



# IACN

# QUARTERLY

Issue 16 / September 2024

## Hello,

Dear All,

The 16<sup>th</sup> edition of the IACN Quarterly is theme-specific and showcases diverse voices, experiences, and perspectives on the transition from residential care to family-based care. As the current legal and social environment in the country shifts towards family-based care models, there is a renewed focus on reintegrating children with their families. Initiatives like Mission Vatsalya, the recent Guidelines on Model Foster Care 2024, and various schemes and policies on aftercare reflect this change in care approaches.

This quarterly issue presents different tools and methods of transition being practiced in India, along with case studies and promising practices and experiences of care leavers transitioning from Child Care Institutions. It also highlights the perspective on family-based care for children with disabilities and underscores the importance of kindness and love in coping with trauma.

We would like to express our gratitude to everyone who contributed to this issue of the IACN Quarterly.

If you wish to share any resources, information, or articles for the IACN website or Quarterly newsletter, please write to us at [iacnsecretariat@iacn.in](mailto:iacnsecretariat@iacn.in).

Sincerely,  
IACN Secretariat

## Knowledge Resources

*Information and Knowledge Resources on Alternative Care*

**Aftercare Assessment and Plan Tool - By Aruna**

**Pre-Aftercare Assessment Form:**

<https://iacn.in/resource/aftercare-assessment-form-form-i/>

**After Care Plan Form: <https://iacn.in/resource/aftercare-plan-tool-form-ii/>**

**Recruiting Foster Families – Tips to Move Ahead! – By Nina P. Nayak <https://iacn.in/resource/recruiting-foster-families/>**

## Perspectives

*Commentary, Analysis and Insights*

**The Power of Kindness and Love in Trauma-Informed Care – By Ian Forber - Pratt, Deputy Executive Director, Children's Emergency Relief International (CERI)**

**Beyond Blood: The Power of Family – By Simran, Independent Legal Consultant**

**Transition Model of Care and Inclusivity for Care Leavers in India – Dr. Gurneet Kaur Kalra, Manager, Research and Advocacy, Udayan Care**

**What Constitutes Family for Children Without Parental Care – Poonam Kashyap, SBC NUNV, UNICEF Mumbai Field Office**

## Updates from the Field

*Learnings and experiences shared by our Fellow members*

**Transitioning from Residential Care to Family-Based Care: A Comprehensive Approach – Rajendra Meher, Chief Executive Officer, Youth Council for Development Alternatives (YCDA)**

**Strengthening Child Protection Ecosystem: CRY's Role in Enhancing Alternative Care for Vulnerable Children during COVID-19 – Jaya Singh, General Manager – Programme, Sourabh Ghosh, Senior Manager -Research & Knowledge & Partha Dasgupta, Senior Manager - Programme, CRY**

**Parveen's Journey: From Institution to Home – Aashiq Hussain & Sabahat Bashir, District Coordinators, Human Welfare Voluntary Organization (HWVO)**

**Navigating the Path to Restoration: A Transitioning Support Tool for children moving from Institutional to Family Based Care – Documented by: Rashmi Taylor, Prerana**

**Navigating Life beyond Care: Insights from Care-Experienced Young Adult – Ms. Anamika Vishwanath, Lead for Youth Programs, Miracle Foundation India.**

**Children's Well Being In Foster Caregiving – By Shraddha Tiwary, M.Sc Clinical Psychology & Dr. Fouzia Alsabah Shaikh, Assistant Professor, Amity University, Haryana**

**Journey of a Boy from a School Goer to Bread Earner: P.E.R. Framework of Intervention Development – Sania Girdhar, Psychologist**

## First Person

*Interview with Care Leavers*

**Ms. Anisha, Director, CLiC**

**Mr. Jyoti Kumar Mohanty, Secretary, OCLA**

**For Every Child, A Family**



# Knowledge Resource

*After Care is just not about extension of period for continuing the care and protection needs of the institutionalized children rather conscious investment to unlock human potential through systematic approach and redefined intervention to harness wellbeing and ability to connect the world outside the institution and live a full-fledged life with dignity.*

## Aftercare Assessment and Plan Tool

**By Aruna**

After Care is meant for all young persons, who during their childhood have grown up in any form of Alternative Care such as children's Homes, Observation Homes, etc., or fit facilities and had to leave them upon attaining 18 years of age. This transition for a young person leaving the childcare setting and moving to independent living throws up various challenges as well as offers opportunities as they go through these situational and emotional changes. This transition period is a delicate period because if young persons remain unsupported during this time, opportunities available to them may be lost. As a part of piloting model aftercare in collaboration with District Child Protection Unit of Khurda in Odisha, Changing the Way We Care implementing partner ARUNA have been supporting to strengthening the After Care Assessment and Planning to challenge individual needs and critical developmental domains for effective and sustained social reintegration of young adults.

### Pre-Aftercare Assessment

The Pre-aftercare assessment aims at examining the critical developmental and wellbeing domains that needs to be improved and prepared for each and

every child in institutional care between 16- 18 years of age. The Pre-Aftercare Assessment explores and gathers personal and social situation of the child and his/her status of development domains to identify and plan for the aftercare support to cover the required knowledge, skill, behaviour, service, and connectedness for social reintegration. This pre-assessment will be done by the CCI staffs in consultation with the child and different stakeholders. The aftercare assessment offers the scopes and flexibility to the Caseworker/ superintendent for formulating observations and recommendations for the Aftercare intervention of the child aligned to the individual care plan while living in the institution and pave the way for the path for smooth and safe deinstitutionalization.

### Individual Aftercare Plan

Built upon the pre-aftercare assessment and its implementation, the Individual After Care Plan needs to prepare when the child/young adult gets ready to venture out of the childcare institution after attaining 18 years of age. The Aftercare plan will be developed to set specific, measurable, achievable, realistic and timebound goals and activities to improve the developmental gaps and equip the child/young adult

with necessary information, training, and skills that support education, employment, social connectedness for independent living and social reintegration. Once the aftercare plan is developed, the facilitator(s) may take the support of the expert, counsellor, or life coach for review and adjustment in the process to make the goals realistic and growth-oriented. The Aftercare plan aims at strengthening the most critical needs within developmental domains that supports the wellbeing and social reintegration, however, some (six) suggestive domains include Health, Behaviour patterns, Education, Vocational training, and Life skills. The Aftercare Plan will guide and direct both the child/young adult and Aftercare service provider to design and implement services for realizing the set goals. Both will mutually own the plan and contribute their respective roles and obligations. The plan will leverage other stakeholders and services for holistic growth and successful aftercare support. The After Care Plan will be monitored and reviewed monthly, quarterly, and annually by the After-care organisation, aftercare support team and competent authority as per the JJR guidance implemented by District Child Protection Unit.

Suggestive tools for Assessment and Planning of Individual After Care for child/young adult living in Childcare Institutions.

**Pre-Aftercare Assessment Form**  
<https://iacn.in/resource/aftercare-assessment-form-form-i/>

**After Care Plan Form** <https://iacn.in/resource/aftercare-plan-tool-form-ii/>

**For more information, please write to:**

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**Susmita Bhoi** @ Bhoi, Susmita.Bhoi@crs.org



## Recruiting Foster Families – Tips to Move Ahead!

<https://iacn.in/resource/recruiting-foster-families/>

**By Nina P. Nayak**

Recruiting foster families in India for children in institutions is mandated by law, yet current services have reached only a minuscule number of children, mostly through extended families (known more familiarly as kinship care) as foster care as a practice is yet to gain momentum in the country. Foster care is viewed as a “next best” option, implemented only after exhausting efforts to support birth families. With approximately 2.6 lakh children in Child Care Institutions, proactive recruitment of foster families is crucial.

However, cultural barriers exist, as the concept of unrelated foster care is not well established in India. Social changes, such as the decline of joint families and rising living standards, further hinder the willingness of families to foster children. While there have

been initiatives to promote foster care since the 1980s, their impact has been minimal.

To effectively recruit foster families, strategic planning and actionable steps are necessary. The resource outlines criteria for assessing and selecting foster families, involving biological children and extended family members in the decision-making process, and establishing clear procedures for placement and matching.

Insights from the Karnataka State Council for Child Welfare’s De-institutionalising Project and experiences from various countries provide valuable guidance. The author is optimistic that voluntary organizations in India can enhance foster family recruitment programs tailored to local needs, ultimately improving the lives of children in need of care.





# Perspectives

## The Power of Kindness and Love in Trauma-Informed Care

– By **Ian Forber - Pratt**  
*Deputy Executive Director,  
Children's Emergency Relief  
International (CERI)*

Imagine, for a moment, a world where care for those who have experienced trauma is driven not just by clinical protocols and theories but also by empathy, kindness, and love. This article aims to offer a fresh perspective on trauma-informed care and the concept of Psychological First Aid, providing you with insights into how emotions work within us and how we can begin to heal from trauma.

There are many organizations and individuals who have been doing Psychological First Aid (PFA) and sensitive trauma-informed care for years. There are high-quality training guides that are linked to this article. The intent of this article is to give a more colloquial and narrative-based discussion of the topic.

### Understanding Psychological First Aid

When we think of trauma, we often envision intense clinical interventions,

but what if we could also incorporate something more personal and immediate? Psychological First Aid (PFA) offers exactly that. It's a supportive response aimed at helping individuals during or immediately after a traumatic event. It's about providing a calming presence, listening with empathy, and offering practical support and reassurance.

The beauty of PFA lies in its accessibility. You don't need to be a therapist or a psychologist to administer it. Anyone can learn and provide psychological first aid, making it an empowering tool for communities and individuals alike. The focus is on stabilizing those affected, listening without judgment, and offering support in a way that is respectful, practical, and tailored to the individual's needs.

Imagine it as the emotional equivalent of applying a bandage to a physical wound. It doesn't require a complex understanding of mental health issues but rather a human connection that fosters healing through kindness and empathy. The primary goal is to reduce initial distress and help individuals begin their recovery process.

### The Intricacies of Emotions and Trauma

To truly appreciate the role of trauma-informed care, it's essential to understand how emotions work within us, particularly through the lens of Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). Picture your everyday emotions as a single vertical line running up and down your body, connected to the core of who you are. This line represents your foundation, your emotional baseline.

However, when a traumatic event occurs, whether it's something significant like a loss or something seemingly minor like shame or deceit, it often becomes dissociated from that line. The trauma detaches itself and starts floating around inside you, creating its own solar system of emotions—confusion, anger, sadness, and more. These emotions become disconnected, existing outside your normal emotional spectrum.

Consider a scenario where you spill a glass of water and suddenly find yourself reacting with disproportionate anger, perhaps even punching a wall.

This is because that separate traumatic event is in control. You are not crazy; it is not your fault. This disassociated trauma is steering your reactions, clouding your responses, and making you feel lost.

## Healing Through Vulnerability

The path to healing begins with the courage to speak about that traumatic event, to attach those disassociated emotions back to the vertical line of your foundation. This requires vulnerability and the willingness to open up to someone else. When you verbalize those emotions and experiences, you're not just expressing them—you're scientifically bridging the gap between the trauma and your core self.

Talking about your trauma allows you to take control, merge the disassociated event back into your body, and reclaim your emotional balance. This process is a crucial step toward healing, helping you regain control over your emotions and reactions.

## A Hopeful Outlook

The essence of trauma-informed care lies in recognizing that healing is a deeply personal journey, and it's a journey best navigated with empathy, kindness, and love. As we embrace this approach, we create a more inclusive and compassionate environment where those affected by trauma feel seen, heard, and validated.

Remember, you are not alone. You are not defined by your trauma. Through connection and understanding, we can all play a part in helping each other heal. Together, we can foster a world where trauma-informed care transcends clinical boundaries and touches the hearts of those who need it most. Let's make healing a collective journey marked by empathy and compassion.

Thank you for taking the time to read this and for considering the power of

kindness and love in trauma-informed care. Let's work together to build a brighter future where everyone feels seen, heard, and valued.

