a 'catch 22' situation with no plausible solution to the dilemma they were encountering.

**Fig: 6.7 Reasons for De- Institutionalized Children Not Attending School**



it is interesting to note that the gender differences among the school drop outs among the deinstitutionalised children was almost equal

**Fig: 6.8 Gender Difference of De- Institutionalised Children Not Attending School**



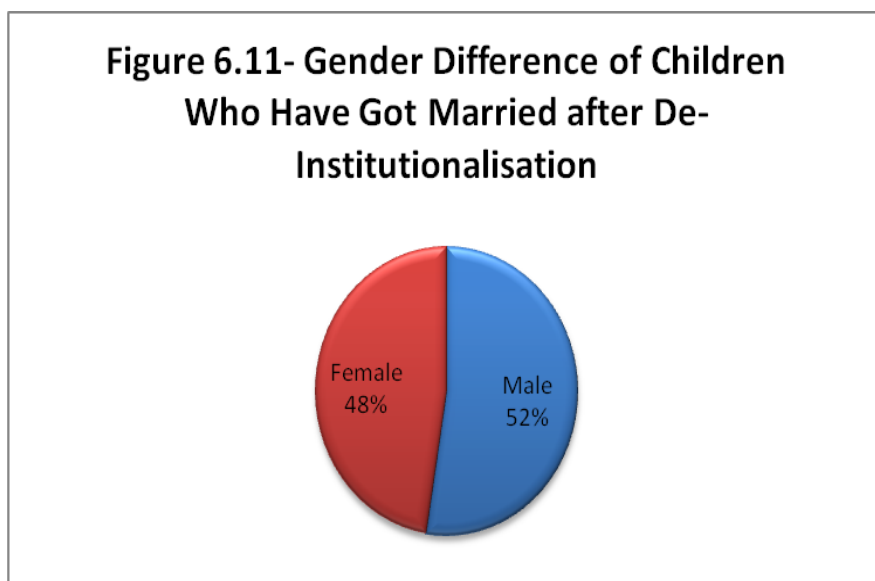
## **6.4 UNFORESEEN CIRCUMSTANCES OF DE - INSTITUTIONALIZATION?**

The unforeseen circumstances of deinstitutionalization are many. Some of them have created new social problems to the society already ridden with numerous problems. To find ways and means by which to resolve the issues identified, each one of those have to be examined and assessed before advocating the transformation process which is much more than the removal of children from institutions. The issues included are, the issues of child mothers and child fathers, the issue of child labour, discrimination, and the right to participation.

### **6.4.1 Child Mothers and Child Fathers**

Equal numbers of boys and girls who had dropped out of school following the process of deinstitutionalisation had entered matrimony. There were girls and boys in their tender ages of 11 and 12 years respectively who had entered matrimony. There were therefore only child mothers, and child fathers among the deinstitutionalised children. If not for deinstitutionalisation, they would have been studying at an institution getting educated rather than parenting children in their childhood. This development has disproved the assurances of guaranteeing a good future on deinstitutionalising to those children. Further, this aspect highlights the discrepancies pertaining to guaranteeing and monitoring the post deinstitutionalisation period promising a good future to those deinstitutionalised children. The backlash of an unattended system of de-institutionalisation is clearly described in the following expressions of a deinstitutionalised girl.

**Fig:6.9 Gender Difference of Children Who Have Got Married after De-Institutionalisation**



“I was reunified with the family by Department of Probation with the support of an International Organization. performed well in school while I was at the institution, but after I returned home I had to go back to my old school. Going back to my previous school was not a pleasant experience. I found it really hard to get along my former colleagues. They used to make fun out of me. I didn’t have a single friend at school. I was feeling very lonely. I started to skip school regularly as I thought it was the best option to avoid being bullied. After few months of being alone, without a single friend, an elderly boy (2 years older than me) approached me and became friends. He was the only friend I had. He helped me cope. Then I fell in love with him and soon I became pregnant and I could not continue school. As the legal system does not permit, we could not get married and we were asked by our parents to live separately. He started another affair with someone else and he does not come to see me. I am left with my child who is one and half years old”- Girl (16) Trincomalee.

