



TWITTER CHAT REPORT

21st February, 2023

DEINSTITUTIONALISATION: DECODING THE 'WHAT' AND THE 'WHY'

The Twitter Chat on **Deinstitutionalisation: Decoding the ‘What’ & the ‘Why’** hosted by Prerana in collaboration with India Alternative Care Network (IACN) on 21st February 2023 saw some crucial insights flowing in from sector experts – Catalyst for Social Action (CSA), Child in Need Institute (CINI), India Alternative Care Network (IACN), Miracle Foundation India, Prerana, Udayan Care and UNICEF India.

The key responses from the Twitter chat have been clubbed and compiled together as below:

First Question

What is Deinstitutionalisation (DI)?

- DI means restoring children who have remained in long-term institutional care without any assessment of their needs. It also means restoring children who are no longer in need of care and protection, as per Section 2(14) of the JJ Act 2015.
- DI refers to the process of moving children out of large, institutional care settings, such as CCIs and group homes into biological families, or smaller, family-based alternative care settings, such as foster homes or adoptive families.
- It also involves identifying children in institutional care, conducting timely and effective assessments to ensure that institutionalisation is availed as the measure of last resort, and developing alternatives in the community for children who don't need institutional care.
- For children who are orphans or those who cannot be restored to their families, DI could mean placement in family-based care options such as Adoption, Foster Care, and Kinship Care. It enables a child's rights to a family, to be loved, safe & protected from violence, neglect & abuse.
- As per the [NCPCR report](#), there are 2.56 lakh children growing up in 7000+ childcare institutions in India. Almost 80% of children growing up in institutions in India have parents /family. They are placed in institutions mainly due to extreme poverty and the incapability of their family to take care of them. DI and family strengthening should begin from the time the child is admitted to a Children's Home. It is crucial to actively engage families, communities, child protection services and existing support systems in the child's rehabilitation provided it is in the best interest of the child.
- DI is not only limited to transitioning children back to the community but also preventing re-institutionalisation through family strengthening. It is a multidimensional plan for the child's holistic development that should be evolved in consultation with them and their family.
- Families carry out crucial socialising, protective, economic, mediating, and nurturing functions for children. These functions are essential elements for improving developmental outcomes, which are in turn supportive of long-term human and social capital development.
- It is a paradigm shift in approach from reliance on institutional care to family-based care for the best interest of the child and an effort to provide children with non-parental support and an opportunity to grow in social setups in their own socio-cultural environment.
- DI is a global policy that seeks to relocate residents in institutional care to community-based housing accompanied by the development of services that support participation in the community.
- DI entails redirecting financial, material, and human resources from Institutional Care towards family-strengthening measures, and developing quality community-based services for children and families.

Second Question

What are some myths and misconceptions around Deinstitutionalisation (DI)?

Existing myths and misconceptions around Deinstitutionalisation:

DI entails rapid closure of institutions, and/or unplanned restoration of children without adequate follow-ups, which can have the worst outcomes for children.

- This is not true. In reality, DI means a planned process, children are placed in their biological families or family-based alternative care arrangements, such as foster care, group foster care, and adoption that are intended to provide a safe & supportive environment. Care Homes/ Institutions that are small and are there for a short stay will always be needed in any care system. DI does not aim to close the institutions but it aims to address unnecessary reliance on institutional services for long term.

Children belonging to socio-economically disadvantaged groups will be better off living in institutions rather than with their families.

- This is not true. Children thrive when they grow up in families surrounded by love, support, and security. Most families would not leave their children behind in Child Care Institutions (CCIs) if they are provided with the right support to care for their children.

All children in CCIs should be deinstitutionalised.

- No. Decisions regarding DI have to be taken on a case-to-case basis. It may not be suitable for all children especially those who have faced abuse within the family. While institutional care is supposed to be the last resort, it might be necessary for children in difficult circumstances till the time they can be safely rehabilitated and restored to their family or family-based care system.