## Serving Children, Families, and Communities in India

The urgency of implementing trauma-informed care becomes even more pronounced when we consider its application in serving children, families, and communities who have experienced trauma. In India, the emergence of family-based care is not just a trend; it is a necessary revolution that promises to transform how we care for the most vulnerable among us.

In recent years, India has been rapidly moving towards embracing family-based care models, shifting away from institutionalized settings. This paradigm shift is fueled by a growing recognition of the profound impact that trauma can have on children and the critical need for nurturing environments that foster healing and growth.

However, the success of this transition hinges on the development of an entire field of child protection social workers dedicated to trauma-informed care. These professionals are the linchpin in ensuring that family-based care systems are effective, sustainable, and compassionate.

## The Role of Social Workers in Trauma-Informed Care

Social workers are uniquely positioned to lead the charge in implementing trauma-informed care within family-based systems. They serve as the bridge between children and families, advocating for their needs, providing support, and facilitating healing.

### 1. Advocacy and Empowerment

Social workers advocate for the rights of children and families, ensuring their voices are heard and their needs are

met. By empowering them to participate in decision-making processes, social workers help build resilience and self-efficacy, vital components of trauma recovery.

### 2. Education and Training

A comprehensive understanding of trauma and its effects is essential for anyone working in child protection. Social workers must be equipped with the knowledge and skills to recognize trauma symptoms, implement interventions, and support healing. Training in Psychological First Aid and Trauma-Focused Cognitive Behavioral Therapy can significantly enhance their effectiveness.

### 3. Community Engagement

Engaging with communities is a cornerstone of trauma-informed care. Social workers play a crucial role in building trust, fostering connections, and creating safe spaces where individuals can share their experiences and begin to heal. By involving communities in the care process, social workers can leverage existing support networks and cultural strengths.

### 4. Continuous Support

Healing from trauma is not a one-time event but a continuous journey. Social workers provide ongoing support, helping individuals navigate challenges and maintain their progress. They offer guidance, resources, and encouragement, ensuring that children and families feel supported at every stage of their recovery.

## The Stakes Are High

The stakes are incredibly high for the future of family-based care in India. Without a dedicated child protection workforce focused on trauma-informed care, the entire system risks faltering. The implications of failing to provide adequate support and intervention

for trauma-affected individuals are profound, affecting not just the immediate well-being of children but also their long-term prospects.

The emergence of family-based care presents a unique opportunity to redefine how we approach child protection and healing. By prioritizing trauma-informed care and building a robust field of social workers dedicated to this mission, we can lay the foundation for a more compassionate and effective care system.

### A Call to Action

As we look to the future, let us commit to creating a child protection system that embraces the principles of trauma-informed care. Let us invest in training, resources, and support for social workers who will serve as the

vanguards of this movement. And let us work together to ensure that every child, family, and community affected by trauma receives the empathy, kindness, and love they deserve.

Together, we can build a brighter future for India's children and families, where healing is not just a possibility but a reality. Let us stand united in our commitment to making trauma-informed care the cornerstone of family-based care in India. The time to act is now, and the responsibility lies with all of us.

Thank you for joining me on this journey toward a more compassionate and effective approach to child protection. Together, we can create a world where every child and family feels seen, heard, and supported on their path to healing.

### A few resources to learn more about Psychological First Aid -

1. Psychological First Aid for Children, adolescents, and families experiencing trauma - <https://www.unicef.org/southafrica/media/5731/file/ZAF-psychological-first-aid-children-adolescents-families-experiencing-trauma-2021.pdf>
2. Psychological First Aid : A Guide for Field workers - [https://iris.who.int/bitstream/handle/10665/44615/9789241548205\\_eng.pdf?sequence=1](https://iris.who.int/bitstream/handle/10665/44615/9789241548205_eng.pdf?sequence=1)
3. Creating a Safe and Caring Environment for Children: A module for Community and Field Workers - <https://iacn.in/resource/creating-a-safe-and-caring-environment-for-children/>

## Beyond Blood: The Power of Family

“Family isn't always blood. It's the people in your life who want you in theirs; the ones who accept you for who you are. The ones that would do anything to see you smile and who love you no matter what.”

- Maya Angelou

– By Simran

*Simran, Independent Legal Consultant*

The image is haunting: a small, trembling child, his head bleeding, his eyes filled with terror. Found abandoned on a desolate bench, this boy, barely four years old, carried within him a story of unimaginable hardship. He was lost, both literally and figuratively, unable to remember the name of his village or even his parents. All he could do was sob and plead, “Save me... just save me.” A story that is, unfortunately, all

too common in our country. Yet, amidst the despair, a flicker of hope emerged. A compassionate stranger, moved by the child's vulnerability, extended a hand, offering not just refuge but a family.

Once home, the women of the family took care of the boy. They cleaned his wounds, fed him, and did their best to soothe his fears. But days went by, and the boy remained silent, flinching at even the slightest loud noise. It took time, patience, and a lot of love before he finally began to speak.

The boy, who had no memory of where he came from, eventually shared a fragment of his past. His parents, driven by poverty, had sent him with a woman who promised to take care of him. Instead, she forced him to work at a tea stall and often beat him. One day, after a particularly brutal beating that left him with an injury on his head, he ran away, scared and desperate.

The family who found him was determined to do what was right. Despite their growing attachment to the boy, they made efforts to reunite him with his biological family. They took him to the police station to file a report about the abandoned child. The woman who had taken the child from his parents came forward to claim him. However, he recoiled in fear upon seeing her, unable to recognize her as someone who would care for him. He still had no memory of his own family or his village, and the women also didn't give any



proper leads to his family making the situation even more complex.

Despite multiple attempts to trace his family, no information surfaced about his biological parents. Eventually, the family who found him decided to keep him, to give him not just a roof over his head but a place in their hearts. They named him “Anshu” and treated him like their own son, sending him to school and later to college. As he grew, so did his confidence and his sense of belonging. He thrived in the loving environment of his new family, which gave him the emotional security he had so desperately needed.

Anshu didn't just survive; he flourished. He went on to become an active member of his community, eventually winning an election to become the Parshad of the area. His compassion translated into his role as a Parshad, where he tirelessly worked to ensure vulnerable members of society were enrolled in government schemes and received their rightful benefits. Helping the needy is his goal in life, to make society a better place of living. His vision for marriage was rooted in his desire to provide a better life for someone else, reflecting his selfless nature and unwavering commitment to helping others. Anshu's life became a testament to the power of human kindness and the enduring impact of a loving family. Fondly, we call him Anshu Dada, a term of respect and affection in Uttar-Pradesh for an elder brother. He became the most loved member of the family, adored by both elders and children. The bonds he forged were as deep and genuine as any blood relative. He is the heart of the family, the one everyone turns to for support and companionship. His name is constantly on everyone's lips, a testament to his central role in their lives.

Anshu's early years were marked by abuse and neglect. He was forced to

leave his parents, a life devoid of love, care, and security. His escape was as dramatic as his ordeal. It was in the moment of extreme vulnerability that he found a lifeline – a family willing to embrace him as their own. His journey was marked by a profound empathy that extended beyond his immediate family. He developed a deep connection with animals, caring for cows and dogs with the same tenderness he received.

His story is a powerful testament of how a loving family can transform a terrified, traumatized child into a compassionate and empathetic individual. Nurtured in a loving home environment, Anshu blossomed. The scars of his past gradually faded, replaced by the warmth of family affection and the confidence of belonging. His journey from a frightened, traumatized child to a capable, compassionate adult is a powerful illustration of the healing and empowering potential of family-based care. It reminds us that for children, love, affection, and a sense of belonging are as vital as food and shelter. The emotional development that comes from being in a family environment cannot be overstated. When children know they are valued, when they feel secure in their relationships, they grow into stronger, more confident individuals. It's not always about material wealth or inheritance; sometimes, all a child needs is love, care, and a place to call home.

While Anshu's story is a powerful reminder of the transformative power of family, it's important to acknowledge that the landscape for children in need has evolved significantly since then. Today, various government schemes and programs are in place to support children in difficult circumstances and promote family-based care. These initiatives have made a positive impact

on the lives of countless children, providing them with opportunities for education, healthcare, and a safe environment.

However, despite these advancements, the challenge of transitioning children from institutional care to family-based settings remains complex. Many factors, such as the availability of suitable foster families, the capacity of child welfare agencies, and the long-term support required for both children and families, need to be addressed. It is crucial to invest in comprehensive systems that not only facilitate the placement of children in loving homes but also provide ongoing support to ensure their well-being and integration into their new families.

Countless children in India are growing up in institutions, deprived of the fundamental right to a family. This is a stark reminder of the urgent need to prioritize family-based care as a cornerstone of child welfare. By fostering a supportive environment for children to grow and thrive within loving families, we can create a society where every child has the opportunity to reach their full potential.

By investing in family-based care, we are not just helping children; we are building stronger, more resilient communities. Let us be inspired by Anshu's journey and commit to creating a future where every child has the opportunity to thrive within a loving family.

## End Note

This narrative, rooted in the early 80s, predates many of the formal child welfare systems and support structures prevalent today. Yet, it underscores the timeless truth that a loving family can be a child's most potent source of healing and growth.

# Transition Model of Care and Inclusivity for Care Leavers in India

– **Dr. Gurneet Kaur Kalra,**  
*Manager, Research and Advocacy,*  
*Udayan Care*

The socio-economic environment acts as a catalyst for a child's essential learning and development. The social setting in which a child is raised shapes their lifestyle and plays a key role in forming their individuality and personality. As a result, the socialization process is crucial for cultivating human values and integrating ethics throughout one's life.

Care leavers are a diverse group with varying needs, and the ones with disabilities and other diverse needs, often rely on various welfare services during their childhood and encounter a more challenging transition to adulthood compared to other care leavers (Kelly et al., 2016; Mendes & Snow, 2014; Snow et al., 2016). Inclusivity is a fundamental principle in the development and implementation of the transition model of care. Analyzing policies related to support care leavers with special needs including those with disabilities can contribute to conceptual frameworks and enhance the understanding of social work policies. Social policies address the allocation of societal resources, both material and symbolic, within the realm of social welfare, and they significantly impact the well-being of individuals (Gal & WeissGal, 2014, p. 2).

In the concept of 'emerging adulthood,' the life phase during transition from care is recognized as a vulnerable developmental stage where the primary goal is to achieve 'self-sufficiency.' This includes accepting responsibility for oneself, making independent decisions, and attaining

financial independence (Arnett, 2000, p. 473). Care leavers with special needs face a higher risk of social exclusion and are less likely than other care leavers to successfully transition to adult life (Akister et al., 2010; Kelly et al., 2016; MacDonald et al., 2016). They often face challenges related to education, employment, and finances during their transition to adulthood and these difficulties can lead to social exclusion, reduced quality of life, and diminished civic engagement (Legard, 2013). Care leavers with disabilities tend to exit child welfare services later than other recipients (Rabiee et al., 2001), and their transition to adulthood highlights a significant need for support during this critical life phase (Stein & Munro, 2008). Globally, it has been found that care leavers with special needs leave care system before they were ready to do so (Kelly et al., 2016, p. 66).

Research on aftercare and disabilities raises several ethical challenges. Young people with child welfare experience are often depicted more by the difficulties they face than by the resources they possess (Bakketeig et al., 2008). Similarly, individuals with disabilities have traditionally been viewed as deviating from 'normality,' with research frequently emphasizing the 'problems' associated with physical or mental impairments (Mehrotra, 2012). This one-sided focus on challenges can lead to further stigmatization and marginalization of these young people, as well as to low expectations for both the individuals and the support provided to them (Bakketeig et al., 2008). They are often overlooked as a target group in both child welfare and disability services policies, making it crucial to consider

how this oversight impacts aftercare practices. Even though these care leavers are not identified as a group in India, they are influenced by these policies and are still the potential users of the welfare services. Thacher (2004) argues that policy analysis should not only highlight conflicting 'convictions' but also recommend revisions to these existing beliefs.

