The conflict between theory and practice in caring for children: Field narrative of a Social Worker

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Abstract

Every child is vulnerable just by virtue of being so, but upon entering the juvenile justice system, this vulnerability is aggravated due to a myriad of reasons such as violence, abuse and neglect, amongst others. This is the plight of 5% of the total population of children in India as per government statistics from 2018. With this in mind, where do we stand at protecting these children, giving them the needed care, support, resources and guidance and ensuring their protection and development once they are declared as children in need of the system’s care and protection and sent to live in a child care institution? This paper attempts to bring to light, through the experiences of a social worker in India, the present day conditions of the children and the staff in these homes, focusing on the gap between what exists in theory in the law, the increase in the intensity of the trauma that the children experience in a place that is solely built with the purpose of taking care of them, the practical gaps in implementing laws and policies and hopes to provide suggestions to improve these conditions. The author works as a training coordinator with a leading child and youth care organisation based in Delhi and is currently implementing a state level project to support transitions from care and aftercare to care leavers.

Keywords

Care-givers, children's homes, institutional context of care, children without parental care, India

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Hume raat ko daraawne sapne aate hai ki hume yaha se nikaal ke
Aftercare home mein bhej diya gaya hai
‘I get nightmares that I have been sent from here to the aftercare home’, said
Shalini* (* all names have been changed to protect the privacy of the children and young adults), a 17-year-old girl in a child care institution, to a social worker during a life skills workshop about the transition phase from the child home to the aftercare facility, provided by State government.

India’s National Policy for Children (Ministry of Women and Child Development, 2013) seeks to address the issues pertaining to children in need of care and protection. One of its main objectives is expressed as follows:

To secure the rights of children temporarily or permanently deprived of parental care, the State shall endeavor to ensure family and community-based care arrangements including sponsorship, kinship, foster care and adoption, with institutionalization as a measure of last resort, with due regard to the best interests of the child and guaranteeing quality standards of care and protection.

The Juvenile Justice (Care and Protection of Children) Act, 2015 provides the meaning for ‘child care institution’ as a:

Children Home, open shelter, observation home, special home, place of safety, Specialized Adoption Agency and a fit facility recognized under this Act for providing care and protection to children, who are in need of such services.

When Shalini shared her fears, the other girls agreed with her, expressing how they would love to work and study and undergo any training necessary, if it would result in them getting a job once they turn 18 and not move to the aftercare home. The huge walls, the small dingy rooms, the constant smell of something rotten and the sense of fear, all of it reflects the narrative of the children, feeling like being in
institutional care is similar to being imprisoned. This mutual feeling across child homes defines the normal or the ordinary for them.

Reena*, a 19-year-old girl living in an aftercare home, bursting into tears, expressed her fear of never finding a way to leave the home because she does not have a family who could take her away from there. She says this is what the other girls have told her, too, when there were fights and arguments amongst the girls.

The children of a child care institution expressed a desperate need to get out of the home. Their idea remains that while they lack a home that they call their own, they cannot make something of their lives. Their mental health being in shambles, there is a constant threat of self harm. A 19-year-old boy, Prabhat*, was found with blade cuts across his throat and arms as a result of having false promises made to him about his time in the children’s home and how soon his parents would take him from there. This boy was rescued from child labour when he was brought in and then he had lived with a foster family that he had gotten attached to. Having gone through the phase of being taken away from a family twice had taken a heavy emotional toll on his sense of security and the idea of attachment. Lack of a counsellor in the home and the insensitivity of the staff to his situation drove him to act in this manner and when spoken to, the only thing the boy kept asking for was to go home, to his family.

As in the case of Prabhat*, institutions can fail to provide the care and support that a child needs. The standards of individualised care may be compromised because they cannot devote attention to the specific and varying needs of each child in the institution as the ratio of children to staff is usually higher. Research has shown that children who live in institutions from an early age, especially those between the ages of (0-3), experience developmental delays that adversely affect their physical, psychological and cognitive growth with long lasting consequences at times (Better Care Network, 2009). One of the most neglected groups of children in these homes are the children with special needs. With the provisions mentioned in the Juvenile Justice Act 2015 for the children with special needs, there is hardly any
in the field. Special educators, counsellors, psychiatric help, tools designed for their help and development; even if attempts are made to make these available, the quality of the service provided is inadequate. For example, an untrained special educator lacks the sensitivity and the skills required to work with children with special needs.

The children constantly also ask: ‘why me’? They seem to want to understand their faults and in the process, when they don’t get the professional help that is needed, they end up finding themselves to be the culprit within their own life. They start justifying the abuse and neglect that they have been through. Similar experiences of everyone around them solidify their idea of this being their normal. Ansh*, a seven-year-old child, asked his care givers in the home to somehow bring his mother there to speak to him so that he can apologise for not being a good child and not listening to her, and promise her that he would be good so that she can take her back home. A 19-year-old girl in an aftercare home said that she would listen to her mother when she asks her to please a man so that she would get her out of the institution and take her back home. She has now internalised the thought that she is being punished for not listening to her mother and she should have because the mother would know the right thing to do.

The trust issues that these children have developed come from deep root causes. The abuse and neglect that they had suffered, which made them reach the institution in the first place, was never actually dealt with; instead the abuse within the institution, lack of an enabling environment, unavailability of trained counsellors, and the false promises by staff, make it absolutely impossible for them to see hope.