#### **6.4.2 Child Labour**

Though child labour was not recorded in the quantitative survey, as per key stakeholders, children and parents of de institutionalised children; there had been many instances of child labour where children have been employed following de institutionalisation which prompted them to drop out of school at the earliest.

#### **6.5 DISCRIMINATION**

Teachers and children alike, in rural schools are alleged to be discriminating against the children who returned to the community after de institutionalisation. De institutionalised children on arrival at the school in the community kept themselves aloof from the rest of the students due to their 'out of place' feelings instigated by the 'culture shock' There were other discriminatory factors such as caste, that became operative during such encounters worsening the situation further.

Children who were converted to other religions other than their own had uncomfortable encounters with other children and family members looking down on them in a condescending and humiliating manner to the embarrassment of the children concerned. When possible other children took it on them by shunning them from social gatherings.

#### **6.6 RIGHT TO PARTICIPATE**

Child participation in decision making related to the process of de-institutionalization was seen as a child oriented protective measure. In all 3 Focus Group Discussions held with the De-institutionalized children. Many of them expressed their views that, the persons handling the de-institutionalization process had referred to the family as the best option for a child to grow up with and not the institution. The advice given by the officer has made them decide on being de-institutionalized. After being de-institutionalized most of the children feel that was not the best decision they have made considering their best interests.

Children after reunification have issues with adapting to the situation at home and in fitting in with the community, as the child is more used to the institutional setting. Therefore, cornering of the particular child by the other siblings, the society and at school is common.

This situation limits child's freedom to participate in play or decision making activities at home or school.

Children who have been converted to another religion after institutionalization might not get opportunities to practice their newly adopted faith at home.

## **6.7 CONCLUSION: HITHER DEINSTITUTIONALIZATION ?**

Promoting family based care and promoting de-institutionalisation and the subsequent reintegration with family, seem to be one of the preferred alternative care options for children in institutions. However, there seems to be many discrepancies with regard to the process of reintegration. Once children are de institutionalised, they are at risk of falling back to the situation in which they were used to prior to institutionalisation or to an even worse situation.

The first visible impact of de institutionalisation seems to be the disruption of education and the disruption of the child's living routine that the child was used to, in the institution. Economic issues come next as the child is seen as an additional burden for the family/other siblings. Unlike returning home for short vacations during school holidays, continued stay at home could lead to jealousy and rivalry among the siblings ,competition for the often limited supply of food and resources which possibilities of the siblings becoming antagonistic towards the reintegrated child.

Apart from the experience of being cornered. the reintegrated child may also find it difficult to cope with the culture shock to adapt to the home environment, society and the school wherein the child again be marginalised and cornered by fellow students in school and even by the teachers. In practice such instances have forced the reintegrated child to drop out of school. A support mechanism should therefore put in place to help such children cope with such situations..

Once dropped out from school prematurely, they are prone to seek income generating activities to earn the money badly needed by the family. This exposes the child in a vulnerable situations wherein child labour is exploited. Another characteristic of institutionalisation has been the unisex environment that the integrated child was used to earlier . Such children quite often are uncomfortable in a new environment with males and

female present. Such sudden exposure may encourage such children to experiment with sexual behaviour to the detriment of the child's character and future possibly leading to higher incidences of child mothers and child fathers. Child parents place their children at higher risk as they themselves are children who cannot provide the care expected of a child.

Therefore, the process of reintegration unless planned methodically and implemented properly with support activities undertaken in time, the de-institutionalisation based reintegration could lead to harmful outcomes impacting severely on the children, their families and the children born to child parents. The reintegration programmes therefore should focus on adopting community based support systems that provide a smooth phasing out program facilitated by a carefully monitored programme programme of transference.