The child protection system should purview the adult status for youth exiting care systems in terms of independence and see the transition to adulthood as a transition away from help and support rather than merely turning 18 years of age. It is essential that the model addresses these differences to ensure equitable outcomes for all. Mentioned below are some of the recommendations for addressing vulnerable care leavers and those with special needs.

## Support for Care Leavers with Disabilities

Research has shown that this population often encounters barriers such as unstable housing, limited access to employment and education, and a lack of specialized support services. To address these challenges, the transition model must incorporate tailored services for care leavers with special needs, which includes providing access to special educators, therapists, and adaptive equipment, as well as ensuring that aftercare services are inclusive and accessible to all care leavers.

## Gender-Sensitive Approaches

Gender-sensitive approaches are also critical in the transition model of care. Girls and young women in care often face distinct challenges related to safety, education, and employment. Programs must be designed to address



these specific needs, ensuring that female care leavers receive the support necessary to achieve economic independence and personal empowerment.

## Cultural and Regional Inclusivity

India's diverse cultural and regional landscape requires that the transition model be adaptable to different contexts, which includes taking into account the cultural practices, languages, and regional disparities that may affect the experiences of care leavers. Localized approaches are essential for addressing the unique needs of care leavers in different parts of the country.

## Challenges and the Path Forward

While the transition model of care in India is evolving, there are still significant challenges that need to be addressed. These include the inconsistent implementation of aftercare services across states, a lack of trained professionals to deliver specialized support, and the need for greater investment in infrastructure and resources. To create a truly inclusive and effective transition model, it is crucial to develop standards for aftercare services to ensure consistency and quality across states, invest in capacity building by providing training and resources to local organizations and care professionals to enhance their ability to support care leavers effectively, strengthen data collection and research by conducting comprehensive research on the outcomes of care leavers to identify gaps and areas for improvement in the transition model and increase awareness about the needs and rights of care leavers,

particularly those with disabilities, to foster a more supportive environment for their transition to independence.

## Conclusion

The transition from care to independent living is a pivotal moment in the lives of care leavers in India. By developing an inclusive transition model of care that addresses the diverse needs of these care leavers with special needs, they can be empowered to lead successful and fulfilling lives. As the country continues to refine and expand its approach to aftercare, it is essential to prioritize inclusivity, equity, and the best interests of every care leaver, regardless of their background or abilities.

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# What Constitutes Family for Children Without Parental Care

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## Introduction

In the Indian society, the concept of family holds profound significance, extending far beyond the confines of blood relations. Family embodies a sense of belonging, support, and nurturing, essential for the holistic development of individuals. In the Indian context, family transcends biological ties to encompass a network of relationships rooted in kinship, community, and shared values. It serves as a sanctuary where children find love, guidance, and security, shaping their identity and fostering their well-being. Here, the central role of family is not merely biological but cultural, emotional, and spiritual, constructing a fabric of connectivity that nourishes both individuals and societies. However, for children without parental care, the notion of family takes on a multifaceted dimension, urging us to reassess and redefine its meaning. Children without parental care encompass a diverse spectrum, ranging from orphaned children to those abandoned due to various socio-economic factors. Amidst this complexity, kinship care emerges as a potent yet underutilized support system, deeply ingrained in Indian tradition and mythology.

This reflective piece, explores the multifaceted nature of family for children without parental care, delving into the various forms of support and belonging that shape their experiences. These children often find themselves in diverse family structures, each offering unique forms of support, love, and belonging. For children without parental care, family can extend beyond

biological ties to include extended relatives, foster parents, even peers within residential care setting and caregivers. What constitutes family for these children is not solely determined by blood relations but rather by the presence of individuals who provide them with stability, nurturing, and a sense of belonging.

As we strive to create inclusive and supportive environments for children without parental care, it is crucial to recognize and respect the diverse forms of family that exist. By broadening our understanding of family to encompass various relationships and support networks, we can better meet the needs of vulnerable children and ensure that they have the nurturing environments they need to thrive.

## My Reflections from the Field

My experience in the field, working closely with Child Protection team, has illuminated the transformative impact of kinship care in fostering stability and belonging for vulnerable children. In the district of Jalna, initiatives promoting kinship care have yielded promising results, empowering families to provide a nurturing environment for children within their own communities. By strengthening familial bonds and leveraging community support networks, we can mitigate the need for institutional care, promoting the holistic development of children.

Recognizing the paramount importance of family in the developmental journey of children, it becomes imperative to support parents facing financial hardships or societal pressures, preventing family separation whenever possible. Empowering parents through access to education, employment opportunities, and social welfare

programs can alleviate economic burdens, enabling them to provide a stable and nurturing environment for their children.

Moreover, community-based interventions, such as family counseling and support groups, can offer a lifeline to struggling families, fostering resilience and cohesion amidst adversity. By fostering a culture of collective responsibility and solidarity, we can create a society where no child is deprived of the love and care of a family.

## Neha's Story (Name Changed):

*Neha, a 14-year-old girl living in a residential care facility in Mumbai, shares her perspective on family. "For me, family is not just about blood relations. It's about the people who support and care for you, who stand by you through thick and thin. In the absence of my biological parents, the caregivers and staff at the orphanage have become my family. They provide me with love and guidance, shaping my sense of identity and belonging."*

## Insights from Caregivers:

### Sunita's Perspective (Name changed):

*Sunita, a senior caregiver at a residential care facility in Mumbai, shares her insights. "In my experience, family for children without parental care is about creating a supportive and nurturing environment where they feel valued and accepted. As caregivers, our role is to provide love, guidance, and stability, helping children develop a sense of belonging and self-esteem."*

## Challenges and Complexities

While the concept of family for children without parental care may be expansive, it is not without its challenges and complexities. Issues such as attachment disorders, identity struggles, and feelings of abandonment can arise, impacting a child's sense of

belonging and security. Moreover, the stigma associated with non-traditional family structures can further exacerbate these challenges, leading to feelings of isolation and marginalization. It is essential for society to recognize and validate the diverse forms of family that exist, offering support and acceptance to children regardless of their familial circumstances.

## Creating Inclusive Environments

As advocates for children's rights, it is incumbent upon us to create inclusive environments where all children feel valued, loved, and supported. This entails challenging societal norms and stereotypes surrounding family, advocating for policies that prioritize the well-being of children without parental care, and promoting alternative caregiving arrangements that prioritize the child's best interests (UNICEF, 2023). Furthermore, fostering a sense of community and belonging within residential care settings can mitigate feelings of loneliness and alienation, allowing children to form meaningful connections with peers and caregivers alike (Smith, 2018).

## Way Forward

1. Empowering Children's Voices: To truly understand what constitutes family for children without parental care, it is essential to listen to their voices and honor their experiences. By prioritizing their agency and participation in decision-making processes, we can ensure that their needs and preferences are central to efforts aimed at improving their well-being.
2. Promoting Inclusive Policies and Practices: Governments, organizations, and communities

must work together to create inclusive policies and practices that recognize and support the diverse family structures of children without parental care. This includes investing in family based alternative care options, such as kinship care, foster care and range of care arrangements that prioritize children's safety, well-being, and rights.

3. Building Supportive Networks: Building supportive networks of caregivers, mentors, and peers is crucial for children without parental care to develop strong relationships and a sense of belonging. By fostering collaboration and cooperation among stakeholders, we can create environments where all children can thrive and reach their full potential.

## Conclusion

In essence, redefining family for children without parental care demands a paradigm shift in our approach, embracing the inclusive ethos of Indian culture while harnessing the transformative potential of kinship care. By weaving a mesh of love, support, and belonging, we can create a nurturing environment where every child can thrive and fulfill their potential, guided by the enduring light of familial bonds.

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# Updates from the Field

## Transitioning from Residential Care to Family-Based Care: A Comprehensive Approach

**Rajendra Meher**

*Chief Executive Officer, Youth Council for Development Alternatives (YCDA)*

### Contextual Overview

Odisha, with its diverse cultural and socio-economic landscape, faces significant challenges in child protection, especially for children residing in Child Care Institutions (CCIs). Many of these children, often separated from their biological families due to factors such as poverty, displacement, or social marginalization, are among the most vulnerable in the state. A significant number of children in CCIs actually have biological families but remain in these institutions due to their families' lack of awareness, viewing CCIs as places for education and temporary care. However, despite meeting basic needs, the institutional environment often falls short in addressing the emotional and developmental needs of these children, further compounding their vulnerabilities.

### Need for Transition to Family-Based Care

Given the challenges inherent in institutional care, there is an urgent

need to shift towards family-based care models in Odisha. Family-based care such as kinship care, foster care, and adoption provides a more nurturing and supportive environment, essential for the healthy development of children. However, it's important to recognize that transitioning from institutional to family-based care is not merely an event but a continuous process that requires sustained effort and support. The recent policy shift in India toward family reintegration, reflected in initiatives like Mission Vatsalya, underscores the importance of this ongoing approach.



### Policy and Systemic Reforms

For Odisha to effectively transition from institutional care to family-based care, there needs to be a concerted effort to strengthen the state's child protection

systems. This includes enhancing the capacity of CCIs to provide quality care, training staff in trauma-informed care, and developing robust mechanisms for monitoring and evaluation. Additionally, there is a need for greater advocacy and community awareness to support family-based care options.



### YCDA Experiences

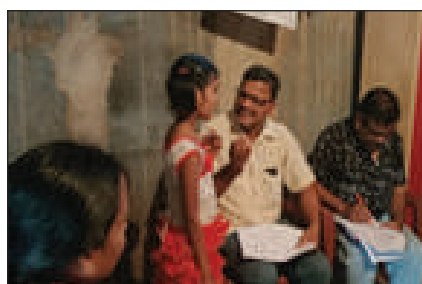
Drawing from YCDA's extensive experience in collaborating with the Child Protection system, various statutory bodies, and service delivery structures, the shift from residential care to family-based care marks a significant advancement in child welfare practices. This transition underscores the importance of nurturing family environments, and YCDA's approach is anchored in three key principles: Ready

Children, Ready Family, and Ready System. Each of these principles is vital in ensuring the success of this transition and the overall well-being of the children involved.

## 1. Ready Children: Preparing Children for Family Integration

The first step in the transition process is ensuring that the children are prepared for life in a family setting. This involves addressing their emotional, psychological, and social needs to facilitate a smooth transition. Key strategies include:

- i. **Emotional Support and Counselling:** Children in residential care often have complex trauma histories. Providing consistent and professional counselling helps them process their experiences and prepare emotionally for a new family environment.



- ii. **Skill Development:** Equipping children with essential life skills, such as communication, conflict resolution, and self-care, can foster independence and adaptability in a family setting.
- iii. **Education and Socialization:** Continuity in education and opportunities for social interaction help children develop a sense of normalcy and stability, making the transition less daunting.

## 2. Ready Family: Equipping Families to Provide Stable Homes

The second principle focuses on preparing families to receive and

support children coming from residential care. This involves both practical and emotional preparation to ensure a nurturing and stable environment. Essential components include:

- i. **Training and Education:** Families should receive comprehensive training on trauma-informed care, child development, and effective parenting strategies tailored to the unique needs of children from residential care.
- ii. **Support Networks:** Establishing strong support networks, including access to social workers, support groups, and community resources, helps families navigate challenges and provides a safety net.



- iii. **Assessment and Matching:** Conducting thorough assessments of prospective families ensures that they are well-suited to meet the specific needs of the children. Matching children with families that can best support their individual needs is crucial for a successful transition.

## 3. Ready System: Creating a Supportive Infrastructure

The final principle involves developing a robust and responsive system that supports both the children and families throughout the transition process. This includes policies, practices, and resources that facilitate a sustainable shift to family-based care. Key elements include:

- i. **Policy and Advocacy:** Developing and advocating for policies that prioritize family-based care and allocate necessary resources is

essential for systemic change. This includes legal frameworks that support family reunification and kinship care.

- ii. **Interagency Collaboration:** Effective collaboration between child welfare agencies, healthcare providers, educational institutions, and community organizations ensures a holistic approach to care and support.