Replacing government-run Children's Homes with ones run by voluntary organisations is the solution to providing adequate institutional care to children.

- Institutional care might be necessary for children in difficult circumstances till they can be safely rehabilitated into their family or family-based care system. Thus, the priority and focus should be on providing quality care in institutions whether it is run by Government or Voluntary organisations. The priority and focus should also be to have a complete understanding of the definition of CNCP as per section 2 (14) of the JJ Act and also understand that all CNCP children may not require institutional services. Children can be supported through family-based alternative care services.

Once institutionalised, a child should remain in an institution until they turn 18.

- It has been found that the majority of the children have one or both parents alive & are placed in institutions owing to their disability and poverty or crisis situation in families. An important component of DI is to strengthen a child's family, to prepare and regularly review the Individual Care Plan of the children, and to assess their progress and the possibility of

restoring them to their parents or family-based care. This ensures that children are not placed in Child Care Institutions for long term.

DI can incur very high costs, making it almost impossible to implement it.

- This is not true. Research has shown that DI can be cost-effective in the long term and that it can lead to better outcomes for children, families, and communities.

Moving children from large institutions to smaller, family-based settings would result in a higher rate of child abuse.

- Research has shown that abuse is less common in family-based settings, in fact, they provide a stronger support system to children, and children in institutional care may be at higher risk of abuse. Further, children who face abuse in the family may not be able to return to their own family, but they can generally still be moved into an alternative family situation. This could be in the extended family, in a foster family, or through adoption. That needs to be decided as per the needs of the child.

Institutions are running for a long period of time, therefore, on humanitarian grounds, one should not promote DI as many people will lose their jobs.

- A shift from Institutional care to family-based care requires more human resources working with communities and families. Therefore, in moving away from institutionalisation the current staff of Child Care Institutions can be trained and recruited as community outreach workers, who can work with families and communities to strengthen them by providing adequate guidance and linking them to the existing schemes and other support systems.

Third Question

Why is Deinstitutionalisation an emerging need for the holistic development of children?

- As reported by the Press Information Bureau, 77,765 children were in CCIs during 2019-20 in India, and 77,615 during 2020-21. Over the last few years, various researchers have established that even the best institutions can't evolve as a replacement for family-based care.
- Children raised in CCIs often show traits of delayed cognitive & physical development, low self-esteem, deviant attachment, etc., which constitute what is called Institutional Child Syndrome. They also stay deprived of opportunities to develop attachment within relationships, due to their limited contact with the staff and caregivers. At a later stage, this results in difficulty to evolve new relationships and trust them.
- Most children in institutions have families who can be supported to keep their children with them. Poverty and education should not be reasons to separate children from families and stop them to have a bond with them.
- When children are moved into institutions for long-term care, they become invisible to the community they belong to. Hence, communities don't feel responsible for those children and their needs remain invisibilised.
- Institutions offer "one service fit for all" which actually has an adverse impact on the holistic development of a child. Moreover, due to inadequate child-staff ratio, changing work shifts,

and regular transfer of staff, children raised in institutions miss out on the opportunity to develop a continuous attachment with a primary caregiver.

- DI encourages child protection stakeholders to identify the root causes of institutionalisation and overcome structural barriers. It is crucial to acknowledge alternative forms of care and direct existing resources towards that cause to support the development of communities.
- Family-based alternative care provides an environment that is better suited to children's needs which results in better physical & mental health, better educational & employment prospects, & stronger relationships with family & community.
- It can be cost-effective in the long term, as it reduces the need for large, expensive institutions and can help to improve children's health and social outcomes, reducing the need for future intervention and support. By reducing the use of institutions and investing in family based-based care, resources can be better used to support the needs of children and families.
- Placing children in alternative care helps them with life skill necessary for being resilient decisive and responsible adult, Community and families not only provide for children but also helps with identity and personality development, and most importantly, it enhances belongingness.

Fourth Question

How do the current legal frameworks and guidelines reflect the significance of Deinstitutionalisation?