Asha Bajpai (2017) explains that many children who have both parents are sent to institutional care because the parents, coming from a background of deprivation, see these institutes as hostels for children to get education, food and learn discipline. The ground reality in some of the homes is different. As per the observation from the homes visited, it was found that the children are not being
sent to schools due to so-called safety issues, and there is a common teacher for all, to teach the children of all ages and capabilities. Sometimes there are sunshine stories, too. Raj, a 16-year-old boy in one of the homes, aspires to be an engineer and has recently applied to take his class tenth exams, by open school. He shared about the efforts the authorities and care givers had put in to make sure his documents could be managed and was allowed to sit for the exams because they believed that the child had a bright future.

An example of utter insensitivity: a couple had visited a home to celebrate the birthday of their child with the children of the home. The children were made to sit on a dirty mat, while the cake was being cut. Once the cake was cut, the attendant served the cake to the children, picking out lumps with his hand and dropping it on the dirt covered hands of the children, who had not taken a bath for days. One reason this jumped out at me was for children’s regular complaints of stomach aches and headaches, and other infections; of course, these could also be a sign of mental and emotional trauma in physiological forms. The girls from one home shared that on their hospital visits, the staff at the hospital treated them ‘like they [were] as dirty as beggars from the street’.

A long history of institutionalization also produces problems for young adults when they leave institutional care and try to reintegrate into society, leading to much higher rates of homelessness, aggression, difficulties finding employment, criminal activity, and depression resulting in high rates of suicide. The aftercare system in the country is in the doldrums. So a child in need of care and protection may turn into a child in conflict with law (Bajpai, 2017, p. 203).

The idea of safety and protection of children who are living in child homes runs deeper than any other rights. The right to protection has overshadowed the right to development and participation almost entirely. The constant refrain, ‘it is for the safety of the children’, from the authorities and care givers sounds like a lame
excuse for getting away scot free for not providing opportunities for development. The children are not being sent to school because they will be unsafe. The children are not allowed to go the market because they will be unsafe there. The children cannot go to a playground because they will be unsafe. And this idea is even more entrenched through gender discrimination. A girl shared a story of her employment offer letter being ripped into pieces in an Aftercare home because the authorities and care givers would not know what to do if she got raped and ended up becoming pregnant, so ‘for her own safety’ it was better if she stayed within the confines of the home.

India’s Centre for Human Rights and Law, in a short movie, ‘Ek Tha Bachpan’, very poignantly brings the reality of how the children who once enter the juvenile system suffer at the hands of the institution, due to various reasons. Some of them, due to lack of sensitivity and training for authorities and care givers and overcrowding in these institutions, lead to lack of attention to the children’s individual needs.

Institutional care fails to provide holistic development to children due to various factors. Some of the common factors impacting the lives of children under institutional care include basic necessities like proper and nutritious food, health and shelter, shortage of staff and lack of adequate furniture, physical abuse and sexual abuse. The need of the hour is to improve the quality of institutionalised care and to revolutionise family care (Williamson & Greenberg, 2010).

The UN Study on Violence against Children (2006) identified care institutions as one of the five settings where violence against children occurs. It mentions that children in institutions ‘are at risk of violence from staff and officials responsible for their well-being’. Inappropriate institutionalization can compound the effects of abuse and neglect, and contribute to the suffering of children and the harm done to them (Bajpai, 2017, p. 203).
With the recent global and national thrust on de-institutionalisation and movement towards family-based and family-like care, there also needs to be an understanding that institutions are necessary for the children for whom family alternatives are not available. Data released in a Government of India Report titled *The Situation of Children in India* (2018), published by Ministry of Statistics and Program Implementation, indicates that 5% of the total child population is orphaned. That is almost 23.6 million. Child homes are needed as the number of ‘children without parental care’ are humongous, as well as, these options are still at a nascent stage, and need a lot more in-depth understanding, trainings, on the part of authorities and care givers, and society at large. In the meantime, there is an urgent need to develop debates, discussions and attempts on sensitisation, training, and follow-up and regulating the staff, authorities and care givers, to enable them to follow the provisions of the juvenile justice policies.

The staff need to be trained in treating children as individuals not as inmates; the interactions need to be in a response-contingent manner and the children should be encouraged to take the lead wherever possible. Structural changes of reducing the number of children in each home should be handled at an urgent basis. This would help in multiple ways. It would help the authorities and care givers be able to maintain relationships with the children, not feel a constant burn-out and overlooking care would become more practically possible. The same is needed for social workers; they need to be assigned less cases in order to maintain focus.

There is a need to understand the plight of each individual that works in a children’s home. The mental health facilities that are required for children are equally required for the authorities and care givers, staff and social workers in order to cope with the trauma that they constantly soak in. More recruitment is required for these roles in order to lessen the burden. It is high time that focused efforts be made towards drastically improving the plight of these children and young adults and change the notion of this being their ordinary. These extraordinary yet crucial steps will eventually be beneficial for the children living in care while to exercise the children’s right to a family life, the process of moving from institutionalisation to
family based and family like care can continues. As one of the young girls reflected: ‘I sometimes feel special and happy to be part of these ordinary interactions that engage us through workshops and leave us with positive experiences’.

References


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**About the author**

Shivangi is a trained social worker currently working with Udayan Care in its project to support careleavers in India and is mentored by its managing trustee, Dr Kiran Modi.