- iii. **Monitoring and Evaluation:** Implementing rigorous monitoring and evaluation systems to track the progress of children and families, identify areas for improvement, and ensure accountability is vital for continuous improvement.

The impact of YCDA's collaborate work is profoundly evident as more children are now able to stay with their families, and a growing number are being successfully reintegrated into their biological families. By prioritizing family-based care and reintegration efforts, YCDA has helped create stable, nurturing environments that allow children to thrive. This focus not only strengthens family bonds but also ensures that children receive the emotional and developmental support they need within their own communities. Our key learning in the transition journey is that it is not a single event but an ongoing process, requiring the preparation and involvement of all stakeholders.

## Welcome Ceremony : A Best Practice Demonstrated

When a child is placed in a family-based setting, whether through kinship

care, foster care, or a transition from a Child Care Institution to a family, we organize a special welcome ceremony to mark this important occasion. This event is thoughtfully planned and involves the participation of the new family, close neighbours, and key members of the community. The ceremony is designed to be a joyful and heart-warming experience, where the child is embraced with open arms into their new home.

The family prepares to greet the child with great enthusiasm, creating an atmosphere filled with happiness and warmth. During the ceremony, the family and community members come together to express their collective love, care, and support for the child. This public demonstration of affection not only reassures the child that they are genuinely wanted and cherished, but also helps to foster a strong sense of belonging from the very beginning.



The objective of this celebration is to ensure that the child feels secure, loved, and welcomed into their new environment right from the start. By involving the community, we emphasize the collective responsibility of ensuring the child's well-being and integration. This positive and supportive environment helps the child to feel at ease, making the transition smoother and setting the stage for a successful and happy adjustment into family life.

### Conclusion

Transitioning from residential care to family-based care is a complex but

necessary evolution in child welfare. By focusing on Ready Children, Ready Family, and Ready System, we can create an environment where every child has the opportunity to thrive in a loving and supportive family. This holistic approach ensures that the transition is not only successful but also sustainable, leading to better outcomes for children and their families.



Embracing these principles and committing to their implementation can transform the lives of countless children, providing them with the stability and love that only a family can offer.

## Strengthening Child Protection Ecosystem: CRY's Role in Enhancing Alternative Care for Vulnerable Children during COVID-19

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### Introduction

In India, alternative care for children is provided through non-institutional (sponsorship, foster care, adoption and aftercare) and institutional care. In recent years, there has been an increasing focus on promoting family-based care and deinstitutionalisation. Both government and non-governmental organisations are actively working to strengthen

the alternative care system, enhance the quality of care for children, and advocate for family-based care options. This effort has become even more critical due to the profound impact of the COVID-19 pandemic, which left many children in India orphaned or without caregivers. As a result, the number of vulnerable and orphaned children surged, exposing them to emotional and psychological challenges, as well as an elevated risk of exploitation, trafficking and neglect. The abrupt disruption of education and the loss of familial support systems highlighted the urgent need for family-based alternative care arrangements to ensure these children have access to a safe and nurturing environment.

### CRY's Intervention with Regard to Alternative Care for Children

As a response to the plight of the children and to ensure their safety and security, Child Rights and You (CRY)[i] – with its presence in the most far-flung areas and most challenging terrains and among the most marginalised communities who have limited access to health facilities – implemented a programme on Protection, Relief and Rehabilitation of Vulnerable Children and their Families in COVID times in 15 districts of Madhya Pradesh, Rajasthan, and Uttar Pradesh as follows:

- **Madhya Pradesh:** Bhopal, Raisen, Indore, Shivpuri, Khajuraho and Betul



- **Rajasthan:** Ajmer, Bharatpur and Alwar
- **Uttar Pradesh:** Kaushambi, Varanasi, Chandauli, Sonbhadra, Badaun and Lakhimpur Khiri

During the timeframe of one and a half years, CRY supported 753 children by providing them with relief as an immediate measure and also ensuring their proper rehabilitation and protection. The intervention was designed in two phases:

- First, providing immediate relief like dry ration, education kit, health and hygiene kits, support in school admission, etc. as per the child's requirement.
- The second was ensuring long-term rehabilitation and protection by involving the concerned stakeholders such as block and district administrations, District Child Protection Units (DCPUs), and Child Welfare Committees (CWCs) responsible for ensuring care and protection of each child.

## Objectives of the Intervention

- **Stakeholder engagement:**
- Strengthening government systems to ensure effective implementation of government schemes and programmes for the vulnerable children impacted by the pandemic.
- Facilitating linkages of children and their families with various social protection schemes and programmes.
- Promoting alternative care following the principle of last resort.
- Providing immediate relief support to vulnerable children, including those who had lost their parents or the main bread-earner of the family due to COVID-19 pandemic, as immediate care to meet education, health and nutrition needs.
- Capacitating children and their caregivers/parents through counselling support and life-skills

sessions to develop resilience to overcome stress and trauma due to the ongoing pandemic.

- Ensuring education of children by mainstreaming dropout/out-of-school children, providing remedial/academic support, digital devices, admission fees, etc. and preventing them from being vulnerable to early marriage, child labour, and other protection-related vulnerabilities.
- Creating agency of the children within the community by making them part of children's collectives and capacitating them to act as support group for children who lost parents as Champions for Change.
- awareness about government schemes, COVID-19 guidelines, child protection redressal mechanisms, and information against illegal adoption.

## Key Activities of the Intervention

The main focus during the intervention was to promote and strengthen a family-based care system for children impacted by COVID-19 and ensure long-term sustainable rehabilitation. Following were the key activities as part of the intervention.

- Community mapping to identify vulnerable children and link them with appropriate services, government schemes, and entitlements: 771 children were identified, of which support was provided to 753 children; 18 children migrated from the intervention areas with their families.
- Sharing list of identified children with CWCs and DCPUs and liaising with them to ensure that every child was provided with care and protection as per their entitlements.
- Producing children before CWCs for rehabilitation as per the Juvenile Justice Act, supporting the departments in preparing Social Investigation Reports, and getting information about the extended family members who

could take care of the children without parental care.

- Strengthening community-based child protection safety net at the Panchayat level and working with the Panchayat Presidents to extend the services to children needing care and protection.
- Creating awareness on child protection and encouraging families and communities to take responsibility for ensuring the rights of children.
- Linking children with government schemes (including education scholarships) and also facilitating the required documentation for the same.
- Linking out-of-school children (including dropouts) with government schools.
- Providing life skill education and direct relief, including dry ration, school fees, tuition and remedial support, transportation support, IT support (tablets and internet connection), health and hygiene kits, etc., to children.
- Providing psychosocial counselling to children and their parents to overcome stress and trauma.
- Developing community-based child protection groups and ensuring linkages of children with child activity centres, children's groups, and adolescent groups.
- Engaging with government officials for effective policy implementation.
- Supporting guardians/caregivers in promoting education, protection and rehabilitation of the children.

## Achievements of the Intervention

CRY successfully supported 753 children, providing them with essential supplies, educational support, and health services. CRY also linked many of these children and their families to government schemes, ensuring their continued access to resources beyond the immediate crisis period. Specific outcomes included (for details, see Table 1):

- 364 children were linked with schools, ensuring their continued education.
- 429 children participated in life skills sessions, helping them build resilience.
- 116 families were linked with government schemes, providing them a financial safety net.

**Table 1: Outreach of CRY's Intervention (in numbers)**

	Madhya Pradesh	Uttar Pradesh	Rajasthan	Total
No. of Children who lost both their parents	19	59	7	85
No. of Children who lost one parent	128	460	80	668
<b>Immediate Relief</b>				
No. of Children given Dry Ration	115	182	87	384
No. of Children given Education Kit	92	352	87	531
No. of Children given Health and Hygiene Kit	120	266	87	473
No. of Children given Tablets and Internet connection	10	18	5	33
No. of Children given Counselling Support	118	172	47	337
No. of Children given Sports Materials	111	138	7	256
No. of Children given Subject-specific Coaching	54	268	12	334
No. of Children given Winter Wear	65	160	32	257
<b>Family Strengthening</b>				
No. of Children linked with Schools	89	232	43	364
No. of Children linked with Social Security Schemes for Children	81	159	78	318
No. of Children whose Family Members were linked with Government Schemes	51	60	5	116
No. of Children given Life Skill sessions	94	260	75	429

Source: Based on CRY's Field Intervention Data.

## Key Insights from the Challenges in the Field

Despite the achievements mentioned above, CRY faced several challenges in the field. The intervention highlighted the critical need to ensure that affected families have access to essential documents required for accessing government support and schemes. Many families faced difficulties due to a lack of necessary documents. This underlines the importance of streamlining the process of acquiring these documents, especially for vulnerable communities.

There was an initial lack of coordination between the Centre, State and District levels of governance

with regard to following government guidelines. This was resolved through constant engagement with systems and awareness campaigns to ensure that such guidelines are followed consistently and that families receive the support they are entitled to.

The intervention revealed the challenges in linking illiterate surviving spouses to vocational and skill-building courses. This highlights the need for tailored educational and skill development programmes that are accessible to individuals with varying levels of literacy and education. These initiatives should aim to empower not just the educated but also those with limited literacy levels.

Further, delays in fund release of the schemes resulted in affected children resorting to child labour and dropping out of school. This underscores the significance of timely and efficient disbursement of funds to provide immediate relief to vulnerable families. Timely intervention can prevent children from being forced into labour and support their educational continuity.

Finally, the programme highlighted the cruciality of prioritising the protection of properties and assets of children who had lost both parents. Legal mechanisms and support structures should be in place to safeguard their rights and prevent any potential exploitation or loss of assets.

## Conclusion

CRY's intervention during the COVID-19 pandemic highlights the critical importance of alternative care systems, particularly in times of crisis. By focusing on family-based care, engaging with local stakeholders, and building community-based protection mechanisms, CRY was able to provide vital support to hundreds of vulnerable children. However, the

challenges faced underscore the need for ongoing efforts to streamline government support systems and enhance the capacity of local authorities to respond to such crises. As India continues to recover from the pandemic, the lessons learned from CRY's intervention can inform future strategies for strengthening the child protection ecosystem across the country.

## Footnote

1. Child Rights and You (CRY) is an Indian non-governmental organisation that envisions a happy, healthy and creative child whose rights are protected and honoured in a society that is built on respect for dignity, justice and equity for all. For more details, please visit [www.cry.org](http://www.cry.org).

## Parveen's Journey: From Institution to Home

**Aashiq Hussain & Sabahat Bashir,**  
*District Coordinators, HWVO*

Parveen (name changed), a 14-year-old girl from a village in Baramulla, Kashmir, lost her parents at the tender age of 8 years. After the death of her father, a laborer who succumbed to a life-threatening illness six years ago, her mother made the difficult decision to place her and her older brother in a Child Care Institution (CCI). This decision stemmed from the family's perilous financial situation.

Parveen's mother later remarried and had a daughter with her new husband, but her new husband, a salesman, struggled to take Parveen's mother and newly born step-sister to his home and Parveen's mother was left with no choice but to live with her 2 brothers. However, Parveen's brother, who is just a year older than Parveen, returned home from CCI after exhibiting strong resentment towards the institution. When the CCI authorities could not take care of him, they decided to send him back, and after two years Parveen's mother brought her son back. Despite his (Parveen's stepfather) willingness to care for Parveen and her brother, their financial constraints have made life difficult.

Parveen has been living in a girls' CCI in Baramulla for the past six years. Weeks before Parveen was restored

back to her family, the staff at the CCI noticed changes in her behavior and sought the assistance of the Human Welfare Voluntary Organisation (HWVO), which operates in 20 villages in the district. HWVO collaborates with CCIs registered under Mission Vatsalya to provide support and resources to children in need. The HWVO team came in contact with the child and initiated interactions with her.

During an Individual Care Plan (ICP) session facilitated by HWVO, Parveen revealed that she misses her home and is longing to return home. She expressed feelings of sleep disturbance and anxiety. In her counselling sessions, she confided in the counsellor that she believed she would only feel better if she could go back to her family.