#### **a) Is Institutionalization the Best Care Option for a Child in Need of Care?**

It appears prudent to ask ourselves the question whether institutionalization is the best care option for a child in need of care. Institutionalization is prescribed only if and when such a move is in the best interest of the child. The underlying reasons for institutionalizing the child should be analyzed when deciding on institutionalizing the child. There should be periodic assessments and reviews of the decisions and circumstances relevant to the child's placement. There is a growing global consensus and a wealth of research that supports sporadic or isolated efforts to improve individual institutions but they will not solve the problems of children in residential care, or be able to meet their best interests.(Innocenti: 2003)

Institutions are able to attend to physical and cognitive needs of people as well as the needs for social and emotional stimulation in any way comparable to what can be achieved in a setting which is open to life within society. Yet, children in institutions are deprived of affective and personal care, as all children are submitted to collective routines. The institutions are unable to make use of sufficient spaces to allow the unique personality of each individual to be expressed, developed and tapped to the full. (Innocenti:2003) The debate on the freedoms, rights and guarantees to which children should be entitled, as well as demands for human development policies respecting the autonomy and capabilities of families that arose in the United States and in some European countries, during 1960s and 1970s, began to stimulate the doubt that the use of residential educational and care

centres for children constituted a form of social exclusion, and at times of deprivation of freedom, which failed to comply with any legal guarantees. (Innocenti: 2003)

#### **b) De-institutionalization for Family Based Care**

If institutionalization has had damaging impacts on the child do the deinstitutionalization of those children provide the answer? The decision lies heavily on the value structure of the society understanding the roles of its members and in defining the responsibilities and instruments needed to ensure the children's rights. (Innocenti: 2003) When promoting deinstitutionalization, it seems pertinent to keep in mind that the following factors play important roles- law, public policies, funding allocation, cultural understanding of families, social movements to promote family based care, management of services and the social practices.

Some of the deinstitutionalisation measures advocated by the knowledgeable in the field include

the prevention of institutionalisation of children itself while gradually reducing the number of children admitted into such institutions by devising/advocating poverty reduction strategies while improving the overall social and economic conditions in the country. In addition improving and promoting the development the network among children's institutions and boarding-type of children's institutions,

The urgency of converting state child institutions into family-based support centers was also emphasized while creating systems of alternative services (community and family-based services, guardianship, trusteeship, fostering, adoption, implementing mechanisms of expanding and stimulating the opportunities of giving children to families (biological or alternative); and creation of the system of reorientation for the staff at child related institutions and training of social workers.

In many of those studies the main reasons attributed to the institutionalization of children were poverty and family breakup .Poverty eradication and family unity therefore continue to remain as the two main contributory factors that need to be addressed at the earliest by the authorities concerned to commit to the de-institutionalization process while ensuring a family based care system that would willingly take in those deinstitutionalized children to naturalize them into the family care system without prejudice

When promoting family based care as the best care option, attention has to be paid to the maintenance of the balance between the functions attributed to families and the provision of social services as a resource to support families in performing their functions during normal everyday life. In this context, public policies should reflect the commitment towards promoting family based care, based on a comprehensive plan for child policy and resource allocation. Building family based care options requires the development of comprehensive systems and services that include

- Selecting and training substitute families
- Establishment of Legal, policy and procedural frameworks to ensure effective gate keeping and to clarify the roles and responsibilities of the carer and the State
- Maintaining minimum standards and care planning, monitoring and inspection services
- Mobilizing the beneficiary communities and children to monitor the accountability of stakeholders.
- Providing Social protection mechanisms to ensure that the substitute family has the final means to provide for the child
- Provision of Technical and social support to ensure that the child is cared for and protected
- Recruit Sufficient professional social work staff to support the child, substitute caregiver and the child's birth parents.
- Campaigning and creation of awareness to ensure public support for family-based care at every level.

# CHAPTER SEVEN

## RECOMMENDATIONS

This research study undertaken to identify and examine push factors that force the children out of their homes into children's homes, and the pull factors that attract/draws the children away from their residences to become entrapped within institutions attempts to identify the cumulative issues that impinge on the de-institutionalised children to recommend the need to address the issues identified and suggest the establishment of support services urgently needed to revamp the system of institutionalization for those children in need of such facilities

Though it is not easy to come by a common alternative care for the needy children, different forms of alternative care seem to require a case by case approach. What ever the approach a rights based transparent system of care and protection should be put in place

This chapter therefore attempts to identify the ways and means by which a rights based, efficient and transparent system of caring and protecting the vulnerable children could be ensured while ascertaining the number of children currently living in the said institutions and those deinstitutionalised to identify finally the number and categories of children who may actually need institutionalization and those that need to be carefully integrated into the folds of the family based care system.