- India's National Policy for Children 2013, Juvenile Justice Act 2015, Mission Vatsalya Scheme, UNCRC, and UN Guidelines for Alternative Care uphold family-based and non-institutional care services affirming a child's right to a loving family.
- The Juvenile Justice (Care and Protection of Children) Act 2015 highlights institutionalisation as a measure of last resort and recognises institutional care as short-term, medium-term, and long-term care. It also acknowledges other forms of alternative care, family responsibility, and the role of Children's Home in engaging with families when children are in institutional care. It also promotes the use of alternative forms of care, such as foster care, and seeks to reduce the use of institutional care.
- Integrated Child Protection Scheme provided a comprehensive and integrated response to child protection and sought to reduce the use of institutional care by promoting alternative forms of care, such as foster care and adoption. From 2021-22 onwards, the ICPS scheme has been subsumed under Mission Vatsalya. It also promotes family-based non-institutional care of children, extending support to children in difficult circumstances to prevent them from being institutionalised.
- The Ministry of Women and Child Development, Government of India has issued guidelines for the implementation of foster care in India outlining the procedures for placement of children in foster care, the roles and responsibilities of different stakeholders, and the support and services that should be provided to foster families.
- The National Policy for Children, 2013 recognizes the importance of DI and promotes the use of alternative forms of care, such as foster care and adoption recognizing the need for a shift from a welfare-based approach to a rights-based approach to children's care and protection
- The United Nations Alternative Care Guidelines highlight the need to support efforts to keep children in, or restore them to the care of their families, strengthen alternative care solutions that suit that child's best interests, and provide holistic development.

- The UN Convention on the Rights of the child mentions that children should live with family, siblings should not be separated, should be prevented from harm and abuse, and their opinion should be listened to.

Fifth Question

Going forward, what measures can be taken up to mainstream Deinstitutionalisation in the child protection system?

- The first crucial step is to curate a working definition of DI and build an understanding of it and the processes associated with it through relevant experiences of organizations.
- It is essential to create regional and national platforms to discuss notable practices and models on DI and family-based care with sector experts and stakeholders and enable cross-learning.
- It is crucial to engage diverse stakeholders in the child protection space through timely training and consultations. The discourse around DI should begin, specifically with demystifying and sensitizing child protection stakeholders to the concept.
- There is a need to improve data collection and monitoring to better understand the nature and extent of child protection issues in India, track progress in reducing the use of institutional care, and promote alternative forms of care.
- It is also essential to improve inter-agency coordination so needs of children are at the forefront of decision-making and service delivery, develop protocols for information-sharing and collaboration between agencies and ensure that children's rights/needs are protected throughout.
- Adequate funding and resources are needed to support the implementation of DI and to provide quality care, support, and services to children in need.
- Existing practices and good models must be documented and replicated to make the system stronger through collective support. Care leavers must be engaged to become care reform champions.
- Family-strengthening state-specific social welfare schemes for sponsorship and foster care also play a crucial role in strengthening DI interventions. Schemes such as the Bal Sangopan Yojana (BSY) in Maharashtra have emerged as key support systems for children & their families. BSY provides financial assistance to children who lost their parents while they were under 18 years of age, or if their parents are unable to look after them due to any calamity, death, separation, chronic illness, or abandonment by one parent.
- It is essential to strengthen families in crisis with social protection, expand family and community-based care services for vulnerable families, and create suitable family-based care options with kin, relatives, or foster care for children without parental care.
- While discussing strategies for DI, it's important to strengthen community-based childcare services like daycare centers, crèches, and drop-in centers. Such services will over a period of time reduce the demand & need for institutional care.
- If families are provided support with livelihood & employment opportunities, educational sponsorship & access to social security many children wouldn't require institutional care. In this way, institutionalisation can be availed as a measure of last resort.
- Three strategies are important to promote DI – utilizing a local approach, a decentralized implementation structure, and capitalizing on traditional alternative care practices.