Recognizing the importance of family support, HWVO engaged with the CCI authorities and discussed the concerns that Parveen had shared with their counsellor. The CCI authorities while appreciating the child's needs and the importance of family, expressed their limitations regarding family-based support but assured Parveen that they would cover her school fees if she continued her education at the same school. However, the distance between her home and the CCI would make it

impossible for her to attend school there if she returns home.

To better understand Parveen's situation, the HWVO team paid a home visit, interacted with her mother and brother, and prepared a Social Investigation Report (SIR). During this visit, her mother expressed a desire for Parveen to return home but also highlighted the financial challenges that complicated this wish.

Looking at the challenges expressed by her mother and finding a more workable solution, HWVO was able to successfully find a donor for Parveen, who agreed to provide financial support to the Parveen when she returns home. The HWVO's team then connected Parveen with the donor, securing a monthly contribution of 1,720 rupees to support her family. With this newfound assistance, Parveen was able to return home after six years. Her mother enrolled her in a nearby private school, allowing Parveen to continue her education while living with her family, including her mother, brother, stepfather, and younger sister.

Parveen's story is one of resilience and hope, showcasing the transformative power of family support and community intervention. She is now back at home, taking steps toward a brighter future while surrounded by her loved ones.



# Navigating the Path to Restoration: A Transitioning Support Tool for Children Moving from Institutional to Family Based Care

**Documented by: Rashmi Taylor**

*Inputs from: Priti Patkar, Geetarani*

*Lourembam, Pooja Yadav*

*Case Workers: Sandhya Katkar,*

*Prachi Ardekar*

One of the core elements of Prerana's Project Aashiyana, part of the Transform NEEV Collective, is facilitating the restoration of children admitted to Child Care Institutions (CCIs) due to a lack of affordable, safe, community-based care services and family-strengthening initiatives. The project ensures that children, particularly from low-income urban communities, receive the necessary support to thrive within their families. Aashiyana aims to prevent unnecessary institutionalization, protect children from abuse, and safeguard their rights by identifying and assisting those at risk of family separation.

Additionally, Project Aashiyana works closely with the Child Welfare Committee (CWC) and CCI authorities to support the restoration process. The goal is to avoid abrupt restorations, which can disrupt a child's routine, increase separation anxiety, and hinder their adjustment to family and community life. The project identifies children in need, assesses the family's capacity to care for the child post-restoration, links families to social security schemes, identifies community-based resources, supports positive parenting, and provides psychosocial and financial support as needed.

During this intervention, the team encountered Nisha (name changed) [1], an 11-year-old girl who had been

living in a CCI since she was five. Nisha's case highlights the importance of regular assessments by CCIs to evaluate whether a child's stay in institutional care remains necessary. From the moment of admission, family strengthening efforts should be prioritized to support eventual restoration. This case also highlights the need for a well-planned and structured restoration process that ensures ongoing support for both the child and family, safeguarding the child's long-term well-being.

In March 2023, Nisha's case was referred to Prerana by the CWC to determine if she still needed institutional care or if restoration with her family was possible. Nisha and her brother were admitted to a CCI at ages 5 and 6 after their mother sought help from the CWC. Their father was alcohol-dependent and physically abusive towards the family, prompting the mother to seek institutional care for the safety of her youngest two children. While she withdrew her sons admission after a year, Nisha remained institutionalized for five years until her restoration at age 10.

During this time, Nisha's mother separated from her husband due to ongoing abuse. After Prerana took on the case, the Aashiyana team spoke to Nisha to understand her feelings about the CCI and restoration. Nisha shared that she had not visited her family since admission and expressed a desire to live with her mother and siblings.

In April 2023, the Prerana team conducted a social investigation visit

to assess the family's ability to care for Nisha post-restoration. They learned about the father's violent behavior, which had escalated, prompting the separation. Nisha's older sister, aged 19, had taken on responsibility for the family, earning Rs 10,000 per month,

## Insights from Caregivers:

### Sunita's Perspective (Name changed):

*Sunita, a senior caregiver at a residential care facility in Mumbai, shares her insights. "In my experience, family for children without parental care is about creating a supportive and nurturing environment where they feel valued and accepted. As caregivers, our role is to provide love, guidance, and stability, helping children develop a sense of belonging and self-esteem."*

while the mother worked in garment packing, making Rs 7,000 monthly. Together, they managed to care for Nisha's two brothers, though Nisha remained in institutional care. The mother shared that she couldn't pursue a formal divorce because Nisha's paternal grandfather threatened to withhold property inheritance from her son if she did so. Regarding Nisha's restoration plan, the mother expressed her readiness to care for Nisha and move forward with the restoration process.

Given Nisha's five years in institutional care, the team recognized that immediate restoration could cause adjustment difficulties. To facilitate a smoother transition, the Prerana team, along with the Children's Home authorities, requested the CWC to allow Nisha a 7-day visit home under Section 98 of the Juvenile Justice (Care and Protection of Children) Act, 2015 (JJ Act). The CWC agreed, and Nisha went home for a brief stay. During this period, social workers conducted home visits and maintained regular phone contact to ensure her safety and well-being. Upon her return, Nisha expressed that she felt safe at home and wished to return permanently, as her father was no longer present.

With this confirmation, the Aashiyana team, in collaboration with the CCI authorities, initiated the restoration process, leading to her return in June 2023. Over four months, a collaborative and cooperative approach ensured Nisha's successful restoration.

Once restored, the team conducted regular follow-up visits as mandated by a follow-up order issued under Section 37[2] of the JJ Act. These visits were crucial for monitoring her transition and well-being. By staying engaged and providing ongoing

support, the team aimed to address any challenges Nisha and her family might face post-restoration, thereby facilitating a smoother adjustment and promoting long-term stability. However, as is often the case, Nisha faced challenges in adjusting to her new environment. She experienced difficulties at home, including conflicts with her siblings that made her want to leave, even packing her bags in the middle of the night.

The Aashiyana team provided support on two fronts. First, they guided Nisha on managing her emotions, mindfully resolving conflicts, making safer decisions, and establishing a daily routine that kept her engaged. Second, they supported Nisha's mother, helping her understand the complexity of Nisha's adjustment process and encouraging empathy. Continuous follow-ups, dialogue, and engagement helped her settle back into the family environment. The team also enrolled Nisha into a school, linked her to a community-based organization providing life skills education and encouraged quality family time, which improved her adjustment. Nisha's mother took her and her siblings to visit their village in Uttar Pradesh. Upon her return, Nisha appeared more settled and shared her amazement at her first-ever visit to a village, showing signs of better adjustment with her family at home.

Cases like Nisha's, where children and families face adjustment challenges after restoration, have provided valuable insights for the Aashiyana project. These experiences led to the development of a specialized [Transition Support Tool](#) for children set to be restored from institutions within the next year. The Transition Support Tool is designed to assist the functionaries of CCIs in managing

and facilitating the critical transition phase for children moving out of the institution. The Transition Support Tool tracks the socio-economic situation, aspirations, and family relationships of children likely to be restored to their families within a year. It assesses the child's understanding of child protection laws, identifies rehabilitation needs, and evaluates their thoughts and feelings about the restoration process. The tool gathers comprehensive information about the child's background, family constellation, education, health, and personal goals, while also considering observations from CCI staff and the assessment team.

This tool supplements the Individual Care Plan (ICP) developed by Children's Home authorities and is currently being implemented in one CCI, where 14 girls are expected to be restored to their families after completing their 10th standard in March 2025.

The combination of the ICP and the Transition Support Tool Plan has been observed to offer a comprehensive roadmap, enabling stakeholders to better prepare for the child's restoration. By working collaboratively with the child, family, CWC, and CCI functionaries, and leveraging provisions of the JJ Act, this approach has proven valuable in ensuring smooth transitions from CCIs to homes, reducing adjustment issues, and minimizing conflicts post-restoration.

The Transition Support Tool can be accessed here. (<https://iacn.in/resource/transition-support-tool/>)

## Footnote

1. Name changed to protect the identity of the child.
2. Orders passed regarding a child in need of care and protection.

# Navigating Life beyond Care: Insights from Care-Experienced Young Adult

**Ms. Anamika Vishwanath,**  
Lead for Youth Programs,  
Miracle Foundation India.

## Voices from Care-Experienced Young Adults

This excerpt is from a conversation between a young adult with lived experience and a practitioner. The young adult was separated from his family because of financial difficulties faced by his parents. His father, a farmer, struggled to support the family and decided to place his child in a Child Care Institute (CCI). The child remained in the CCI for 8 years before being reintegrated with his family. This conversation aims capture the young persons perspective who had no control on the decisions that were being made for him as a child and his reflections of his experience as a young adult.

## Introduction: The Journey Back Home

Transitioning from a Child Care Institute (CCI) back to family life is a profound experience, filled with both challenges and opportunities. In a candid interview, a young adult who has gone through this transition shared their experiences, shedding light on the emotional, social, and practical aspects of reintegration.

## Life in a Child Care Institute

Reflecting on life in a CCI, the interviewee described it as a place where “we got everything that we need to grow like life skills, proper food diet, regular health checkup, and many friends.” This structured environment provided a sense of security and community, where they didn’t have to worry about day-to-day survival.

“Whenever I think about my CCI life, you just don’t have to think about anything, just do your studies.”

## Returning to Family: A Shift in Responsibilities

The return to family life, however, brought about significant changes. “The first thing I noticed was how my family reacted when they saw me.” The interviewee was around 17-18 years old at the time, and family dynamics shifted as they were suddenly expected to make their own decisions. “For the first time in life, I realized that if you live in your family, you have to make 90% of your own decisions.”

The fact that when you live in a family you have a part to play was a realisation, one is expected to do chores, give time to each other “initially my parents used always say don’t give him tasks he won’t know” of course it changed over the course of time as he understood what needs to be done. It made the youth very happy whenever his parents showed support for him to study further or motivated him. He understood how family members support one another and make sacrifices for each other.

## The Reintegration Process: A Complex Transition

Reintegration was not just an emotional journey but also involved practical steps. The interviewee noted that the process included background checks on their family to ensure they could provide a stable environment. However, they felt the transition was somewhat forced: “In reality, I realized whatever they noticed or that is written in the document, those are kind of saying that you are just being forcibly sent from CCI to home.”

The reintegration process was not without its challenges. The interviewee faced the difficulty of adapting to new social expectations: “I faced the biggest challenge that is adjusting yourself accordingly to how people want to see you. I didn’t care earlier but, in the family, it matters” Living in the family made him understand the financial problems faced by the family, but it became a learning experience: “I faced financial challenges, but that also taught me how you can earn at an early age.”

Despite these challenges, the interviewee found ways to cope. They received some support, though limited, from CCI staff, and managed to pursue education with the help of aftercare programs. “I personally started a certificate course because I wanted to do a skilled job, so I made my passion into a profession and now learning with a certificate course.”

Another significant change was in daily living conditions, particularly related to diet. In the CCI this was managed by the process to ensure proper nutrition however living in a family it is dependent on the family’s financial condition and understanding of the homemaker of what construes as a nutritious meal. This adjustment reflects the broader challenges of adapting to life outside the structured environment of a CCI.

Family relationships also evolved post-reintegration, though not without difficulties. The interviewee expressed that while their family tried to help, the financial instability at home made it hard to meet expectations. “Our family wants us to be like a normal boy... there are lots of confusions and expectations that are not really matching.”



## Personal Growth: From Sheltered to Self-Reliant

Leaving the CCI marked the beginning of personal growth and self-discovery. The interviewee admitted that before reintegration, they felt like “just a robot” due to the lack of emotional expression and common sense in social situations. Over time, however, they learned valuable life lessons: “I personally grew in my feelings and how to earn, how to convert your passion into a profession.”