To achieve the objectives mentioned above the recommendations are presented below

### **1.0 Decision making on Institutionalizing a Child**

- a) Consult children in the Process of Institutionalization.
- b) Analyse the underlying reason/s for institutionalization care
- c) Select an institution from the same District in close proximity to the home to ensure easy access to family members.

- d) Select an institution that follows the religion of the child and host children belonging to child's ethnic background

**i) Recommendations for Institutions**

*Refrain from Religious Conversions- Religious conversions have been reduced to a great extent after formalizing the process of admitting children into institutions. Yet conversions away from the public eye are reported to be taking place in institutions, particularly in institutions based on Christian and Catholic religious faiths. Although children are not forced to participate in religious activities of the religion of the institution, there is no option in most organizations to follow a faith other than the faith of the institution. It is recommended to admit children to institutions based on the religion of the child.*

**2.0 CHILD PARTICIPATION**

Develop appropriate mechanisms to ensure genuine child participation in the process of de-institutionalisation for the following reasons.

- In respect of their fundamental right to participate in decision-making which affects them
- Encourage active participation in the de-institutionalisation process as it can be a therapeutic and developmental experience
- Since children have a different perspective on their situation and need involve children in decision making,

**a) Promote Regular Interaction with the Family-**

In some institutions visits by family members or home visits for the child are not allowed regularly. It is recommended to promote child's relationship with family as much as possible. Children should be allowed to visit family members at least once a week visit home for weekends at least once a month and for special events at home. Home visits during school holidays should be made compulsory. Probation Department can regulate the number of visits allowed by family members per month, number of persons allowed to visit

and number of home visits allowed for the child in a manner that child's interaction with the family is maximized. As the parents of institutionalised child, especially the mother should be made compulsory to visit the child at least once a month for which the traveling costs should be taken care of by the institution that hosts the children.

**b) Allow children to interact with school friends after school hours.**

For this purpose Children's Clubs established in each GN Division under the direction of the Child Rights Promoting Officers should be incorporated. CRPOs and POs should be given the task of prioritising establishment of Children's Clubs in GN Divisions at which institutions are established.

### **3.0 De-institutionalization**

- a) Consult children in the process of de-institutionalization
- b) Prepare the child and the family for the de-institutionalized process- Provide psycho-social support –for the family to adjust, Guide single parents on single parent parenting.
- c) Ensure child's basic needs are met by the family (three nutritious meals per day, secure house with space for child to grow, safe water and sanitation facilities, access to education, transport facilities)
- d) Strengthen the families to take care of the child- Introduce sponsorship programmes for de-institutionalized children, introduce sustainable income generation mechanisms to families, support in obtaining land titles, building houses and ensuring infrastructure facilities.
- e) Ensure access to education- When children are being de-institutionalized it is important to ensure that the child has access to education (admission to schools, facilities in schools, affordability of school equipment, distance to school, method of transport and affordability of transport).

- f) Tuition classes have come to stay as important requirements to help children succeed in the current education system. When de-institutionalizing a child, accessibility and affordability of tuition classes should also be considered.
- g) If the child is out of school or is interested in following vocational training, possible avenues of vocational training should be explored and introduced.
- h) Monitor the de-institutionalized child's status- regularly for a minimum period of 5 years To be undertaken by the Probation Department, VHMT, and the Village Child Rights Monitoring Committee.

#### **4.0 Monitoring**

##### **i) Monitoring children's matters**

Administrative rules and regulations of institutions should be made flexible as rigid administration rules and regulations of the institutions can have negative impact on child

related matters

Establish systematic career development activities/programmes in institutions- Career guidance, vocational training, that support employment search.

Provide life skill training for children in institutions.

##### **ii) Monitoring Institutions**

###### **i) Introduce a Web portal to monitor all the institutions-**

Each institution should be given a secure web page to update the number of children, details about the management and paid employees, facilities available, activities, children's interaction with family, expenditure, visits by government officers regularly. The above information should be made publicly available. In depth updated information on individual children should be made accessible to the probation officer and the primary caregiver of the particular child. As internet is not available to the peripheral communities, an updated SMS alert could be made available to the primary caregiver who could be made to register compulsorily. Such a programme could involve Corporate Social Responsibility project of a telecommunication service provider. POs should update

the details of institutionalized/ de-institutionalized children consultatively with the relevant institutions.