## Social Integration: The Struggle to Connect

Social integration post-CCI remained a challenge. The interviewee shared that they struggled to trust others and make new friends: “We are currently not able

to trust random people. We chat and lose interest in people because there is no environment like before.” This sense of isolation is a common issue among care leavers, highlighting the need for better social integration support.

## Advice for Future Care Leavers

Drawing from their own experience, the interviewee offered advice to others about to embark on the same journey: “Don’t think that you are alone here, just learn how to earn and spend money wisely. How to talk to anyone wisely. Try to be smart, don’t be fooled easily. And last, don’t trust anybody in the world because in this open world, there are lots of people who are always trying to rob you.”

## Conclusion: A Path Forward

The insights shared by this care leaver paint a vivid picture of the challenges and growth experienced during reintegration. Their story highlights the importance of extended support, both emotional and practical, to help care leavers successfully transition into independent living. As they continue to navigate the complexities of life after CCI, their resilience and determination serve as a powerful reminder of the strength required to overcome such profound life changes.

These reflections underscore the need for ongoing community support for care leavers. By understanding their experiences, we can work together to create better systems that ensure their successful reintegration into society.

# Children’s Well Being In Foster Caregiving

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In Collaboration with **Foster Care Society, Udaipur Rajasthan (India)**

## Introduction

This Study gives an account of the foster care system in Rajasthan, Udaipur District and aims to explore the practice which is focused on its various positive impacts on a child’s wellbeing.

Foster care is a non-institutional child care option where children live with extended or unrelated families for temporary care. This report gives an account of a study that explores the wellbeing of children in foster care through a mixed method design, and is the first to explore the dimensions in foster caregiving in India. The research focuses on combining qualitative content analysis and quantitative

analysis of data collected from (8) foster families who have children pertaining to the age group of 4-13. It provides a comprehensive understanding of the complexities surrounding children’s wellbeing in foster care, the journey of a child from an institution to a family-based environment. The findings emphasize the importance of a child’s development in a family environment, and the effectiveness of foster caregiving as an alternative care.

## Background

The Juvenile Justice Act, of 2015, defines foster care as an arrangement where a child is placed in the domestic environment of a family for care and protection.

Alternative care provides protection and well-being to a child who lacks the care of a parental figure. Numerous research studies have confirmed the advantages of placing children in foster care as opposed to institutional settings. The advantages include improved

physical growth, emotional regulation, improved coping mechanisms, and a conducive environment for healthy life. The current study was conducted with the support of Foster Care Society (FCS) in Udaipur, Rajasthan.

Foster Care Society (FCS) is a nonprofit organization based in Udaipur, Rajasthan, India, and works towards providing loving foster homes for children separated or could not be placed in parental care. It solely works under the guidelines given by the Government of India under the Juvenile Justice (Care and Protection of Children) Model Rules, 2016 (as amended in 2022), and now revised Model Foster Care Guidelines, 2024.

This qualitative study explores the benefits provided by the foster care system a crucial component for its effective operation. The results highlight the positive impact of foster care in Rajasthan, addressing the transition of children from Child Care Institutions (CCIs) to family settings, as

well as the challenges and benefits of foster caregiving.

Major reflections of the study were:

- The psychological and physiological well-being of children,
- Parenting styles of Foster Parents,
- The role of Foster Care Society and caregivers in transition to a new environment and maintaining the child's wellbeing,

Literature pertaining to the significance of the studies in this field denotes a picture that shows the detrimental effect of non-family-based care. One study<sup>[1]</sup> suggests that children receiving nonparental care have worse health outcomes, are more likely to encounter instability and disturbances in the caregiving process, and are more susceptible to other socioeconomic antecedents of poor child health (such as abuse, poverty, and neglect). It is instructive to explicitly look at the health risks associated with children living in nonparental care, given the substantial influence that childhood adversity has on health throughout life, and the fact that these risks are higher among children in nonparental care.

In addition, children who are mistreated in institutions for a prolonged period demonstrate various ill behaviors, experience multiple developmental problems, and disturbed personality traits which hamper their functionality in society.

## Conceptual Foundation

Childhood well-being is multi-dimensional, including dimensions of physical, emotional and social, mental, spiritual/cultural well-being; should focus on the immediate lives of children but also consider their future lives; and should incorporate subjective as well as objective measures.

These aspects are directly related to the involvement of parents and the FCS to manage and bring an optimal level of well-being to children who have been in institutions for a long period.

Foster caregiving in the present study is defined as "the temporary care given by foster parents and it relates to constantly providing love and care to the child in all aspects. The subjective aspect of foster caregiving and its impact on children was empirically verified from the quantitative findings of the study derived from the Parenting Style Questionnaire (PSQ)<sup>[2]</sup> administered to foster parents.

The concept of parenting styles was given by psychologist Diana Baumrind in a study where she distinguished between three main parenting philosophies: permissive, authoritative, and authoritarian.<sup>[3]</sup>

Parenting attitudes and practices - A child's growth is largely shaped by the structures that parents create about attachment, approbation, nurturing, and many other aspects. Early parenting setbacks might lead to maladaptive behaviors and an adult sense of inadequacy.

Authoritarian Parenting<sup>[4]</sup> - follow commands without question

Authoritative Parenting<sup>[5]</sup> - Setting Standards and rules with Monitoring child's behavior

Permissive Parenting<sup>[6]</sup> - Responsive not Demanding

In their quantitative study, (Kuppens & Ceulemans, 2019) examined the psychological control component that describes parental and maternal behaviors and how it affects a child's development. They found that these behaviors may have an effect on a child's behavioral patterns. Based on the reviewed literature, it appears that early intervention with an authoritarian parenting style is more effective in preventing delinquent behavior.<sup>[7]</sup>

## Methodology

The present study adopted the mixed method in Qualitative research design where the primary data was collected

through semi-structured interviews with foster parents and a parenting style questionnaire was administered to a sample of 08 foster parents to assess their parenting styles. This research design is taken to look into phenomena that parents have experienced with regard to the well-being of their foster children. Additionally, the interventions given by FCS in terms of training foster parents were also included in the study, including events conducted prior to the study.

## Findings and Discussion

The interviews conducted for the study revealed very comprehensive perspectives on the changes seen by foster parents in the child since the time of placement, the changes ranged from physical well-being to emotional well-being, and social well-being, which provide a good framework for understanding how psychosocial development<sup>[8]</sup> has been impacted because of the placement of children with foster families and the support provided by the FCS to both children and foster parents.

In the interview the accounts provided by the foster parents were observed during the family visit and while conducting the study.

The dimensions focused were:

- the physical domain,
- the mental aspect,
- emotional connectivity towards the parents and the siblings,
- sense of community and belongingness.

One expression of a foster parent given as, "when we came to take our child home, he was very weak and his appetite was very poor, with constant care and adjusting his eating routine, his weight is now proper and he eats well"

These interviews revealed the positive impact foster caregiving has on

children who are deprived of parental care and a home environment.

The quantitative portion of the study examined the parenting style of foster parents. Authoritative parenting was observed to be the most prevalent among foster parents and was regarded as one of the most effective approaches for the overall well-being of the child.

Ways Foster parents interacted with children:

- Interacting in a positive and nurturing manner,
- were able to establish boundaries and healthy limits regarding acceptable behavior,
- Clear about how disagreements should be handled.

These changes were also greatly impacted by the workshop on Positive parenting<sup>[9]</sup>, led by renowned guest and chartered psychologist Dr. Shalini Purohit in December 2023, organized by the Foster Care Society in collaboration with UNICEF. Its primary goals were to provide a caring and supportive environment for the kids in its care and to teach parents about ways to create a home that is safe and conducive to their development.

Here, the children reportedly formed a healthy emotional bond with the parents despite coming from a very traumatic background, illustrating the importance of foster care and the family environment in a child's development regardless of the child's circumstances.

**Phrases that gave an account of the changed behavior and life of children in foster families**

***"My life revolves around her, there is more to life now"***

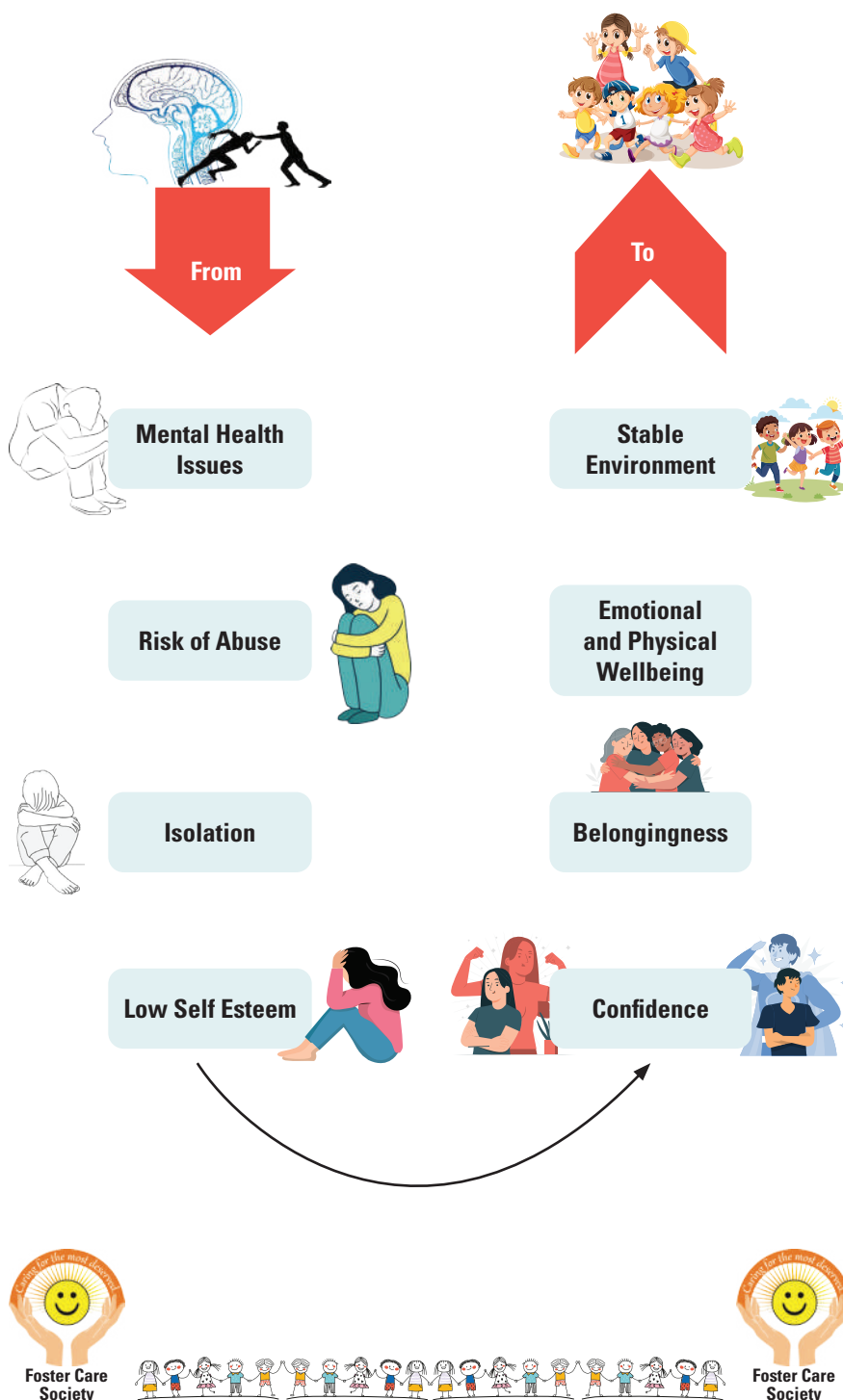
***"He (Child) interacts and gets along with others in the meetings which give him strength and he is happy there".***

***"He has improved physically, he was very weak and malnourished,***

***now over these years his health has improved and he communicates all his problems"***. Developmentally these changes were very evidently seen in children by the members of FCS.

Currently, there are 40 foster families in Udaipur, with children aged 4 to 13. FCS makes rigorous follow-up procedures and conducts pre and post-counseling sessions to help parents and children adjust to each other and support healthy relationships. Post-sessions

equip parents to handle different stages of development and navigate changes they may face. FCS organizes various weeks and activities to connect the child and foster carers, providing knowledge on parenting, skill building, and trust activities. These meetings help foster children feel a sense of belonging and connection. The monthly and yearly activities conducted by FCS play a pivotal role in the adjustment and acceptance of family life.





## Conclusion and Recommendations

With the results presented, it is evident that a family environment is an essential aspect of a child's development. This study represents the major findings in the field of foster caregiving and is evidence of a responsible and effective functioning of the foster care system in Udaipur, Rajasthan, India, which needs more support and acknowledgment.

The testaments presented in the study confirm the impact foster caregiving, has on children and how essential is this anchor for a society to provide each child with a daily environment of love and care in their upbringing.

The stated level of wellbeing of children in different domains of life is very relevant and crucial for the study. This suggests that additional research is needed to examine the more intricate facets of child care in the foster system. Therefore, it is recommended to have an advanced longitudinal study on the subject to capture more nuanced aspects of foster care and its impact on children's well-being while highlighting its scope and applicability.

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12. Authoritarian parents impose strict guidelines on their kids without providing any justification, and they expect them to follow them religiously.
13. While being attentive, kind, and encouraging, the parents also impose strict boundaries on their kids. They use discussion, reasoning, and rule explanation to try to rein in children's behavior.
14. Despite having few rules and regulations, permissive parents are typically quite affectionate.
15. Sarwar, Samiullah. (2016). Influence of Parenting Style on Children's Behaviour. *Journal of Education and Educational Development*.
16. Relating to the relationship between behavioral and social factors, as well as the impact of social factors on an individual's mind or behavior.
17. A collection of parenting practices known as "positive parenting" encourage your child's ability to love, trust, explore, and learn.

## Journey of a Boy from a School Goer to Bread Earner: P.E.R. Framework of Intervention Development

**Sania Girdhar,**  
*Psychologist*

"I am not a criminal; I am just a child who is willing to learn and be successful in life."

### A Story

Nitish (name changed), A 12-year-old boy who lives with his parents and two younger siblings in a one-room house. The walls of the house are filled with the colorful imaginations of all three children. Nitish's life goal is to study hard to become a famous architect in future.

His loving personality enchants everyone he meets. The neighborhood always appreciates his positive outlook towards a fruitful future ahead. Younger siblings feel protected in his presence and respond with a smile to all his requests.

One day, while their mother was cooking and their father was getting ready for work, a few police officials came to visit them at their house. They started questioning his mother and father in a harsh tone. All the siblings saw the scenario and cringed at their brother Nitish.

As a result of the heated discussions, police officials handcuffed the father and took him away in their jeep. From the whole situation, children could only understand that the police took away their father for a crime. This sudden shift in the home atmosphere left mother and children shocked. Mother could not bear the embarrassment and hence committed suicide.

With no awareness of who to approach for psychological, social, legal, and survival support, they started finding ways to adapt and survive. Now, this marks the beginning of the child's

struggle to handle the new scenario.

What do you think would be the first instinct of such vulnerable children?

Will they encounter “separation anxiety”?

What happens to psychological health when your closest and most trustworthy relationship seems to be camouflaged?

What will be their first approach to earning money in view of survival?

Will they drop out of school?

Yes, you are right! They would learn to adapt and survive to the new situation. This prepares them to be the “Masters of Resiliency”(Glick et al., 2021).

Following the arrest of his father for committing financial fraud, that 12-year-old child starts performing the role of an earning member, protector, and sponsor for the father’s bail amount. Hence, he sells all his schoolbooks and buys food with that money. He saves money, purchases toys to sell, and earns his daily bread.

Collateral consequences like dropout from school, becoming the bread earner in the house, change in the place of stay of the child, separation anxiety, developmental regression, poor self-concept, delinquent, aggressive and antisocial behaviors were observed in these children while collaborating with them. Research also has enormous amounts of literature highlighting the above-mentioned collateral consequences in the Handbook on Children with Incarcerated Parents: Research, Policy, and Practice (Mark Eddy & Poehlmann-Tynan, 2019).

All these situations give rise to developing independence, decision-making, and resilience at an early age to survive and many disruptive patterns of growth. (Murray et al., 2012). They lose their closest relationship to the judicial system, which can even leave them traumatized for life (Arditti, 2012). Research in various contexts has pointed out that this is not considered a healthy pattern to develop and grow (Eddy &

Poehlmann-Tynan, 2019). Such children become the default victims of parental criminal investigations (Manning, 2011; Poehlmann-Tynan & Dallaire, 2021).

These children are yet to be recognized as a category for care and protection under the Juvenile Justice Act. Hence, it is necessary to highlight this category and the intervention mechanisms that have been successful in the field. The challenge of working with Children of Incarcerated Parents (C.O.I.P.) is their availability for an intervention program and the stigmatization linked with incarceration of a parent.

It is the need of the hour to approach interventions with an innovative model which is customized to the needs of the children. To develop such model, it is essential to understand the Perceptions, Environment, and Relationships of C.O.I.P. Based on this knowledge, interventions planned, adapted, or modified can result in effective growth-oriented outcomes. Let us dig into the experiential element of children of incarcerated parents’ lives and chart out a framework for intervention development for the empowerment of these young minds.

## P.E.R. Framework

A framework is characterized by its supporting nature in building a concept. This framework of P.E.R. (Perception, Environment, and Relationships) is based on my observation and experience of working with children, which highlights the sensitive areas that support intervention development. Application of P.E.R. is not limited to children of incarcerated parents. This can be applied to children in need of care and protection, children in conflict with the law, vulnerable as well as non-vulnerable populations too. I have used this framework with various age groups and population characteristics; some of them are missing children, runaway children, abused children, minor mothers, CCI counseling interventions, home, and community-based counseling

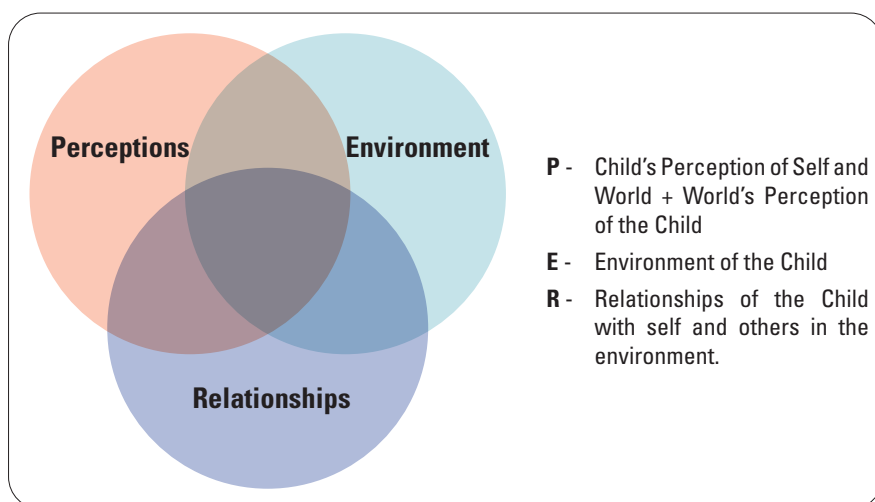
with behavioral modifications, etc. I observed that this framework does not limit itself to population characteristics but can also be adapted to diverse types of interventions. It does require adaptations based on the needs of the population.

## Let us Understand the Framework in Brief

**Perception:** Perception requires an understanding of the child’s attitude towards himself, his environment, and the relationships around him. It caters to how information is registered, analyzed, and represented. In simple words, how a child makes sense of the situations around him and what has led him to such conclusions. It is important to identify with whom or what the child’s perception is linked to.

**Environment:** Environment, on the other hand, is an interrelated concept to perception and relationship. A child’s growth is supported by the environment they reside in, people they look up to, societal norms and beliefs they encounter. A growth opportunity filled environment develops skills to empower the child and carves a path for creativity in solving problems. Research has highlighted in a number of ways how the environment can be a medium of empowerment and skill development (Fernandes et al., 2023; Hill et al., 2014) or traumas.

**Relationship:** A child learns a lot through observation at each stage and his perception of the world is shaped through the lens of his trustworthy relations. Healthy relationships developed with peers, caretakers, and counselors is observed to act as a medium to achieve the needs of love, safety and belongingness. Instability in availability of caregivers causes disruptive trust building patterns with respect to the psychological health of the child. Hence it requires a combination of identification mechanisms, Implementation techniques and analysis of Perception, environment and relationships. This also



**Note:** This is an interactive representation of the framework. For a detailed explanation of its application and adaptability, click on the link attached: <https://forms.gle/7K2PY8QYgK9T5eNM8>

highlights that relationship building is not limited to home; instead, it expands with the involvement of community workers, social workers, and Anganwadi workers.

P.E.R. framework is an outcome of my field experience of developing interventions with children and analysis of an extensive review of literature on intervention programs being developed around the world. Its application needs adaptations according to the residential settings like Institutional care, Community based settings, home-based care, and prison daycares. Access to children while maintaining regularity for an intervention is a challenging task, and hence, they can be classified based on their residential conditions. Therefore, Framework's principles and adaptation mechanisms can be best adapted based on the environment and needs of the population.

For a full explanation of the model with its principles and implementation mechanisms, kindly click on this link: <https://forms.gle/7K2PY8QYgK9T5eNM8>

One bonus for you from my upcoming book on intervention development is as follows:

Institutional Interventions	Home Based Interventions	Community-Based Interventions	Prison Day Care Interventions
Include a purposeful activity with pre-post assessment criteria.	Give the responsibility of empowerment in the hands of parents.	A clown will guide you to connect and empower.	"Jump-Hop-Think-Act" strategy with red light, orange light, and green light.

Learn the "how" of the above Interventions through this link: <https://forms.gle/7K2PY8QYgK9T5eNM8>

## Insights into Future

The major challenge of intervention developments involves trial and error methods, frequent shifts in administrative systems, ineffective and inefficient methods to portray outcomes, recruitment of staff without training, poor attitude towards children, poor assessment criteria's, general interaction and discussions with no goals used as mediums to connect to children, more focus on deficit-based approaches and wastage of resources due to unstable long-term and short-term plans.

Above mentioned challenges are just some of the roadblocks that require attention and a purposeful approach to resolve them.

To conclude, I would like to propose capacity Building sessions as a medium to empower children, stakeholders, and the environment so that they can empower their surroundings.

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# First Person

## Interview with Care Leavers

To understand the transition process from Child Care Institutions (CCI) to independent living for care leavers, the IACN reached out to two care leavers Ms. Anisha, Director, Care Leavers Inner Circle (CLiC), and Mr. Jyoti Kumar Mohanty, Secretary, Odisha Care Leavers Association (OCLA), to capture their experiences and challenges. Both care leavers stayed in CCI due to the loss of both parents at a very young age and left the CCI upon turning 18 years old. The snippets from the interviews are shared here.

**Disclaimer:** The purpose of the interviews was to highlight the practices and challenges in supporting care leavers, not to criticize any particular person, authority, or institution. The experiences shared by the care leavers are their personal journeys and should not be seen as representative of all care leavers.

### Ms. Anisha, Director, CLiC

**Thank you, Anisha, for agreeing to be part of this interview today. Could you**

**tell us about yourself and your journey from being a care-experienced youth to becoming the Co-director of the CLiC Forum?**

Thank you, Kavita! I am currently living in Jaipur, Rajasthan, and I am associated with the Care Leavers Inner Circle Forum as the Director. Before moving to Jaipur, I lived in a Child Care Institution (CCI) in Delhi for almost 12 years. My life in the CCI was very different. I was a confident and carefree child, exhibiting leadership qualities and excelling in many activities. I wasn't worried about anything. However, when I left the CCI upon turning 18, I faced numerous challenges. For starters, I had no place to call home, nowhere to go, and no money. On my very first day, I took my belongings and started looking for a house. I roamed around Delhi searching for a rented room, but no one was willing to rent to me—first because I was a girl and second because I was alone. Luckily, I met a previous caregiver who recognized me, and upon her request and guarantee, I secured a room to rent.