- ii) Increase coordination between the NCPA officials, Probation officials, and Social Service Officials in monitoring the status of institutionalized and de-institutionalized children. In order to increase coordination, role of the Probation Officers, Social Service Officers, NCPA Coordinators in monitoring children's institutions should be clear. Documenting the roles and conducting awareness programmes for the relevant officials will be useful.
- iii Systematically review and improve Voluntary Home Monitoring Team (VHMT) guidelines. Allocation of funds to carry out VHMT assessments and monitoring, efficient coordination of VHMT team members and strong monitoring of the work conducted by VHMT team members should be in place.
- iv) Ensure an Efficient Complaint Reporting System is in Place for Children in Institutions- Children should have easy and confidential means to report mis-management of the institution or child abuse cases in institutions to Probations Departments, National Child Protection Authority or Women and Children's Desk in the Police Station. In case of a report there should be a confidential mechanism to immediately investigate and address the issue. For this purpose, a District wise free hotline should be established to which contacting is possible through calling and text messages. The hotline (such as the 119 used by Police and 1919 of the Government Information Centre) should be under the direct supervision of the POIC. Children in institutions should be made aware about the facility through stickers displaying the relevant numbers at every institution.
- v) Programme of the Institution should be monitored closely by Probation Officer and the Voluntary Homes Monitoring Team.
- vi) Support for the Probation Department to organize Case Conferences. Organizing Case Conferences is costly and the Department of Probation does not have sufficient allocations.

## **5.0 Administration**

- a) Establish Safe houses/ Receiving Home- As a result of not having safe houses or Receiving Homes in the Eastern Province, children facing protection issues are sent to other Provinces for rehabilitation. It is recommended that the Probation Department be given assistance to clear deeds and smoothly transfer the Batticaloa Safe House, funded by UNICEF and managed by ESCO to the Probation Department. As one safe house is not sufficient for the Province establishing Safe Houses and Receiving Homes in other Districts in the province should be considered. When establishing such institutions it is necessary to ensure at least minimum standards and recruit sufficient number of competent cadres on a long term basis..
- b) Provide sufficient fuel allowance to Probation Officers. The current fuel allowance is not sufficient to conduct scheduled field visits.
- c) Ensure a working environment free of political influence for Probation Officers in enable them to carry out their task according to the rules.
- d) Protect Disabled Children in Institutions- establish a compulsory quota for institutions-  
5 % for physically disabled children. Facilities for differently abled children should also be ensured in institutions.
- e) Incorporate all institutions as hostels.

### **Addendum**

Professional education on how to protect and promote child rights, wellbeing and psychological standards should be given to the home managers, matron, warden, etc. in order to, increase awareness. Such programmes should be implemented by Probation Department by networking with NISD, NCPA, HRC, Assistant Director of Education.

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Department of Probation and Child Care Services. Sri Lanka.  
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**ANNEXURE A-**  
**LIST OF PERSON'S INTERVIEWED**

Anushka, U.G (Ms.) Probation Officer, Department of Probations and Child Care Services, Eastern Province Head Quarters, Trincomalee.

Arafath, Yasir (Mr.) NCPA District Coordinator, Kachcheri, Trincomalee

Arulanandam, A (Rev.) President, Methodist Church Children's home, Kallar Kaluwanchikudy Batticaloa

Arulanandam, Santhakumari (Mrs.) Manager, Methodist Church Children's home, Kallar Kaluwanchikudy Batticaloa

Asmy (Mr.) Save the Children, Akkaraipattu

Azardeen (Mr.) Psycho-social Coordinator, National Child Protection Authority, Kalmunai

Chelladorai, Patrick (Mr.) Director, EHED, Batticaloa

Chrishanthi, Namal (Ms.), Field Officer, YMCA, Batticaloa

David, D.D (Mr.), General Secretary (CEO), YMCA, Batticaloa

Faizal, Abdul Rahim Mohamed (Mr.) CRPO District Coordinator, Trincomalee

Farhan, ACM (Mr.) Probation Officer In Charge, Trincomalee

Gnanasoundary (Ms.), Probation Officer, DPCC Office, Batticaloa

Grazia, Mariya (Sister) Miani Nagar Girl's home, Thannamunai, Batticaloa

Hameed, A L (Mr.) Manager/ Teacher, Hasanath Children's Home, Kinniya, Trincomalee