After some time, I met Mr. Girish Mehta (Founder of CLiC) through a friend and he introduced me to aftercare services. Before that, I didn't know there was anything called aftercare. He then connected me with other care leavers he was working with and invited me to a meeting in Jaipur. After the meeting in Jaipur, I could connect with the care leavers and finally felt that I wasn't alone. I then decided that the challenges I faced—feeling isolated and lacking guidance—could also affect others, and that motivated me to join Girish in his journey. That's how I became part of CLiC.

**What challenges did you face when you left the CCI? How did you overcome those challenges?**

I often share that the first day I left the CCI, I was excited about living independently and felt very confident. But soon, I realized I had nowhere to go and where I would live. I called my brother, who also lived in a CCI, and he told me I couldn't stay with him because he lived with his male

friends in a small room. So, my first day was spent searching for a place to stay. After leaving the CCI, my biggest challenge was learning how to live alone. I didn't know where to go for grocery shopping, how to travel alone, or which bus or metro to take, and I often got lost. Instead of taking any transport, I would walk everywhere. Another significant challenge was preparing my documents, like my PAN card, and changing the guardianship on my bank account. I dreaded going to the PAN card office or the bank, fearing they would ask questions about my family and require my parents' documents. I avoided it for a long time, but when I started a job, I needed those documents. I eventually learned how to prepare them.

I had some money (received as part of sponsorship) but it was in my bank account under the guardianship of the CCI in charge, so I couldn't withdraw it immediately, which made it incredibly difficult to manage.

**What crucial steps did you observe during your stay in the CCI that helped with the transition to independent living?**

While in the CCI, we had all our facilities taken care of by the staff. We had transportation to go to school, but we were not trained to manage anything independently. In the CCI I attended, boys were allowed to go out and do grocery shopping and travel by bus on their own. However, girls were not given the same opportunities. I believe this made our transition to independent living even more challenging. Although the CCI provided education and financial support, I didn't observe any preparation for the transition to independent living. I feel the CCI should invest in this preparation; without it, we struggle to manage on our own. There was not much discussion about aftercare during my time at the CCI. They were also not aware of the

aftercare services or schemes. In the past few years, I have observed there is now a lot of discussion around aftercare services for children and in fact, some of the CCIs are contacting the care leavers network or collaborating with them to support the children.

**What motivated you to join a network for care leavers?**

My biggest motivation for joining this network was to help other care leavers with their transition process. I know I cannot eliminate the hardships of independent living, but at least I can offer support and guidance, unlike my own journey. Another motivation was to change the societal perception of children living in CCIs or care leavers. It saddens me to witness how CCI staff interact with children who are already experiencing trauma from being abandoned by their parents and relatives. When CCI staff express negative sentiments about a child's parent—such as mentioning that their mother ran away—right in front of them, it can deeply impact the child's self-image and perception of relationships. I believe it is crucial how CCI staff communicate with children. I want to change the negative, prejudiced communication patterns to more positive and respectful interactions, fostering a better self-concept for the children when they leave the CCI. Lastly, I am very grateful for the mentors I have met while working with CliC, who continue to motivate me to help other care leavers.

**What kind of support and services does your forum provide to youth leaving care, and how does that support help them become independent?**

We run a help desk for care leavers and those about to leave, providing guidance and counseling while linking them to various services based on their needs. Our approach is not limited to specific types of support; we remain

flexible and responsive to the needs of care leavers.

We provide computer skills training through our program called 'Super 30' and link them to various IT programs. We also help care leavers find suitable jobs, offering career guidance and job readiness support. We also assist them in maintaining job stability by providing counseling on how to handle workplace challenges. We conduct awareness programs for care leavers and children living in CCIs, especially those aged 16-18, to inform them about available aftercare options, schemes, and relevant laws. Additionally, we collaborate with various organizations and companies to create job opportunities for care leavers.

**As your organization helps youth transitioning from the CCI to independent living, what challenges do they face, and what obstacles does your organization encounter in this process?**

Stability in employment is one of the biggest challenges we observe among care leavers. Many leave their jobs frequently and often have a low tolerance for authority figures. They tend to quit over minor issues, making it difficult for them to find new placements. I believe this stems from their lack of experience in building workplace relationships. When I started working, I also considered leaving my job whenever my supervisor criticized me. However, I had mentors who taught me how to navigate workplace dynamics, helping me continue my employment. At CliC, we recognize this issue, which is why we provide ongoing support to care leavers after placement until they adjust to their work environment. We focus on counseling them about how to handle workplace stress and improve their interpersonal skills.

Another significant challenge, particularly in Rajasthan, is the prevailing mindset about rehabilitation.



Marriage is often considered the best option for girls, providing them with shelter, food, and security. Unfortunately, many girls feel pressured to marry, even when they don't want to because they lack alternative options. We strive to inform them about various opportunities however lack of educational opportunities and safety issues for girls after leaving the CCI further complicates their ability to live independently, leading them to marry someone chosen by the CCI. We have encountered many failed marriages, where girls either leave the marriage or suffer from domestic violence. Since they often forgo education, they end up in menial jobs. Changing the mindset of CCIs, aftercare facilities, and even the girls themselves is a significant challenge for us.

**When you interact with children living in CCIs about leaving care and supporting themselves, what is their response? Do they worry about it, or are they excited to be out of the CCI?**

Children between the ages of 16-18 are aware that they have to leave the CCI, and they often feel scared to live by themselves. They start making connections with friends who have already left the CCI (care leavers) or with schoolmates for support. At times, they even try to approach nearby shops or tea stalls for work. They are constantly worried about how they will manage on their own. The lack of guidance makes them even more anxious, leading them to take any job they can find, it makes it incredibly difficult for these children to trust others when they leave. To address this, when we visit any CCI and interact with the children, we share our contact numbers and put up posters on the CCI walls so that they can reach out to us.

**According to you, what should the government do to support youth leaving care and help them become independent?**

- A. The government should place qualified, trained, and skilled staff, especially counselors, in CCIs who can guide and counsel children on independent living, career guidance, and linking them to appropriate agencies and schemes.
- B. The government should run sensitization and training programs for CCI staff so they can provide the skills children need for independent living.
- C. We should promote internships for social work students in rural areas to reach children who are not easily accessible and have limited information about aftercare. While children in cities may receive some information, those in rural areas often do not. Placing social work students there for internships would be beneficial for these children.
- D. District Magistrates should make proactive efforts to link children with various schemes and ensure that they receive sponsorship in a timely manner. Ideally, children should be linked to these schemes before leaving the CCI.
- E. Child Welfare Committees (CWCs) and District Child Protection Officers (DCPOs) should actively ensure that children are aware of and linked to aftercare services.
- F. CWCs, DCPOs, and District Magistrates should review the situations of children leaving care every six months to assess their needs and provide necessary support.

**Mr. Jyoti Kumar Mohanty,  
Secretary, OCLA**

**Thank you, Jyoti Kumar, for agreeing to be part of this interview today. Could you tell us about yourself and your**

**journey from being a care-experienced youth to becoming the Secretary of the Odisha Care Leavers Association?**

Thank you, Kavita! I am currently living in the Puri district of Odisha and serve as Secretary of the Odisha Care Leavers Association (OCLA). I also work as an accountant in the Tata Project's titled 'Adult Literacy Program.' After leaving the Child Care Institution (CCI), I worked in different organizations in various roles.

I was very young when I lost both my parents in an accident, and in 2003, I came to the CCI. I stayed there until 2010. When I turned 18, I was informed that, according to the law, I had to leave the CCI. I had completed my 10th grade at the CCI, but I wanted to continue my studies. With the help of a friend, I started offering home tuition, which helped me sustain myself and fund my education. Later, when I joined CHILDLINE (1098) at YCDA, I learned about the Juvenile Justice System and the challenges care leavers face after leaving CCIs. This prompted me to discuss these issues with the YCDA team, and they encouraged me to connect with other care leavers. They introduced me to the concept of aftercare and the services that could be provided. This is how I started OCLA, and today we have over 250 members. We are now registered under the Trust Act.

**What challenges did you face when you left the CCI, and how did you overcome them?**

After leaving the CCI, I had nowhere to go. When I called my grandfather and uncle for help, they refused. It was a very difficult period—I was confused and worried about where I would live, what I would eat, and how I would continue my education. The thought that kept running through my mind was, "I have no one of my own in this world." I had no documents either—Aadhar Card or PAN Card—so I felt like I had no identity. It was a depressing



time. Fortunately, a friend helped me find children to tutor and allowed me to stay at his house for a month. The money I earned from tutoring funded my education, and I was able to enroll in 12th grade and then college.

There were times when I couldn't afford proper meals. But thanks to my friends, I managed to sustain myself.

At that time, there weren't many aftercare services for children leaving CCI, and even the institutions were unaware of the support available for care leavers.

### **What steps during your stay in the CCI helped you transition to independent living?**

During my time, the focus in CCIs was mainly on education. However, things have changed now. CCIs are providing more support with education, skill development, sponsorships, and connecting children with care leavers associations when they leave. This is a very positive change.

When I was in the CCI, we had a tutor to support our education, and our educational needs were taken care of, but there were no skill development trainings or courses, likely due to a lack of funds. There was also no sponsorship available, which could have made a big difference in my life. I only learned about aftercare services and sponsorship when I started working at CHILDLINE(1098). By then, I was already able to take care of myself.

### **What motivated you to join a network for care leavers?**

While working at CHILDLINE(1098), I learned a lot about the child care system and met many other care leavers who faced struggles after leaving CCIs. This made me realize that many care leavers in Odisha were likely

going through the same challenges I had faced.

I decided to connect with them. I started by forming a WhatsApp group of care leavers and offered to help those in need. Initially, 25 care leavers joined. When I shared this with YCDA team, they encouraged me to expand the group, offering guidance and technical support. That's how our small group eventually grew into the Odisha Care Leavers Association (OCLA), which now has more than 250 members and is registered under the Trust Act as of January 24, 2020.

### **What support and services does your forum provide to youth leaving care, and how does it help them?**

Our network reaches out to children aged 15 or older living in CCIs. We work with CCI staff and CWCs (Child Welfare Committees) to provide counseling and information about aftercare services. After assessing their needs, we link the care leavers with different schemes and support them in their education, and job placement.

We link care leavers with government initiatives like DDU-GKY (Deen Dayal Upadhyaya Grameen Kaushalya Yojana) for skill development, which helps them find jobs. We also offer ongoing counseling until they are settled in their jobs and personal lives. For girls, YCDA has built a short-stay home where they can stay until they find a job.

### **What challenges do youth face when transitioning from CCIs to independent living, and what obstacles does your organization face?**

Matching a care leaver's education and skills with the right job is a challenge, and job stability can also be difficult. Documentation is another major hurdle—many care leavers don't have

identity proof like Aadhar or PAN cards, and arranging these documents can be costly.

Funding is our biggest obstacle. Although YCDA sometimes helps, we do not have regular funds to support care leavers with skill development or self-employment opportunities.

### **What are the feelings of children in CCIs about leaving and supporting themselves?**

Most children in CCIs today are aware of aftercare services thanks to increased awareness. Many children contact us through social media or are connected with us through CCI staff. However, there are still a few CCIs that are unaware of aftercare, making it difficult to track down some care leavers.

Children often feel anxious and worried about leaving CCIs, but they know there is support available now, unlike in my time when I wasn't aware of any aftercare services.

### **In your opinion, what should the government do to support youth leaving care and help them become independent?**

- The government should ensure financial support and temporary accommodation for care leavers.
- They should also guarantee that all identification documents are provided to care leavers before they leave the CCI.
- CWCs, CCIs, and DCPOs (District Child Protection Officers) should provide proper information about aftercare services and counsel children on available support, helping them link with aftercare services.