Janananayananda (Swami), Rama Krishna Mission, Katthankudi

Kamalathas, (Mr.) Home Manager, Dharisanam

Kannan, (Mr.) Probation Officer, Kaluwanchikudy

Khan, Ameer (Mr.) Hasanath Children's home, Kinniya, Trincomalee

Kugathan, (Mr.) CRPO, Social Care Centre, Kalliyankadhu, Manmunai North DS Division, Batticaloa

Kumarasuriyam, Thillaiamma (Ms.) President, Women's Development Foundation (WDF) Akkaraipattu

Lokuhettige, Ranjith (Mr.) OIC, Minor Offence branch, Seruvila Police Station, Trincomalee

Loorthu, S (Ms.), Manager, St. Joseph's Girls Home, Thirukkivil

Maheshika, A G H (Ms.) Woman Police Constable 7116, Seruvila Police Station

Mary, Ann (Sister) Miani Nagar Girl's home, Thannamunai, Batticaloa

Mathivathanam, (Mr.) Field Officer, AHAM Field Office, Muttur, Trincomalee

Mohammed Faizal, Amdhul Raheem (Mr.) CRPA District Coordinator, Trincomalee

Oliver, Blanka (Superior Sister) Miani Nagar Girl's home, Thannamunai, Batticaloa

Outschoorn, Cryton (Father) EHED, Batticaloa

Paskar (Mr.) Save the Children, Akkaraipattu

Patrick, S (Mr.) Programme Coordinator, YMCA, Batticaloa

Patrick (Mr.) Director, EHED, Batticaloa

Perinbarajah, B (Mr.) Manager, Ampara District Thirunavukarasu Nayanar Kurukula Adinam Children's Home, Vinayagapuram 1, Thirukkivil

Piragala, S (Ms.) District Social Service Officer, Trincomalee

Ponnathurai (Ms.) Additional Director, Eastern Self Reliant Community Awareness Organisation (ESCO), Batticaloa

Prapa, K (Mr.) Project Coordinator, Equal Access to Justice Project, Sarvodaya, Trincomalee

Premathilake, Indika Prasanna (Mr.) OIC, Police Station Seruvila, Trincomalee

Manager, Sarana Children's Home, Uhana

Raganayahi, Suppaiyah (Ms.) Woman Police Sergeant 3601, Police Station, Kalmunai

Rajmoni, (Mr.) Social worker, Vinayagapuram, Thirukkivil

Sahid, Uduman (Mr.) Manager, Muslim Children's Orphanage, Kattankudi

Samurdhika Herath (Ms.) Woman Police Constable 2083, Police Station, Kalmunai

Satchivanandam, P (Mr.) District Coordinator, AHAM- Trincomalee District Youth Development

Shashikala, (Ms.) Field Officer Social Envo Vision Organisaition- Kalmunai Tamil Division, Ampara

Sri Devi (Ms.), Director, TDH, Batticaloa

Subandhini, S (Ms.), Accountant, St. Joseph's Girls Home, Thirukkivil

Subasha, DG (Mr.) Project Coordinator, Department of Probation and Child Care, Trincomalee

Sudajini (Ms.) Field Officer, Social Envo Vision Organisaition- Kalmunai Tamil Division, Ampara

Sylvester, Sritharan (Rev. Father. Prof.) EHED, Batticaloa

Thavanathan, S (Mr.) Assistant Director of Education, Zonal Education Office, Trincomalee

Thayaparan, Iyathurai (Mr.) Programme Assistant- Child Protection, Unicef, Batticaloa

Thuthiharan, Thangarajah (Ms.) Project Coordinator of the Women's Development Foundation Akkaraipattu

Warnakulasingham, Kamalathas, (Mr.) President , Local NGO consortium, Batticaloa

Wijetillake, Ishan (Mr.), Probations Commissioner, Department of Probations and Child Care Services, Eastern Province Head Quarters, Trincomalee.

Yaseer Arafath M.R (Mr.), NCPA, District Coordinator, Trincomalee

Yamuna, (Ms.) Assistant Project Coordinator, AHAM Field Office, Muttur, Trincomalee